

Where O' Where could the missing antibodies be?

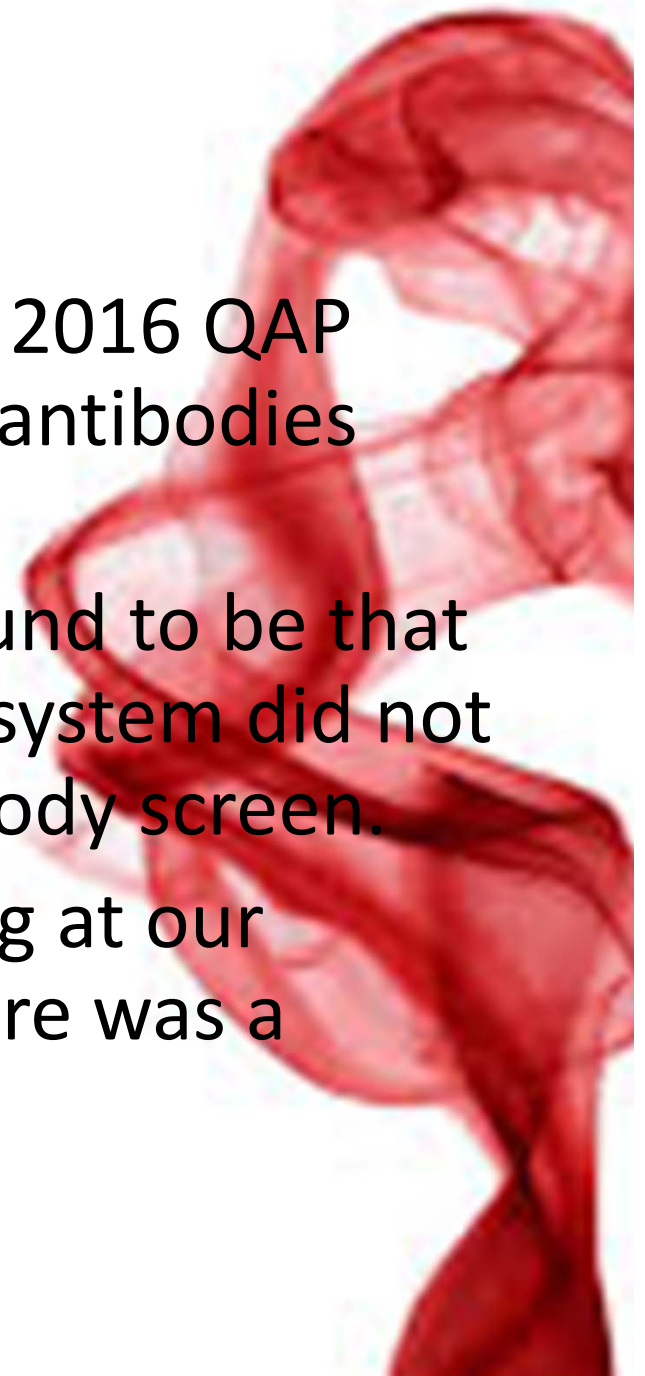
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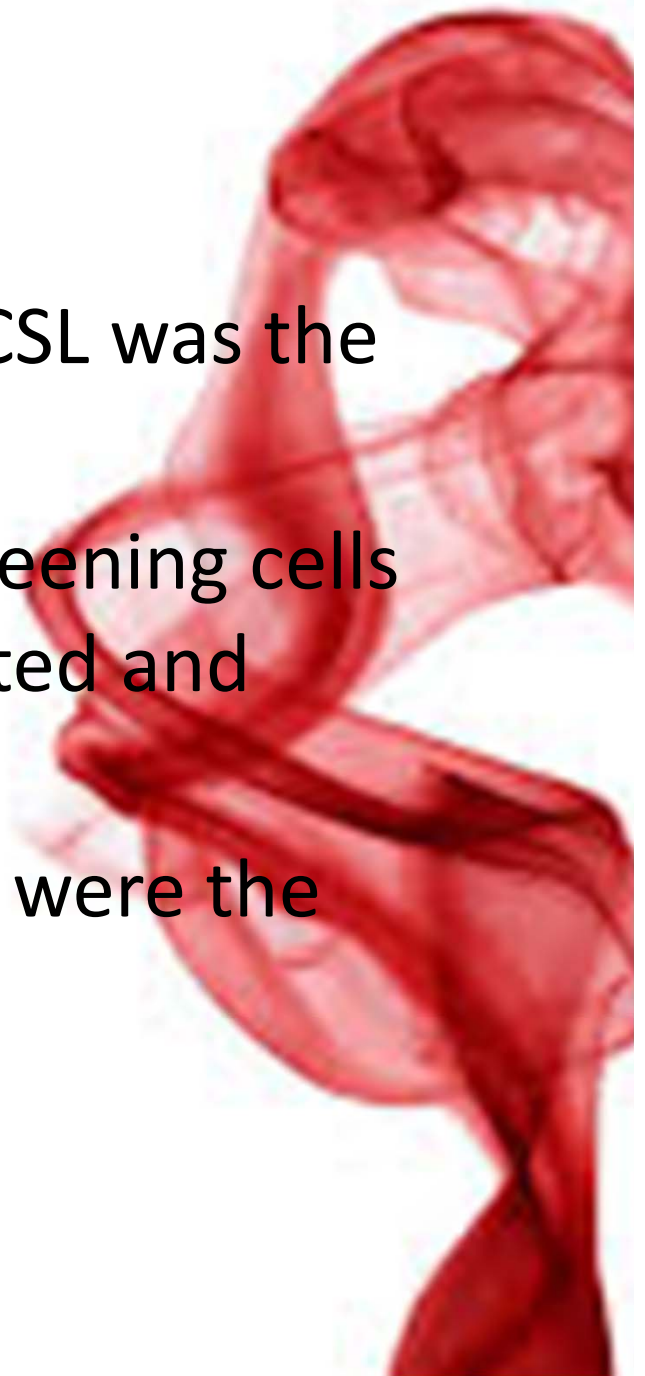
Outline

- In the October 2015 and March 2016 QAP surveys 2 incidences of missing antibodies occurred.
- The underlying problem was found to be that our automated Ortho AutoVue system did not pick these up in the initial antibody screen.
- Investigations began into looking at our screening cells and whether there was a better way.



Background

- At installation of our AutoVue, CSL was the chosen supplier of reagents.
- From then until this year 3% screening cells were used for both our automated and manual techniques.
- 0.8% screening cells also by CSL were the logical 1st choice to investigate.



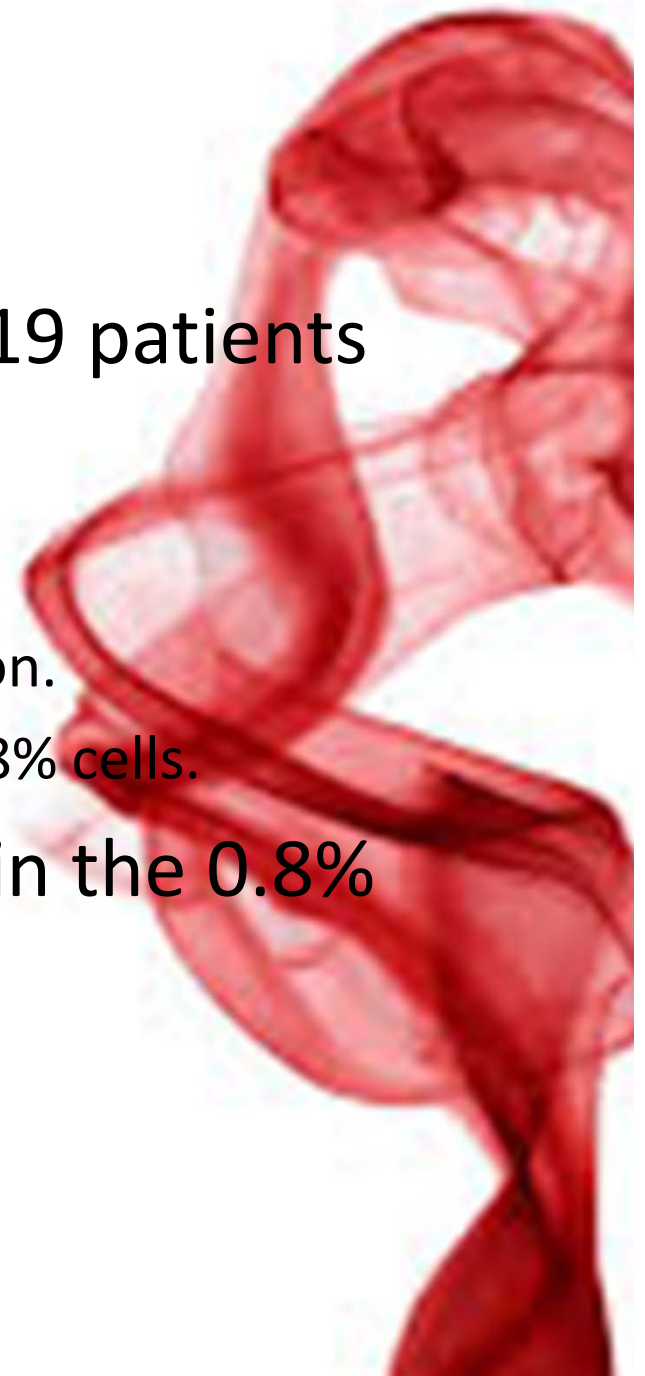
Investigation

- Routine blood bank samples were screened using both the 3% cells and the 0.8% cells.
- This was done Monday-Friday, 9am-5pm over a 3 week period in June/July 2016.
- This approached led to the comparison of 550 samples.



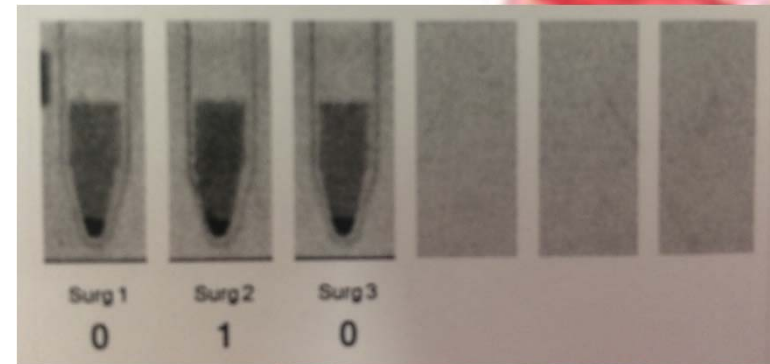
Results

- Of the 550 samples compared, 19 patients had a positive antibody screen.
- Of these:
 - 3 samples the same strength reaction.
 - 16 gave stronger reactions in the 0.8% cells.
- No antibodies were only found in the 0.8% cells.

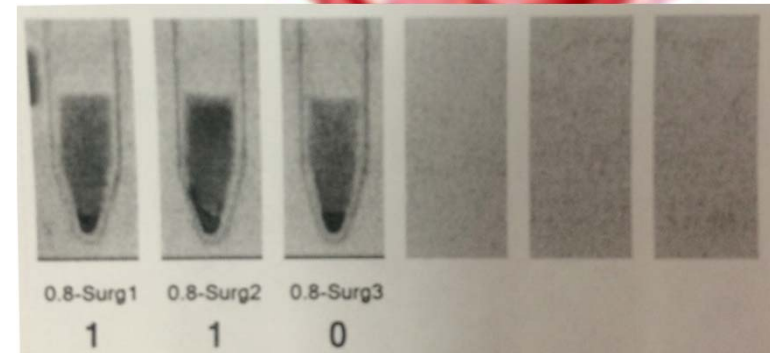


Results

- Here we have an elderly lady with an Anti D. In this first image we can see that only the R2R2 cells have detected its presence.



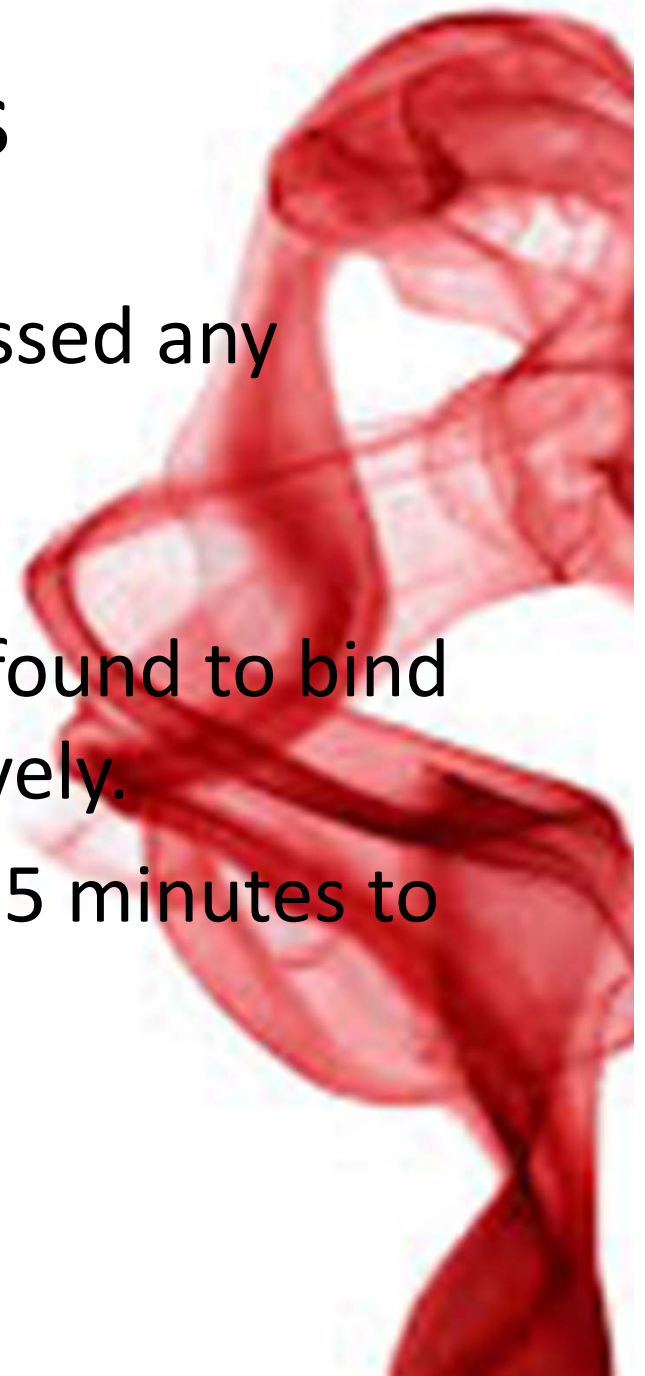
- And here in the 0.8% cells it becomes apparent in both the R1R1 cells as well as the R2R2 cells.



- This is indicative of the results that were achieved throughout this investigation.

Discussion Points

- Neither the 3% or 0.8% cells missed any antibodies.
 - **However**
- The 0.8% cells were frequently found to bind weaker antibodies more effectively.
- Screening using 0.8% cells adds 5 minutes to our current procedure.



Summary

- In August 2016, after method validation RHH changed to 0.8% screening cells.
- To date there have been no incidences of the extra time being of significance in patient care.

