



# Immunohematology Case Studies 2018 – 5

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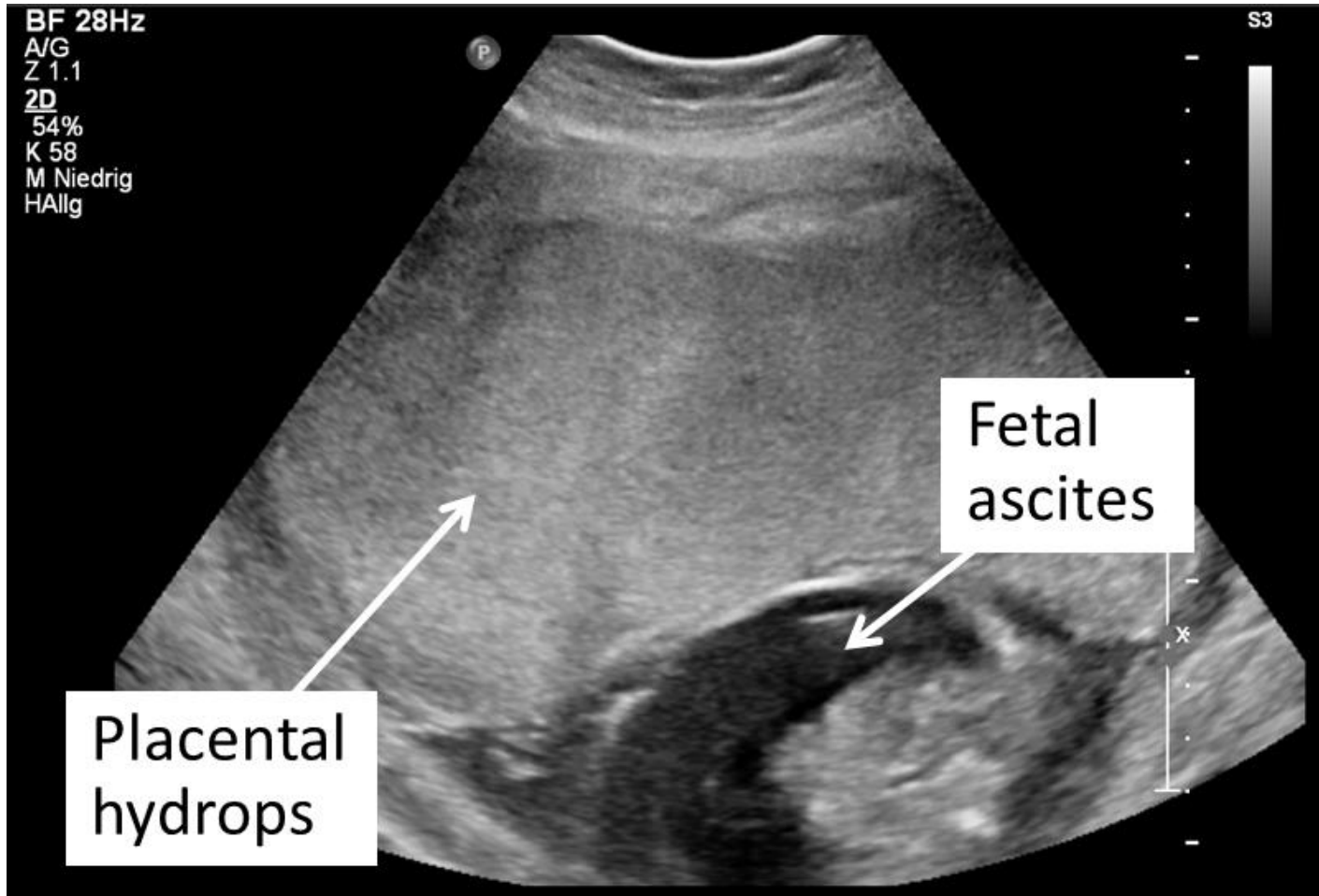
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# Clinical History 1



- A pregnant Caucasian woman (39 years old, gravida 2, para 1) with no transfusion history hospitalized because of the Mirror Syndrome with edema, ascites, massive fetal hydrops and polyhydramnios

# Clinical History 2



# Clinical History 2



- Progressive HELLP syndrome of the mother
- Delivery of the child by a Cesarean section in the 25 week of gestation
- Child's weight: 1,070 g
- Critical condition with the APGAR score of 1/3/5
- Severe anemia (3.1 g/dl)
- Immediate transfusion and intensive care unit
- Child's death 9 days after delivery

# Serologic History



- Child's red blood cells (RBCs):  
Blood group A, rr  
Direct antiglobulin test positive (IgG 3+)
- Mother's blood group: A, rr
- Mother's plasma:  
Antibody screening test negative  
Several antibody identification panels  
negative

# Standard Panel

Untreated and papain treated RBCs in indirect antiglobulin test; gel technique



System	Rh		Rh							Kell				Duffy		Kidd		Lewis		P	MNS				Xg	Lutheran		Dombrock		Auberger		Spezial-Antigene Special types	Results		
	Rh	Component Lot	D	C	c	E	e	C <sup>w</sup>	K	k	Kp <sup>a</sup>	Kp <sup>b</sup>	Fy <sup>a</sup>	Fy <sup>b</sup>	Jk <sup>a</sup>	Jk <sup>b</sup>	Le <sup>a</sup>	Le <sup>b</sup>	P <sub>1</sub>	M	N	S	s	Xg <sup>a</sup>	Lu <sup>a</sup>	Lu <sup>b</sup>	Do <sup>a</sup> *	Do <sup>b</sup> *	Au <sup>a</sup> *	Au <sup>b</sup> *	IAT		Enzyme		
1	C <sup>w</sup> CD.ee	R1 <sup>w</sup> R1	70118427019	+	+	0	0	+	+	0	+	0	+	0	+	0	+	+	0	+	0	+	+	0	+	+	+	0	0	+	Co(b+)	1	0	0	
2	CCD.ee	R1R1	70218347834	+	+	0	0	+	0	+	+	0	+	0	+	0	0	+	+	0	+	0	+	0	+	+	+	+	+	Bg+	2	0	0		
3	ccD.EE	R2R2	70518489874	+	0	+	+	0	0	0	+	+	+	+	0	+	0	+	0	+	+	+	0	0	0	+	0	+	+	Bg+ Rg(a+ <sup>w</sup> ) <sup>‡</sup>	3	0	0		
4	ccD.ee	Ror	70218922414	+	0	+	0	+	0	0	+	0	0	+	0	0	+	+	+	0	+	0	+	0	+	+	+	0	+	Di(a+) <sup>‡</sup> , KCAM <sup>-</sup> Yt(b+) <sup>‡</sup> , WH <sup>+</sup>	4	0	0		
5	Ccee	r <sup>+</sup> r	70118205755	0	+	+	0	+	0	0	+	0	+	0	0	+	0	+	0	+	+	0	+	+	0	+	+	+	Yk(a+ <sup>w</sup> ) <sup>‡</sup>	5	0	0			
6	ccEe	r <sup>+</sup> r	70418371829	0	0	+	+	+	0	0	+	0	+	0	0	+	0	+	+	0	+	0	+	+	+	+	+	+		6	0	0			
7	ccee	rr	70418107317	0	0	+	0	+	0	+	0	+	+	0	+	+	0	+	0	+	0	+	0	+	0	+	0	+	+	Cs(a+ <sup>w</sup> ) <sup>‡</sup> Rg(a+ <sup>w</sup> ) <sup>‡</sup> , Yt(a-b+) <sup>‡</sup>	7	0	0		
8	ccee	rr	70218347809	0	0	+	0	+	0	0	+	0	+	0	+	0	0	+	+	0	+	0	+	0	+	+	+	+		8	0	0			
9	ccee	rr	70518552548	0	0	+	0	+	0	0	+	+	+	0	+	0	0	+	0	+	0	+	0	+	0	+	+	+	0	Cs(a+ <sup>w</sup> ) <sup>‡</sup> Rg(a+ <sup>w</sup> ) <sup>‡</sup> , Yk(a-) <sup>‡</sup>	9	0	0		
10	ccee	rr	70418243501	0	0	+	0	+	0	0	+	+	+	0	+	0	+	+	0	+	+	0	0	0	+	+	0	+	Ch(a+ <sup>w</sup> ) <sup>‡</sup>	10	0	0			
11	ccee	rr	70218126814	0	0	+	0	+	0	0	+	0	0	+	+	0	0	+	+	0	+	0	+	0	+	+	+	+	Kn(a+ <sup>w</sup> ) <sup>‡</sup> Yk(a+ <sup>w</sup> ) <sup>‡</sup>	11	0	0			
Patientenzellen Patient's cells																																	0	nt	

# Special Panel with rare RBCs 1

Untreated RBCs in indirect antiglobulin test; gel technique

System			Spezial-Antigene Special types	Rh - Hr					Kell				Duffy		Kidd		Lewis		P	MNS				Xg	Lutheran		Dombrock		Auberger		Results				
Rh - Hr	Component	Lot		D	C	c	E	e	C <sup>w</sup>	K	k	Kp <sup>a</sup>	Kp <sup>b</sup>	Fy <sup>a</sup>	Fy <sup>b</sup>	Jk <sup>a</sup>	Jk <sup>b</sup>	Le <sup>a</sup>	Le <sup>b</sup>	P <sub>1</sub>	M	N	S	s	Xg <sup>a</sup>	Lu <sup>a</sup>	Lu <sup>b</sup>	Do <sup>a</sup>	Do <sup>b</sup>	Au <sup>a</sup>	Au <sup>b</sup>	IAT			
1	ccddee	rr	70116502273S	Vw+, Yk(a)-*	0	0	+	0	+	0	+	+	0	+	+	0	0	+	+	0	+	0	+	0	0	+	+	+	+	+	+	+	+	1	0
2	ccddee	rr	70116343351S	Mi(a+) <sup>S</sup> , Yk(a)-*	0	0	+	0	+	0	0	+	0	+	+	0	0	+	0	+	+	0	+	0	0	+	0	+	+	+	+	+	+	2	0
3	CcD.ee	R1r	70216363164S	BARC+*, D <sup>VI*</sup> Co(b+)	+ <sup>w</sup>	+	+	0	+	0	0	+	0	+	+	+	+	0	+	+	0	+	0	+	0	+	+	+	+	+	+	+	+	3	0
4	CCD.ee	R1R1	80216615674S	PARG+* <sup>S</sup>	+	+	0	0	+	+	0	+	+	+	0	+	+	0	+	+	+	+	0	+	0	+	nt	nt	nt	nt	nt	nt	nt	4	0
5	CCD.ee	R1R1	70116200802S	Wu+* <sup>S</sup>	+	+	0	0	+	0	0	+	+	0	0	+	0	+	+	+	+	+	+	+	0	+	+	+	+	+	0	+	+	5	0
6	CCD.ee	R1R1	70216286891S	Js(a+)*	+	+	0	0	+	0	+	+	0	+	0	+	0	+	+	+	+	0	+	+	0	+	+	+	+	+	+	+	+	6	0
7	ccddee	rr	70216303772S	Lu(b-), Co(b+)	0	0	+	0	+	0	+	+	0	+	+	0	+	0	0	+	0	+	+	0	+	0	+	+	+	+	+	+	+	7	0
8	ccddee	rr	70216202383S	KCAM-*	0	0	+	0	+	0	0	+	0	+	+	+	0	+	+	+	0	+	+	+	0	+	+	+	+	+	+	0	+	8	0
9	Ccddee	r'r	70216344250S	Ch(a-) <sup>S</sup>	0	+	+	0	+	0	0	+	0	+	0	+	0	+	0	+	+	+	0	+	0	0	+	+	0	+	0	+	0	9	0
10	ccddee	rr	70116563586S	Cs(a-) <sup>S</sup> , Yk(a)-*	0	0	+	0	+	0	0	+	+	0	+	0	+	0	+	+	0	0	+	+	0	+	+	+	+	+	+	+	+	10	0
11	CCD.ee	R1R1	70216323293S	Vel-* <sup>S</sup>	+	+	0	0	+	0	0	+	0	+	0	+	0	+	+	+	+	+	+	0	0	+	+	+	+	+	+	+	+	11	0
12	--D.--		646316010984S	Rh:-17	+	0	0	0	0	0	0	+	0	+	+	0	+	+	+	+	+	0	+	+	0	+	nt	nt	nt	nt	nt	nt	12	0	
Patientenzellen Patient's cells																																			



# Special Panel with rare RBCs 2

Untreated RBCs in indirect antiglobulin test; gel technique

System				Rh - Hr					Kell				Duffy		Kidd		Lewis		P	MNS				Xg	Lutheran		Dombrock		Aubergier		Results				
Rh - Hr	Component	Lot	Spezial-Antigene Special types	D	C	c	E	e	C <sup>w</sup>	K	k	Kp <sup>a</sup>	Kp <sup>b</sup>	Fy <sup>a</sup>	Fy <sup>b</sup>	JK <sup>a</sup>	JK <sup>b</sup>	Le <sup>a</sup>	Le <sup>b</sup>	P <sub>1</sub>	M	N	S	s	Xg <sup>a</sup>	Lu <sup>a</sup>	Lu <sup>b</sup>	Do <sup>a</sup> *	Do <sup>b</sup> *	Au <sup>a</sup> *	Au <sup>b</sup> *	IAT			
1	ccD.EE	R2R2	70218405048S	Sc2+ <sup>S*</sup>	+	0	+	+	0	0	+	0	+	+	0	+	0	+	0	+	0	+	0	+	0	0	+	+	0	+	+	1	0		
2	CCD.ee	R1R1	70118243068S	Rb(a+) <sup>S*</sup> Co(b+), Bg+	+	+	0	0	+	0	0	+	0	+	+	+	+	+	0	0	0	+	0	+	0	0	+	+	0	+	+	2	0		
3	CcD.ee	R1r	70318101722S	Wr(a+)	+ <sup>w</sup>	+	+	0	+	0	0	+	0	+	0	+	0	0	+	+	+	+	+	+	+	0	+	nt	nt	nt	nt	3	0		
4	ccD.Ee	R2r	70217381109S	Ew+ <sup>*</sup>	+	0	+	+ <sup>w</sup>	+	0	0	+	0	+	+	+	+	+	0	+	+	+	+	+	+	0	+	+	0	+	0	4	0		
5	ccddee	rr	70117284883S	LW(b+) <sup>S*</sup>	0	0	+	0	+	0	+	+	0	+	0	0	+	0	+	0	+	0	+	+	+	0	+	0	+	0	+	5	0		
6	ccD.EE	R2R2	70117581581S	Yt(b+) <sup>S*</sup> Kn(b+) <sup>*</sup> , Kn(b+ <sup>w</sup> ) <sup>S</sup>	+	0	+	+	0	0	0	+	0	+	+	+	+	0	+	+	+	0	+	0	+	+	+	+	+	+	0	+	6	0	
7	ccddee	rr	70218183589S	Rg- <sup>S</sup>	0	0	+	0	+	0	0	+	0	+	0	+	0	0	+	+	+	+	0	+	+	0	+	0	+	+	+	7	0		
8	ccddee	rr	70317110508S	AnWj- <sup>S#</sup>	0	0	+	0	+	0	0	+	0	+	+	0	+	0	+	+	0	+	0	+	0	0	0	0	0	+	+	0	8	0	
9	ccddee	rr	70218322548S	Vw+ Yk(a-) <sup>S*</sup>	0	0	+	0	+	0	+	+	0	+	+	0	0	0	+	+	0	+	0	+	0	0	+	+	+	+	+	9	0		
10	CcD.ee	R1r	70218380431S	Co(a-b+)	+	+	+	0	+	0	0	+	0	+	+	+	0	0	+	0	+	+	0	+	+	0	+	0	+	+	0	10	0		
11	ccD.ee	Ror	70217912735S	KCAM- <sup>*</sup> Sl(a-) <sup>*</sup> , Vil+ <sup>*</sup>	+	0	+	0	+	0	+	+	0	+	0	0	0	+	0	+	+	+	0	0	+	0	0	+	+	+	+	+	11	0	
12	ccddee	rr	70117527370S	Jr(a-) <sup>S</sup> Bg+	0	0	+	0	+	0	0	+	0	+	+	+	+	0	0	0	0	0	+	+	+	0	0	+	+	+	0	12	0		
Patientenzellen Patient's cells																																			



# Special Panel with rare RBCs 3

Untreated RBCs in indirect antiglobulin test; gel technique

System				Rh - Hr						Kell				Duffy		Kidd		Lewis		p	MNS				Xg	Lutheran	Dombrock		Auberger		Results					
	Rh - Hr	Component Lot	Spezial-Antigene Special types	D	C	c	E	e	C <sup>w</sup>	K	k	Kp <sup>a</sup>	Kp <sup>b</sup>	Fy <sup>a</sup>	Fy <sup>b</sup>	Jk <sup>a</sup>	Jk <sup>b</sup>	Le <sup>a</sup>	Le <sup>b</sup>	P <sub>1</sub>	M	N	S	s	Xg <sup>a</sup>	Lu <sup>a</sup>	Lu <sup>b</sup>	Do <sup>a</sup> *	Do <sup>b</sup> *	Au <sup>a</sup> *	Au <sup>b</sup> *		IAT			
1	ccD.ee	Ror	70418133713S Mi(a+) <sup>S</sup>	+	0	+	0	+	0	0	+	0	+	+	0	+	0	0	+	+	+	+	+	+	+	0	+	+	0	+	+	+	+	1	0	
2	CcD.ee	R1r	70119440243S Di(a+) <sup>S</sup> Yt(b+) <sup>S</sup>	+	+	+	0	+	0	0	+	0	+	+	0	+	+	0	+	+	0	+	0	+	0	0	+	0	+	+	+	0	+	+	2	0
3	CCD.ee	R1R1	70118526656S Lu14+ <sup>S</sup> Yt(a-b+) <sup>S</sup> , HLA+ <sup>S</sup>	+	+	0	0	+	0	+	0	0	+	+	0	+	0	+	0	+	+	+	+	+	0	0	+	+	+	+	+	0	+	+	3	0
4	ccD.EE	R2R2	70216145721S Sc4+ <sup>S</sup> HLA+ <sup>S</sup>	+	0	+	+	0	0	0	+	0	+	0	+	+	+	0	+	+	0	+	0	+	+	0	+	0	+	0	+	0	+	+	4	0
5	ccee	rr	70518529378S Mt(a+) <sup>S</sup>	0	0	+	0	+	0	0	+	0	+	0	+	+	0	0	0	+	+	+	0	+	+	+	+	+	+	+	+	+	+	+	5	0
6	CcD.ee	R1r	70216445439S Tar+ <sup>S</sup> , D <sup>VII*</sup>	+ <sup>w</sup>	+	+	0	+	0	0	+	0	+	+	+	+	0	0	+	+	0	+	+	+	+	0	+	+	+	+	+	+	+	+	6	0
7	ccee	rr	70316169967S Kp(b-) LW(b+) <sup>S</sup>	0	0	+	0	+	0	0	+	+	0	+	0	+	0	+	0	0	+	+	0	+	0	0	+	0	+	0	+	+	+	+	7	0
8	ccee	rr	70116168906S Lu8- <sup>S</sup> , Lu14+ <sup>S</sup> HLA+ <sup>S</sup>	0	0	+	0	+	0	0	+	0	+	+	+	+	0	+	0	+	+	0	+	0	+	0	+	+	+	+	+	+	+	+	8	0
9	CCD.ee	R1R1	70219180014S Sd(a-) <sup>S</sup>	+	+	0	0	+	0	0	+	0	+	+	+	+	+	0	+	+	0	+	0	+	+	0	+	nt	nt	nt	nt	nt	nt	nt	9	0
10	ccD.Ee	R2r	70216123656S Vel- <sup>S</sup>	+	0	+	+	+	0	0	+	0	+	+	+	+	+	0	+	0	+	0	0	+	+	0	+	+	+	+	+	0	+	+	10	0
11	C <sup>w</sup> CD.ee	R1 <sup>w</sup> R1	70116427087S Co(a-b+)	+	+	0	0	+	+	0	+	0	+	+	+	+	+	0	+	0	+	0	+	+	+	0	+	nt	nt	nt	nt	nt	nt	nt	11	0
12	C <sup>w</sup> C <sup>w</sup> D.ee	R1 <sup>w</sup> R1 <sup>w</sup>	70318210066S MAR- <sup>S</sup> (MAR-like negative)	+	+	0	0	+	+	0	+	0	+	0	+	+	0	0	+	+	0	+	+	+	+	0	+	0	+	+	+	+	+	+	12	0
Patientenzellen Patient's cells																																				

# Serological Results 1



→ Probably antibody to a low prevalence antigen

Antibodies to following low prevalence antigens ruled out:

Wr<sup>a</sup>, Di<sup>a</sup>, Wu, Rb<sup>a</sup>, Lu14, Kp<sup>a</sup>, Js<sup>a</sup>, K17, K25, V, VS, Crawford, JAL, JAHK, PARG, E<sup>w</sup>, C<sup>x</sup>, C<sup>w</sup>, DAK, FPTT, BARC, Tar, Go<sup>a</sup>, Kn<sup>b</sup>, Vil, Co<sup>b</sup>, Yt<sup>b</sup>, LW<sup>b</sup>, Ls<sup>a</sup>, UI<sup>a</sup>, Tc<sup>b</sup>, Sc2, Sc4, Vw, M<sup>g</sup>, Mi<sup>a</sup>, Hut, Mur, Hil, Miny, He, Dantu, Mt<sup>a</sup>, St<sup>a</sup>, Mit, Vr

# Serological Results 2

## Serological Family Studies



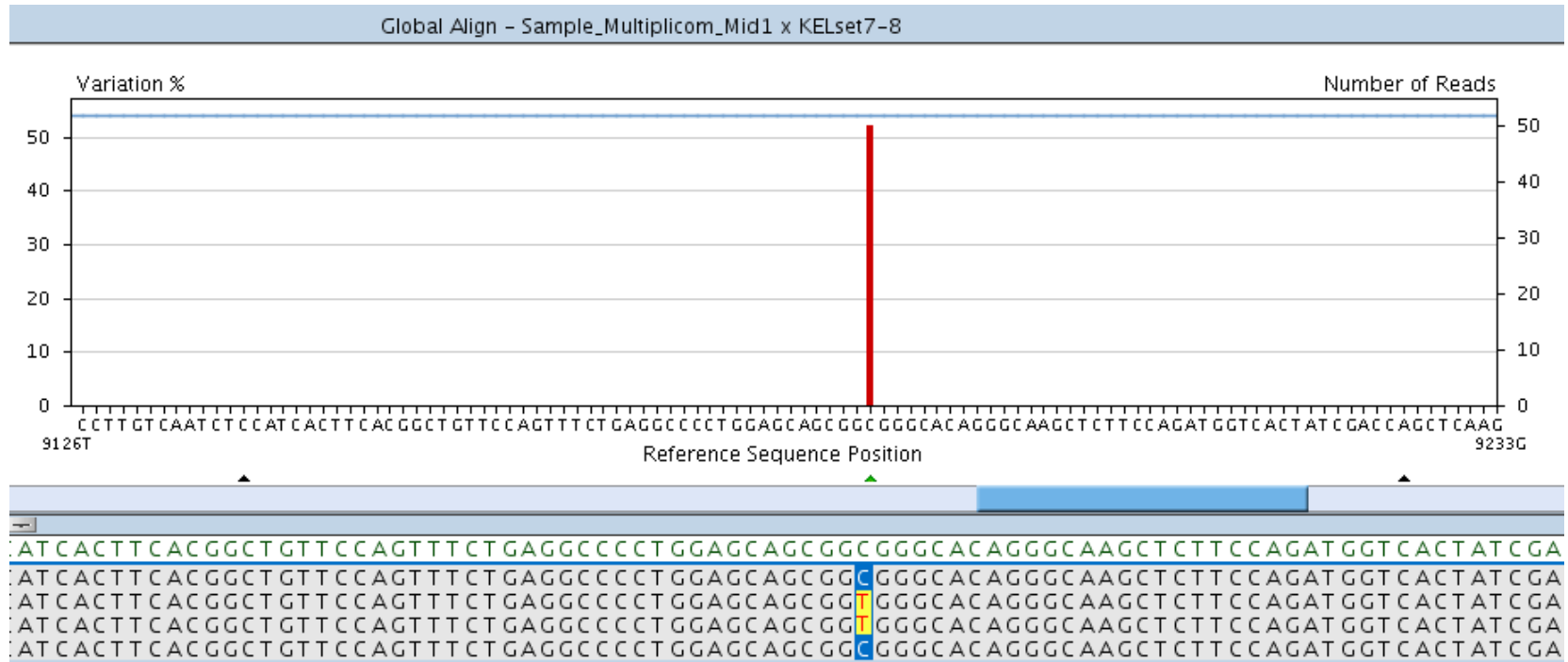
- Mother's plasma reactive (2+ in indirect antiglobulin test/gel) with the RBCs (all ABO compatible) of:
  - the child's father
  - the father's mother
  - the child's 3 years old brother
- Titer 16 in indirect antiglobulin test in gel
- Reaction slightly enhanced (titer 32) when the RBCs papain treated
- Reaction **negative when the RBCs DTT (200 mmol) treated**

# Interim Antibody Identification Possible Answers and Next Steps



- The severity of the hemolytic disease of the newborn and the serological results indicated it might be an antibody to low prevalence antigen of the Kell blood group system
- Next step:  
Sequencing of all exons of the *KEL* gene of the child's father using 454-sequencing technology

# Genotyping Results



Exon 8 revealed C>T heterozygosity at position 877

The 877C>T mutation is predicted to cause a single amino acid change (Arg293Trp) in the Kell protein and defined a new low prevalence Kell antigen named **KEAL (KEL39)** (*KEL\*02.39*) recognized by the ISBT 2016

# Genotyping Results



- Next step:  
Establishing a PCR-SSP method for genotyping of the 877C>T mutation

**Table 1.** PCR-SSP primers used for *KEL* genotyping.

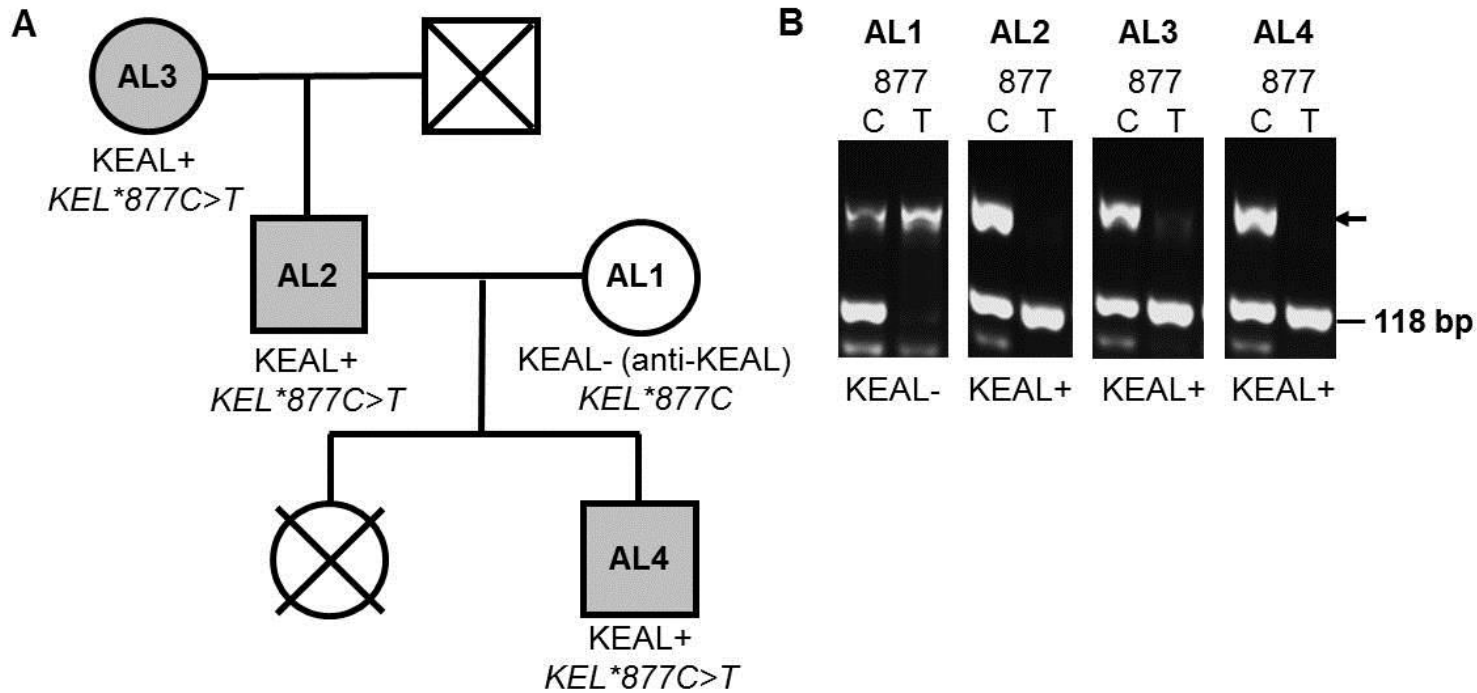
Name	Location	Direction	Sequence (5'-3')	Amplicon size (bp)
KELex8-F1	<i>KEL</i> exon 8	sense	CCTCCACACCTCCGAGT	
KEL877C-R1g	<i>KEL</i> exon 8	antisense	GAGCTTGCCCTGTGCCCG	118
KEL877T-R1a	<i>KEL</i> exon 8	antisense	GAGCTTGCCCTGTGCCCA	118
betaglob-F	<i>HBB</i>	sense	GGTTGGCCAATCTACTCCCAGG	
betaglob-R	<i>HBB</i>	antisense	GCTCACTCAGTGTGGCAAAG	536

# Genotyping Results



- Next step:  
Genotyping of the available family members  
for KEAL (KEL39)

# Genotyping Results



**A.** Pedigree of the family with the KEAL antigen.

The child's mother (AL1) represented the anti-KEAL index individual.

**B.** Results of PCR-SSP analysis of the *KEL* 877C>T mutation.

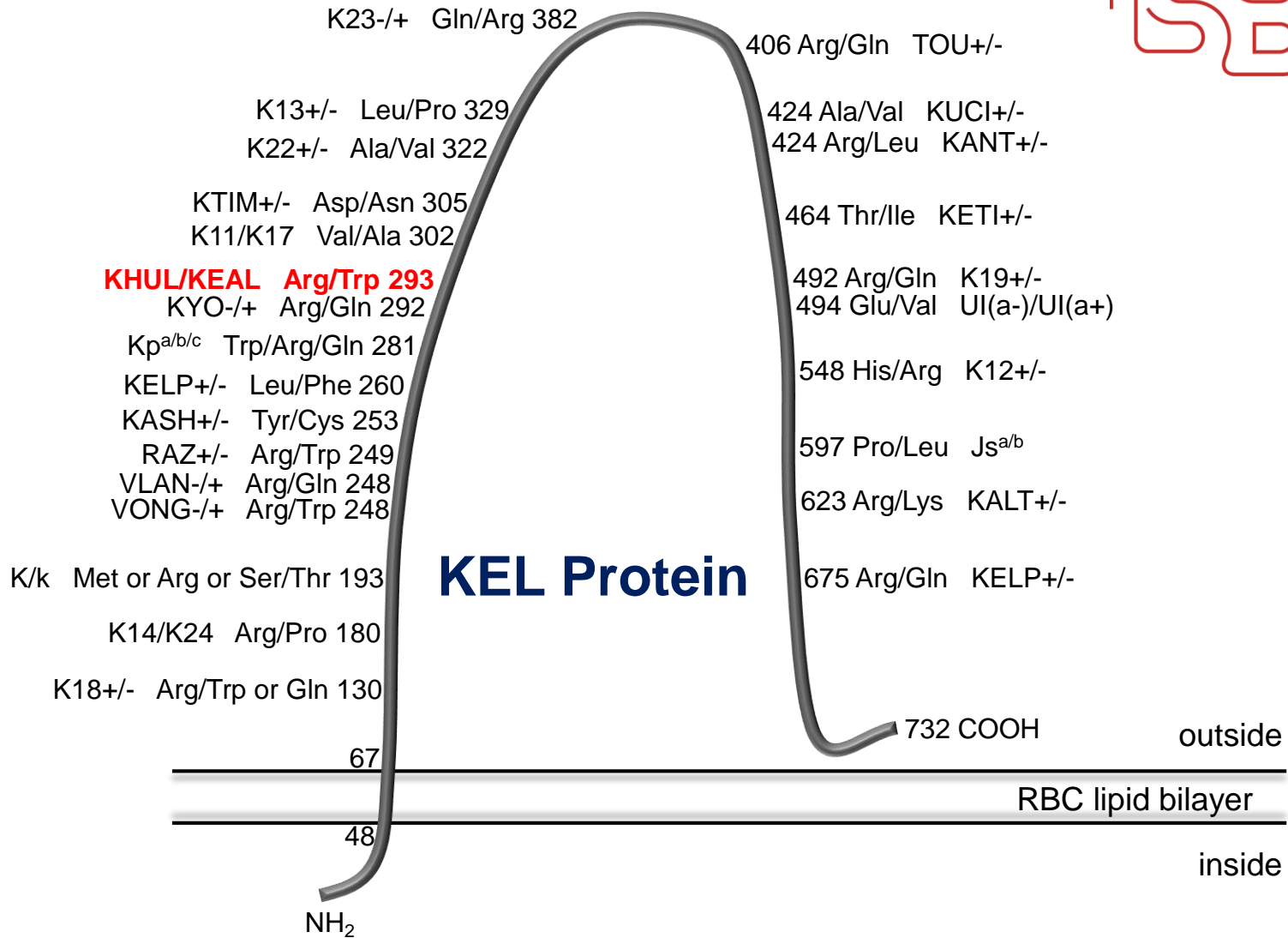
In accordance with serology AL2, AL3 and AL4 were positive (heterozygous) for the 877T allele (amplicon size: 118 bp), whereas, AL1 was negative.



# Further Investigations



- Homozygosity for *KEL* 877C>T mutation is the genetic background for the rare KHUL (KEL37) negative phenotype
- Further heterozygous KHUL positive RBCs were positive with plasma of the mother
- **KEAL (KEL39) is antithetical to KHUL (KEL37)**



(according to: Reid ME, Lomas-Francis C, Olsson ML. The Blood Group Antigen Factsbook. 3rd edition, 2012)

# Lessons Learned by the Case



- KEAL a low prevalence Kell antigen, which is characterized by a 877C>T mutation in exon 8 of the *KEL* gene and a predicted Arg293Trp substitution in the Kell protein caused a severe hemolytic disease (HDN) of the newborn
- Antibodies to Kell antigens are known to be highly clinically significant in pregnancy
- KEAL (KEL39) is antithetical to the high prevalence KHUL antigen (KEL37)

# References



- Scharberg EA, et al. Fatal hemolytic disease of the newborn caused by an antibody to KEAL, a new low-prevalence Kell blood group antigen. *Transfusion* 2017;57;217–218.
- Lomas-Francis C, Vege S, Velliquette RW, et al. Expansion of the Kell blood group system: two new high-prevalence antigens and two novel K0 (Kellnull) phenotypes. *Transfusion* 2013;53:2887-91
- Reid ME, Lomas-Francis C, Olsson ML. *The blood group antigen factsbook*. 3rd ed. London (UK): Academic Press; 2012