

Characteristics of Blood Group Antibodies



	-10	Immun cl	oglobulin ass	0.11	In vitro c	characteristics	May	0	Associa	ted with	An	ntigen Frequency	(%)	Remarks
ntibody	ISBT Symbol	IgM	IgG	Saline RT	IAT	Papain 37°C*	show dosage	Complement binding	HDFN	HTR	Caucasians	Blacks	Others	
O (ISBT i-a	No 001) & ABO1	Yes	Group (ISBT Yes	Yes for IgM component	Yes for IgG component	↑ ↑		Yes some hemolytic	No to moderate	No to severe	43	27	Asians: 28 Mexicans: 28	
-В	ABO2	Yes	Yes	Yes for IgM component	Yes for IgG component	↑ ↑		Yes some hemolytic	No to moderate	No to severe	9	20	South American Indians: 0 Asians: 27 Mexicans: 13	
-A,B	АВО3	Yes	Yes	Yes for IgM component	Yes for IgG component	↑ ↑		Rare	No to severe	None to mild/delayed	56	51	South American Indians: 0 Asians: 57 Mexicans: 45	Anti-A,B is only produced by group O individuals, and cannot be sepa into anti-A and anti-B.
- A ₁	ABO4	Yes	Rare	Yes	Rare	↑ ↑		Rare	No	None to mild/delayed	34	19	Asians: 27	Frequency: 1-2% in blood group A_2 , 25% in blood group A_2B , 99% in blood group A_x .
Н	H1	Yes	Rare		Rare	↑ ↑		Some	Possible in O _h mothers	No to severe in O _n and H+ ^w		All populations: 99.9		Alloanti-H is present in the serum of Bombay (O _p) and Para-Bombay (Ppeople. O cells show the strongest antigen expression, A _p B cells the w
S (ISBT M	No 002) Blo MNS1	ood Group Yes	System Yes	IgM	Rare	↓ ↓	Yes		No (except in	No (except in	78	74		Many examples are naturally-occurring. May be pH dependant. More common in children, and in patients with bacterial infections.
-N	MNS2	Yes	Yes	and IgG IgM and IgG	Rare	↓↓	Yes		extremely rare cases) No	extremely rare cases) No	72	75		Many examples are naturally-occurring. Rare N-S-s-U- individuals malantibody that reacts with N on GPA and GPB, and is usually clinically si
-S	MNS3	Some	Most	Some	Most	V	Yes	Some	No to severe (rare)	No to moderate (rare)	55	31		The S antigen is sensitive to trace amounts of chlorine.
-s -U	MNS4	Yes	Yes Yes	Some	Most Yes	V ↔	Yes	Rare	No to severe (rare) Mild to severe	No to mild (rare) Mild to severe	89 99.9	93		Reacts often by IAT after incubation at RT or lower. A pH of 6.0 enhances the reactivity of some anti-s. Autoantibody has been identified to cause WAIHA in rare cases.
		GLOB (ISB		od Group Systems					Ivilia to severe	Ivilia to sovore	30.5			There is considerable variation in the strength of P1 expression on RB
·P1	P1PK1	Yes	Rare	Yes	Very rare	↑ ↑		Rare	No No to mild	No to moderate/ delayed (rare)	79	94	Cambodian, Vietnamese: 20	This variation is inherited, and at least partially dependent on the zygos of P^{7} alleles.
P	GLOB1	Yes	Yes	Some	Some	↑ ↑		Yes some hemolytic	(in P ^k mothers with anti-P)	No to severe (rare)		All populations: > 99.9		Autoanti-P exists as a biphasic autohemolysin in PCH, detected by the Landsteiner test may occur after viral illness, particularly in children.
PP1Pk SBT No	o 004) Bloo	d Group Sv	Yes stem	Some	Some	↑ ↑		Yes	Yes	Yes	100			Alloantibody in sera of p- people may cause complete hemolysis in fre Anti-PP1P ^k is a potential cause of early abortion.
D	RH1	Some	Most	Rare	Yes	↑ ↑	П	Extremely rare	Mild to severe	Mild to severe/ immediate or delayed	85	92	Asians: 99 Native Americans: 99	Occurs frequently with anti-C.
;	RH2	Yes	Yes	Rare	Yes	↑ ↑	Yes	No	Mild	Mild to severe/ immediate or delayed	68	27	Asians: 93	Anti-C is often found in antibody mixtures, especially with anti-G or a
	RH3	Yes	Yes	Some	Yes	↑ ↑	Yes	No	Mild	Mild to severe/ immediate or delayed	29	22	Asians: 39	Occurs frequently with anti-c.
	RH4	Some	Most	Rare	Yes	↑ ↑	Yes	No	Mild to severe	Mild to severe/ immediate or delayed	80	98	Asians: 47	Occurs frequently with anti-E.
1	RH5	Some	Most	Rare	Yes	1 1	Yes	No	Rare, usually mild	Mild to moderate/ delayed/ hemoglobinuria		98	Asians: 96	Occurs frequently with anti-C.
ţw	RH8	Yes	Yes	Yes	Yes	1 1		No	Mild to moderate	Mild to severe/ immediate or delayed	2	1	Finns: 4 Latvians: 9	Most C*+ are C+; rare examples are C
ran (IS u ^a	SBT No 005 LU1	5) Blood Gro	oup System Yes	Most	Some	↔ to ↓		Rare	No to mild (rare)	No	8	5		Characteristic reaction picture of "loose" agglutinates surrounded by unagglutinated RBCs in tube technique. Sera containing anti-Lu² ofter
u ^a	LU1	Yes Yes	Yes	Most	Some			Rare	No to mild (rare) Mild	No Mild to moderate	0	All populations: 99.8		unagglutinated RBCs in tube technique. Sera containing anti-Lu ^a ofter contain HLA antibodies.
.uº .u3	LU2	। ভগ	Yes	No	Most Yes			Rare	No data	No data		All populations: 99.8 All populations: 100		Anti-Lu3 is only made by immunized individuals of the rare recessive
ISBT N	No 006) Bloc	od Group S						-	 			. 21.33	Asians: rare	Lu(a-b-). Anti-K may not react well by LISS procedures. Some bacteria trigge
(KEL1	Some	Most	Some	Yes	\leftrightarrow		Rare	Mild to severe (rare)	Mild to severe/ delayed/hemolytic	9	2	Iranian Jews: 12 Arabs: 25	production of IgM anti-K. Expression of K can be acquired through bacterial activity <i>in vivo</i> and <i>in vitro</i> .
•	KEL2	Rare	Most	Rare	Yes	\leftrightarrow		No	Mild to severe (rare)	Mild to moderate/ delayed	99.8	100		
Kpª	KEL3		Yes	Very rare	Yes	\leftrightarrow		No	Mild to severe	Mild to moderate/ delayed	2	< 0.01		In the presence of Kp ^a , other inherited Kell antigens are suppressed difying effect) to varying degrees. Anti-Kp ^a appears often combined w
∢ p⁵	KEL4	Rare	Yes	Rare	Yes	\leftrightarrow	<u> </u>	No	Mild to moderate	No to moderate/ delayed		100		Sera containing anti-Kpb often contain anti-K.
Js ^a	KEL6	Rare	Most	Rare	Yes	↔ to ↑	-	No	Mild to severe	No to moderate/ delayed Mild to moderate/	< 0.01	20		
ls ^b s (ISBT	KEL7 Γ No 007) BI	lood Group	Yes Svstem	Very rare	Yes	↔ to ↑		No	Mild to severe	delayed	100	99		
-eª	LE1	Most	Some		Some	↑↑		Yes some hemolytic	No (one mild case)	No (rare cases of hemolytic reactions)	22	23		Anti-Le ^a and anti-Le ^b in conjunction are frequently naturally occurring made by Le(a-b-) people, especially during pregnancy.
_e ^b	LE2	Most	Some		Some	↑ ↑		Yes some hemolytic	No	No	72	55		There are two kinds of anti-Le ^{b:} anti-Le ^{bH} (LE4), reacting with group C Le(b+) RBCs, and anti-Le ^{bL} , reacting with all Le(b+) RBCs. Other antik react specifically with the compound antigens, e.g., ALe ^b (LE5) and B
y (ISBT Fyª	No 008) Blo	ood Group Rare	System Yes	Very rare	Yes	↓ ↓	Some	Rare	Mild to severe (rare)	Mild to severe (rare)/	66	10	Asians: 99	
Fy ^b	FY2	Very rare	Yes	Very rare	Yes	↓ ↓	Some	Rare	Mild (rare)	immediate/delayed Mild to severe (rare)/ immediate (rare)/	83	23	Thais: 97 Chinese: 9.2 Asians: 18.5	
								_		delayed Mild to moderate/			Thais: 31 Asians: 99.9 Yemeni Jews: 99	
Fy3	FY3	and Caracian	Yes		Yes	\leftrightarrow	Yes	Rare	Mild (rare)	immediate (rare)/ delayed/hemolytic	100	32	Israeli Jews: 96 Israeli Arabs: 75	
Jk ^a	No 009) Blo JK1	Yes many	Yes many	Rare	Yes	1	Some	Yes if IgM present	Mild to moderate (rare)	No to severe/ immediate or delayed/	77	92	Asians: 72	Anti-Jk ^a deteriorates <i>in vitro</i> and <i>in vivo</i> .
Jk ^b	JK2	IgG + IgM Yes many	IgG + IgM Yes many	Rare	Yes	↑	Some	Yes if IgM present	No to mild (rare)	hemolytic No to severe/ immediate or delayed/	74	49	Asians: 76	Anti-Jk ^b deteriorates <i>in vitro</i> and <i>in vivo</i> .
Jk3	JK3	IgG + IgM Rare	IgG + IgM Yes	Rare	Yes	↑		yes some hemolytic	No to mild	hemolytic No to severe/ immediate or delayed	-	100	Polynesians, Finns: > 99	
o (ISB1	Γ No 010) Bl	lood Group	System									Most populations: 0.01		
Diª	DI1		Yes (often IgG1 and IgG3)		Yes	\leftrightarrow		Some	Mild to severe	No to severe/ delayed	Japanese: 12, C	n Indians: from 2 in Carac in Kainganges Indians, Chippewa Indians (Canada	a): 11, Chinese: 5,	
Dib	DI2		Yes		Yes	\leftrightarrow	Yes	No	Mild	No to moderate/ delayed		Hispanics: 1, Poles: 0.47 Most populations: 100 Native Americans: 99		
Wr ^a	DI3	Yes	Yes	Yes	Yes	\leftrightarrow			Mild to severe	No to severe/ immediate or delayed/		All populations: < 0.01		Alloanti-Wra is often a naturally-occurring antibody and is found in the of 1-2% of blood donors. It is frequently found in multispecific sera a
BT No	011) Blood	d Group Sys	stem Yes							hemolytic				common specificity in patients with AIHA.
/tª	YT1		(some are IgG4)		Yes	V		Some	No	No to moderate (rare)/ delayed	Israeli Jews: 98	Most populations: > 99. 8.6, Israeli Arabs: 97.6, Israeli Arabs: 97.6, Israeli Jews:	raeli Druse: 97.4	Experts agree that anti-Yt ^a are often benign and antigen-negative bl may not need to be transfused.
Yt ^b	YT2	d Grove Sv	Yes		Yes	V			No	No	Israeli Arabs: 23.5, Israeli Druse: 26 Not found in Japanese		se: 26	Anti-Yt ^b is rare and usually occurs in sera with other antibodies.
SBT No	xG1	d Group Sy Rare	Most Most	Some	Most	↓ ↓		Some	No	No	89 Females, 66 Males			
brock Do ^a	(ISBT No 01	14) Blood G	roup System Yes		Yes	↑			Positive DAT but no	Delayed and acute/	67	55	Japanese: 24	Anti-Do ^a is notorious for disappearing <i>in vivo</i> .
Dob	DO2		Yes		Yes	· 1			clinical HDFN Positive DAT but no clinical HDFN	hemolytic Acute and delayed	82	89	Thais: 14	
	T No 015) B									No to moderate/		All accent		
Coa	CO1	Very rare	Yes Yes		Yes Yes	\leftrightarrow \leftrightarrow		Some	Mild to severe (rare) Mild	delayed/immediate/ hemolytic No to moderate/		All populations: 99.5 All populations: 10		
CO ^b		No 017) Blo	od Group Sys	tem				. 104 0		delayed/hemolytic		_E Spaidtions, 10		Most anti-Ch1 are InG2 and InGA. A four reports describe
	- J		Yes (mostly lgG2 and lgG4)		Yes	↓			No	Not hemolytic	Most pop	oulations: 96	Japanese: 99	Most anti-Ch1 are IgG2 and IgG4. A few reports describe anaphylar transfusion reactions from plasma products and platelets. Soluble pantigen in donor blood may neutralise patient's antibody. Anti-Ch1 strongly with C4-coated RBCs.
o/Rod	CH/RG1		Yes		Yes	↓			No	Not hemolytic		All populations: > 98	1	A few reports describe anaphylactic transfusion reactions from plas products and platelets.
o/Rode	CH/RG11		System		Yes	↓			No	No	94.5	99.9		
o/Rode Ch1 Rg1 s (ISB		Blood Grou	Yes		Yes	↓			No	No	98	94		
/Rode h1 g1 s (ISB	CH/RG11 T No 022) B	Blood Grou							No	No	92	98		
/Rodo	CH/RG11 T No 022) B KN1 KN3 KN5		Yes Yes Yes		Most	↓						All populations: 100		JMH— or JMH-weak phenotypes can be (transiently) acquired;
o/Rode Ch1 Rg1 s (ISB Cn2 McC2 Kk2 Miltor	CH/RG11 T No 022) B KN1 KN3 KN5		Yes Yes Yes	Group System		† †			No	No				anti-JMH in that case is mostly IgG4.
ch1 Rg1 s (ISB Cna McCa Miltor	CH/RG11 T No 022) B KN1 KN3 KN5 n Hagen, JM	ин (ISBT N	Yes Yes Yes O 026) Blood O	Group System No 207) Blood Gro	Most Yes	1		Vec						Most common cold autoantibody, rare alloantibody in I — (adult i),
o/Rode Ch1 Rg1 ps (ISB Kna McCa Yka Miltor JMH	CH/RG11 T No 022) B KN1 KN3 KN5 n Hagen, JM	ин (ISBT N	Yes Yes Yes O 026) Blood O		Most Yes	↓		Yes some hemolytic	No No	No No		Adults: > 99		Most common cold autoantibody, rare alloantibody in I— (adult i), high titre at 0-4°C, wide thermal range, associated with CHAD and Mycoplasma pneumoniae infection.
o/Rode Ch1 Rg1 os (ISB Kna McCa Yka Miltor JMH ST No (CH/RG11 T No 022) B KN1 KN3 KN5 n Hagen, JM JMH1 027) Blood 0	MH (ISBT N Group Syst Yes Yes	Yes Yes Yes O 026) Blood (Yes em & li (ISBT Rare	No 207) Blood Gro	Most Yes up Collection	1					100	Adults: > 99		Most common cold autoantibody, rare alloantibody in I— (adult i), high titre at 0-4°C, wide thermal range, associated with CHAD and Mycoplasma pneumoniae infection.
Ch1 Rg1 DS (ISB Kna McCa Yka Milton JMH ST No (I	CH/RG11 T No 022) B KN1 KN3 KN5 n Hagen, JM JMH1 D27) Blood C	MH (ISBT N Group Syst Yes Yes	Yes Yes Yes O 026) Blood (Yes em & li (ISBT Rare	No 207) Blood Gro Yes	Yes up Collection Very rare	11		some hemolytic Yes some hemolytic	No Rare Positive DAT but usually no HDFN; however one	No No	100	Adults: > 99 All populations: > 99		Most common cold autoantibody, rare alloantibody in I— (adult i), high titre at 0-4°C, wide thermal range, associated with CHAD and Mycoplasma pneumoniae infection. Autoantibody can occur in serum of people with infectious mononual and some lymphoproliferative disorders. The Jr(a-) phenotype has been found mostly in Japanese and other Abut also in persons of northern European extraction, Bedouin Arabs,
o/Rode Ch1 Rg1 os (ISB Kna McCa Yka Miltor JMH ST No (I	CH/RG11 T No 022) B KN1 KN3 KN5 n Hagen, JM JMH1 027) Blood 0 I1 I2 0 032) Blood	Group Syst Yes Yes d Group Sy	Yes Yes Yes O 026) Blood (Yes Em & Ii (ISBT Rare Rare	No 207) Blood Gro Yes	Yes up Collection Very rare Very rare	11		some hemolytic Yes some hemolytic	No Rare Positive DAT but usually	No No Probably	100			Most common cold autoantibody, rare alloantibody in I— (adult i), high titre at 0-4°C, wide thermal range, associated with CHAD and Mycoplasma pneumoniae infection. Autoantibody can occur in serum of people with infectious mononuc and some lymphoproliferative disorders. The Jr(a-) phenotype has been found mostly in Japanese and other A but also in persons of northern European extraction, Bedouin Arabs, and in one Mexican.
o/Rode Ch1 Rg1 DS (ISB Kna McCa Yka Milton JMH ST No (ISBT No (ISBT No Lan	CH/RG11 T No 022) B KN1 KN3 KN5 n Hagen, JM JMH1 D27) Blood C I1 I2 D 032) Blood JR1	MH (ISBT N Group Syst Yes Yes d Group Sy Some	Yes Yes Yes O 026) Blood o Yes Rare Rare Rare Yes ystem Yes	No 207) Blood Gro Yes	Yes up Collection Very rare Very rare	11		some hemolytic Yes some hemolytic	No Rare Positive DAT but usually no HDFN; however one	No No	100			Most common cold autoantibody, rare alloantibody in I — (adult i), high titre at 0-4°C, wide thermal range, associated with CHAD and Mycoplasma pneumoniae infection. Autoantibody can occur in serum of people with infectious mononuc and some lymphoproliferative disorders. The Jr(a-) phenotype has been found mostly in Japanese and other A but also in persons of northern European extraction, Bedouin Arabs, and in one Mexican.
o/Rode Ch1 Rg1 DS (ISB Kn² McC² Yk² Miltor JMH ST No (I) I I SBT No (ISBT No ISBT NO	CH/RG11 T No 022) B KN1 KN3 KN5 h Hagen, JN JMH1 D27) Blood C I1 I2 to 032) Blood JR1 No 033) Blood LAN1	Group Syst Yes Yes d Group Sy Some od Group Sy Yes (usually a	Yes Yes Yes O 026) Blood o Yes Rare Rare Rare Yes ystem Yes (usually a	No 207) Blood Gro Yes	Yes up Collection Very rare Very rare Yes	↑ ↑↑		some hemolytic Yes some hemolytic Some Some	No Rare Positive DAT but usually no HDFN; however one fatal case of HFDN No to mild Positive DAT	No No Probably No to severe/ hemolytic No to severe/	100	All populations: > 99		Most common cold autoantibody, rare alloantibody in I— (adult i), high titre at 0-4°C, wide thermal range, associated with CHAD and Mycoplasma pneumoniae infection. Autoantibody can occur in serum of people with infectious mononuc and some lymphoproliferative disorders. The Jr(a-) phenotype has been found mostly in Japanese and other A but also in persons of northern European extraction, Bedouin Arabs, and in one Mexican. The Lan— phenotypes found in about 1 in 20,000 people; found in I Caucasians and Japanese. Red cells with a weak Vel expression may be mistyped as Vel-Vel-RBCs have been found in 1 in ~4,000 people and 1 in ~1,700 in
-Ch1 -Rg1 -ps (ISB -Kn² -McC² -Yk² -n Miltor -JMH -BT No (-I	CH/RG11 T No 022) B KN1 KN3 KN5 h Hagen, JM JMH1 D27) Blood C I1 I2 D 032) Blood JR1 No 033) Blood LAN1 D 034) Blood VEL1	Yes d Group System Yes d Group System d Group System yes usually a mixture of IgM and IgG	Yes Yes Yes O 026) Blood O Yes Rare Rare Rare Yes ystem Yes (usually a mixture of IgM and IgG)	No 207) Blood Gro Yes	Yes Up Collection Very rare Very rare Yes Yes	↑ ↑ ↑ ←→		some hemolytic Yes some hemolytic Some	No Rare Positive DAT but usually no HDFN; however one fatal case of HFDN No to mild	No No Probably No to severe/hemolytic	100	All populations: > 99 All populations: > 99		Most common cold autoantibody, rare alloantibody in I— (adult i), high titre at 0-4°C, wide thermal range, associated with CHAD and Mycoplasma pneumoniae infection. Autoantibody can occur in serum of people with infectious mononucland some lymphoproliferative disorders. The Jr(a-) phenotype has been found mostly in Japanese and other Asbut also in persons of northern European extraction, Bedouin Arabs, and in one Mexican. The Lan— phenotypes found in about 1 in 20,000 people; found in ECaucasians and Japanese.

Bibliography

- Reid M E, Lomas-Francis C, Olsson M L. THE BLOOD GROUP ANTIGEN FactsBook. 3rd ed.
- Oxford: Elsevier; 2012 ■ Daniels G. Human Blood Groups. 3rd ed. Oxford: Wiley-Blackwell; 2013 ■ Klein H G, Anstee D. Mollinson's Blood Transfusion in Clinical Medicine. 12th ed. Oxford:
- Issitt P D, Anstee D. Applied Blood Group Serology. 4th ed. Durham (NC): Montgomery Scientific Publications; 1998

Legend*

Papain treated cells, 37°C

markedly enhanced enhanced

unaffected

weakened denatured

variable

Abbreviations Autoimmune hemolytic anemia

DAT HDFN

CHAD Cold hemagglutinin disease
DAT Direct antiglobulin test Hemolytic disease of the fetus and newborn

Hemolytic transfusion reaction IAT Indirect antiglobulin test lg ISBT LISS

Immunoglobulin International Society of Blood Transfusion Low-ionic strength solution

Paroxysmal cold hemoglobinuria RBC Red blood cell Room temperature