

# Case study 2 Anti-D or not?

Tracey Tomlinson RCI, Colindale

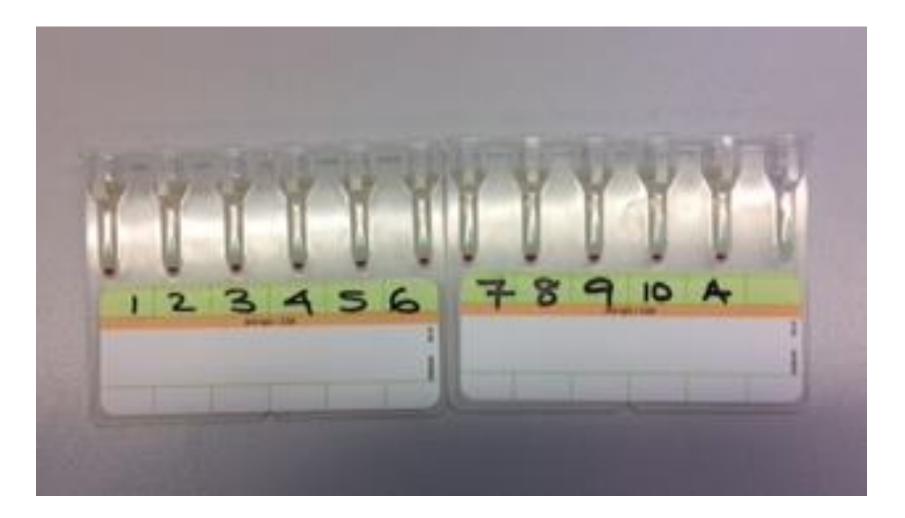
**Tracey Tomlinson** 



- 33 year old female
- Diagnosis Pregnant
- Investigation required
  - ABID, antenatal antibodies
- Referring laboratories findings
  - Group B neg
  - Antibody screen pos
  - AB ID Anti-D

Tracey Tomlinson





**Tracey Tomlinson** 

#### **NHS** Blood and Transplant

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#### Anti-D

- Anti-D detected by enzyme only
- Negative using Diamed IAT
- Weakly positive using Biovue

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#### **Quantitation Results**

- 1.3IU !
- Result not consistent with serology





#### Conclusion



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#### Report

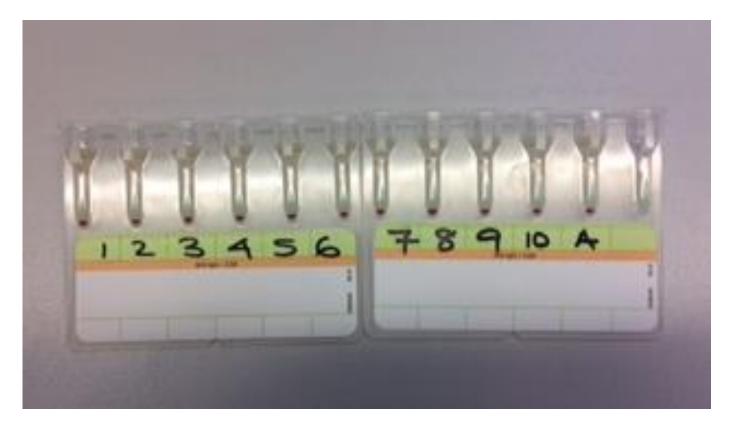
- Due to the unusual nature of the antibody advised to continue with RADP
- Clinical history requested including any prophylaxis given and previous pregnancies
- Repeat sample requested





- EDD given
  - 14/40
- No prophylaxis given
- Patient had attended IVF clinic

#### **NHS** Blood and Transplant



• Quantitation result 2 IU

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## Further investigation

- Dilution studies to exclude prozone
  - Negative
- IAT using anti-IgM reagent
  - Positive for anti-D
- Tested against cord rr cells to exclude anti-LW
  - Negative
- DTT treatment to remove IgG antibodies
   No change to reaction pattern



## **Further investigation**

- Genotype performed
- Referred to IBGRL
  - Confirmed presence of anti-D

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- 22/40
- No change to serology
- Quantitation
  - 1.3IU







- 25/40
- No change to serology
- Quantitation
  - 1.2IU







- 28/40
- Pre RAD
- No change to serology
- Quantitation
  - 2IU





- 34/40
- Post RADP (1500iu)
- Anti-D 2+ in IAT
- Quantitation
  - 1.7IU





## Sample 7,8 & 9

- No change in serology
- No change in Quantitation result

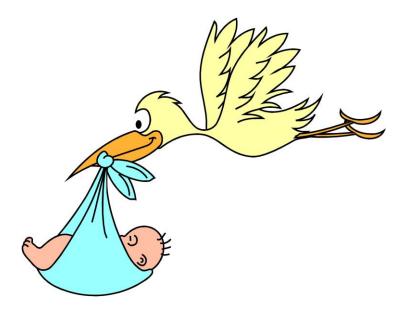






### Delivery

- Baby D positive
- No symptoms of HDN
- DAT Negative







## Summary

- Enzyme only anti-D would not normally trigger monitoring
- Where did the anti-D come from?
- Why didn't it follow the 'normal' rules of serology?





## What would you recommend?

- Monitor?
- Continue to give RAD?



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#### **NHSBT Report**

- Due to the unusual nature of the antibody advised to continue with RADP
- Monitor anti-D level as per BCSH guidelines

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#### Conclusion

- There is no right or wrong answer

   No guideline!
- Tendency to err on side of caution
- Serology does not always happen in the way described in text books

