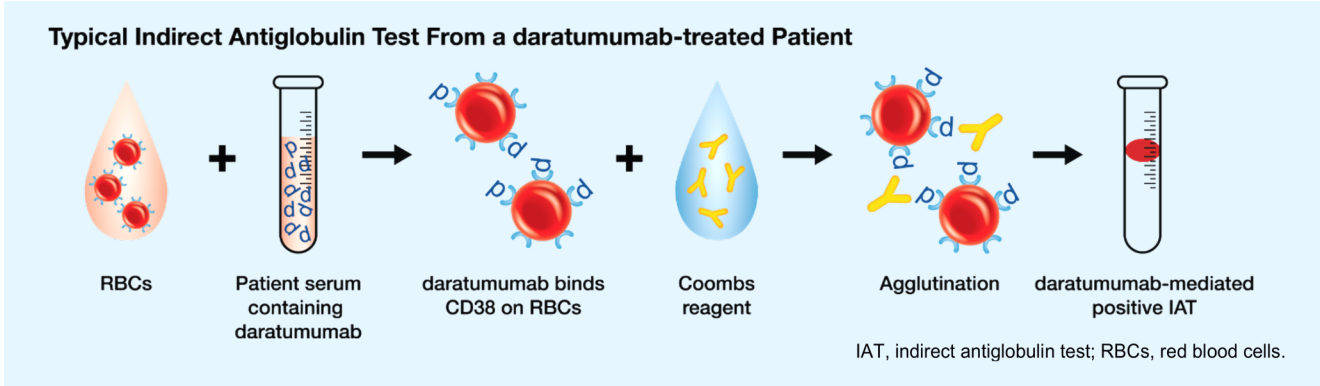


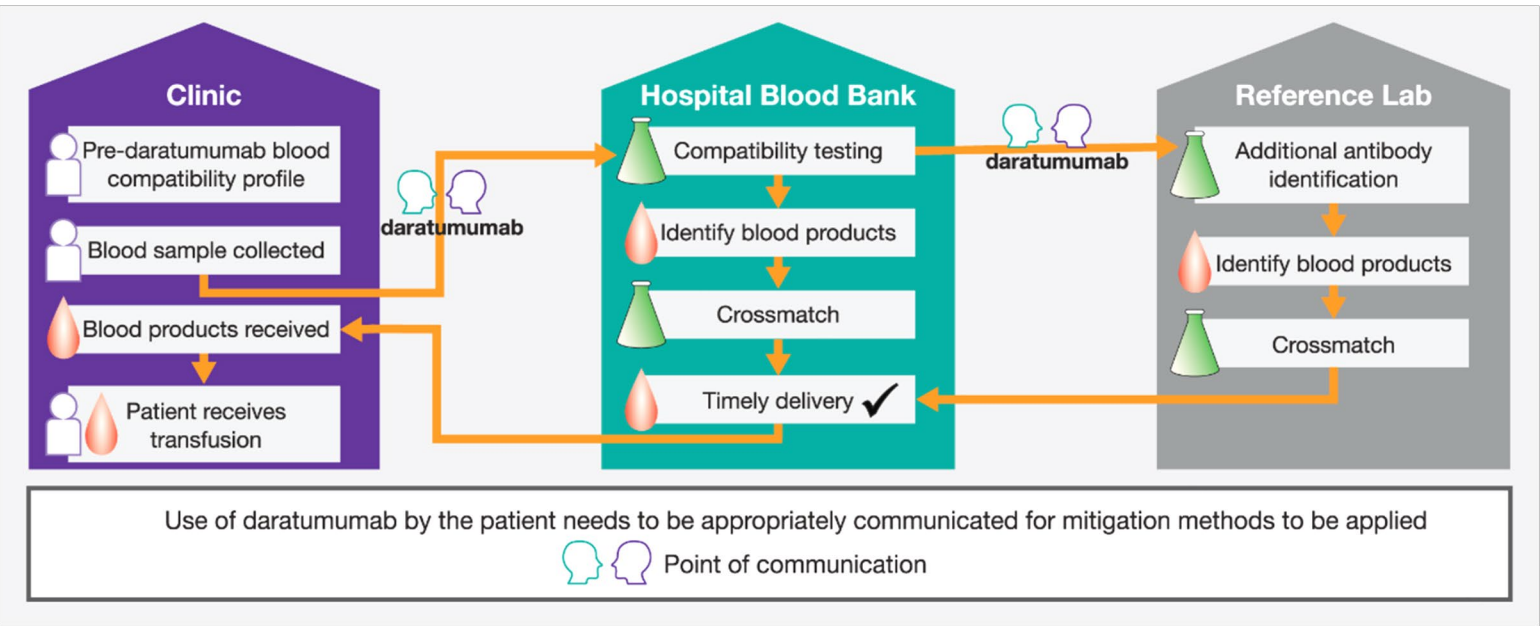


# Daratumumab Results in a Positive Indirect Antiglobulin Test which may persist for up to 6 months after the last product's infusion



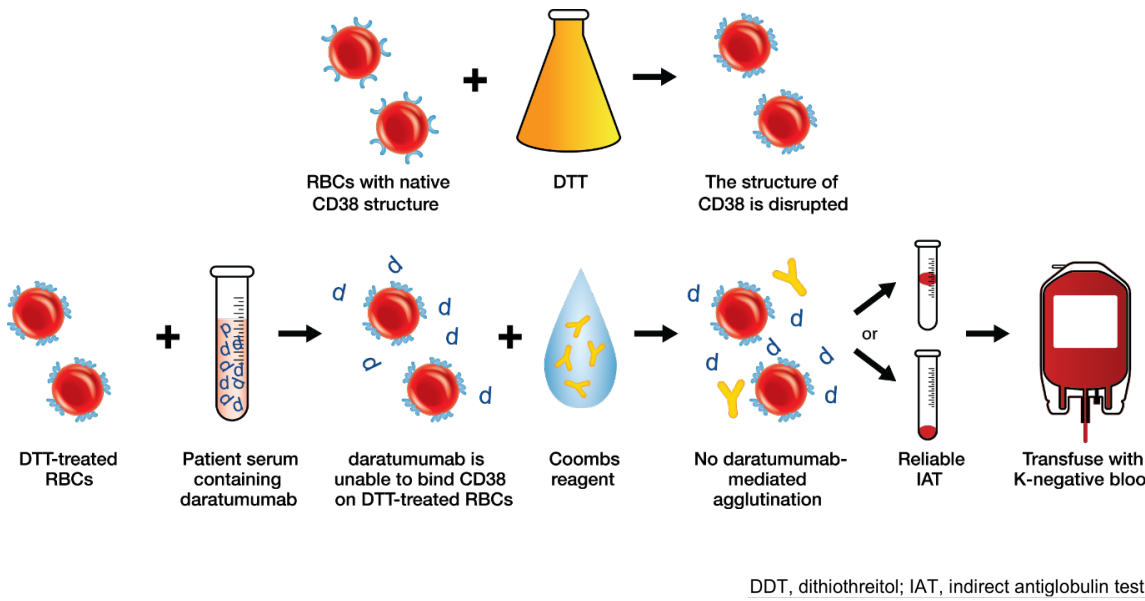
- daratumumab is a human monoclonal antibody for the treatment of multiple myeloma or AL amyloidosis<sup>2</sup>
- daratumumab binds to CD38,<sup>1</sup> a protein that is expressed at low levels on red blood cells (RBCs)<sup>3-5</sup>
- daratumumab binding to RBCs may mask the detection of antibodies to minor antigens. This interferes with compatibility tests, including the antibody screening and crossmatching<sup>1</sup>

## Help Prevent Delays by Applying Mitigation Methods



- If steps are not taken to mitigate daratumumab interference, delays in the release of blood products for transfusion may occur
- Blood products for transfusion can be identified for daratumumab-treated patients using protocols available in the literature<sup>1,6</sup> or by using genotyping<sup>7</sup>
- Mitigation methods should be used until pan-agglutination is no longer observed

## Treat Reagent RBCs With DTT or Locally Validated Method



- Treat reagent RBCs with dithiothreitol (DTT) to disrupt daratumumab binding, thus allowing antibody screening or crossmatching to be performed; the protocol can be found in Chapuy et al<sup>1</sup>. Alternative locally validated methods can also be used
- Blood products for transfusion were identified for daratumumab-treated patients, after using DTT-treated reagent RBCs for antibody screening<sup>1</sup>
- Since the Kell blood group system is also sensitive to DTT treatment,<sup>8</sup> K-negative units should be supplied after ruling out or identifying alloantibodies using DTT-treated RBCs