



# e-Network Forum

## CALIFORNIA BLOOD BANK SOCIETY

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### *Is routine donor screening for unexpected antibodies really necessary?*

**A Canadian colleague** reported that she has worked for several years in a donor center laboratory and is struck by the amount of time and resources invested in screening for unexpected red cell antibodies in all blood donors, followed by antibody investigation if an unexpected antibody is detected, and often resulting in blood product discards. She wonders if red cell antibody screening on blood donors will always be required and she hopes someone can remind her why all this work is necessary.

In response to the above, the following replies were submitted.

1. **Editor's NOTE:** Please see the following references on this issue:

- [E-Network Forum discussion](#)
- Article by [Dr George Garratty](#) of the American Red Cross - Am J Clin Pathol 1998 (reference only)

2. **Another Canadian blood banker** is of the opinion that it is **absolutely unnecessary** to be screening for donor antibodies other than antibodies to ABO and, perhaps anti-D. He justifies his opinion as follows: (i) evidence for serious adverse outcomes resulting from the transfusion of alloantibodies other than anti-ABO and -Rh(D) contained in donor units to individuals that would, by chance, have the corresponding antigen(s) is lacking in the literature. Perhaps this is mostly due to the routine screening for these donor antibodies, but one has to consider that after infusion these antibodies would be severely diluted and thus, any possibility of instigating a detectable problem in the recipient would likely never happen. (ii) most, if not all blood is now transfused as red cells having very little plasma (see Web Master comment below). For infusion of blood or plasma for intrauterine or newborn/infant transfusions and exchange transfusions, where, perhaps it may be more important to avoid infusion of donor antibodies, a minor crossmatch could be performed on a case by case basis. He believes that the main reason that screening has carried on is for donor centers to identify those donors having alloantibodies of high enough titer, or that are extremely rare, for use as typing antisera in serologic investigations.

**(Editor's comment:** The responding colleague did not comment on the presence of unexpected red cell antibodies that might be present in blood **components other than RBC** concentrates, such as FFP and platelets).

Please submit comments to the [e-Network Forum](#).

[Ira A. Shulman, MD](#)  
CBBS e-Network Forum Editor & Moderator



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**Addenda:**

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