A Variety of Methods Can Help Mitigate DARZALEX® (daratumumab) Interference


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**REMEMBER**

*DARZALEX*-treated patients may have pan-reactive antibodies

**DARZALEX**® interference mitigation methods

- Treat reagent RBCs with DTT
- Genotype

A patient's full blood antigen typing results measured prior to initiation of DARZALEX® treatment may complement the results from one of the mitigation methods listed above.

DTT, dithiothreitol; RBCs, red blood cells.
DARZALEX® (daratumumab) Results in a Positive Indirect Antiglobulin Test

- DARZALEX® is a human monoclonal antibody for the treatment of multiple myeloma
- DARZALEX® binds to CD38, a protein that is expressed on red blood cells (RBCs)
- DARZALEX® binding to RBCs interferes with compatibility tests, including the antibody screening and crossmatching

**Typical Indirect Antiglobulin Test From a DARZALEX®-Treated Patient**

1. **RBCs**
2. **Patient serum containing DARZALEX®**
3. **DARZALEX® binds CD38 on RBCs**
4. **Coombs reagent**
5. **Agglutination**
6. **DARZALEX®-mediated positive IAT**

IAT, indirect antiglobulin test; RBC, red blood cells.

- To date, no clinically significant hemolysis has been observed in patients receiving DARZALEX® (data on file)
- DARZALEX® does not interfere with identification of ABO/RhD antigens
- If an emergency transfusion is required, noncrossmatched, ABO/RhD-compatible RBCs can be given, per local blood bank practices
- A patient’s compatibility profile, determined prior to the patient’s first dose of DARZALEX®, is recorded on the patient’s ID card
DARZALEX® (daratumumab) Interference Is Clinically Manageable

• DARZALEX® is a human monoclonal antibody for the treatment of multiple myeloma1

• DARZALEX® binds to CD38, a protein that is expressed on red blood cells (RBCs)3-5

• DARZALEX® binding to RBCs interferes with compatibility tests, including the antibody screening and crossmatching2

If steps are not taken to mitigate DARZALEX® interference, delays in the release of blood products for transfusion may occur

• Blood products for transfusion can be identified for DARZALEX®-treated patients using protocols available in the literature2,6 or by using genotyping7

• Mitigation methods should be used until panagglutination is no longer observed

Help Prevent Delays by Applying Mitigation Methods

If appropriate communication is used, mitigation methods can be applied.

Point of communication

• If steps are not taken to mitigate DARZALEX® interference, delays in the release of blood products for transfusion may occur

• Blood products for transfusion can be identified for DARZALEX®-treated patients using protocols available in the literature2,6 or by using genotyping7

• Mitigation methods should be used until panagglutination is no longer observed
DARZALEX® (daratumumab) Results in a Positive Indirect Antiglobulin Test

Help Prevent Delays by Applying Mitigation Methods

Treat Reagent RBCs With DTT or Genotype

DARZALEX® (daratumumab) Interference Is Clinically Manageable

- DARZALEX® is a human monoclonal antibody for the treatment of multiple myeloma.
- DARZALEX® binds to CD38, a protein that is expressed on red blood cells.
- DARZALEX® binding to RBCs interferes with compatibility tests, including the antibody screening and crossmatching.
- If steps are not taken to mitigate DARZALEX® interference, delays in the release of blood products for transfusion may occur.
- Blood products for transfusion can be identified for DARZALEX®-treated patients using protocols available in the literature or by using genotyping.
- Mitigation methods should be used until panagglutination is no longer observed.
- Treat reagent RBCs with dithiothreitol (DTT) to disrupt DARZALEX® (daratumumab) binding, thus allowing antibody screening or crossmatching to be performed; the protocol can be found in Chapuy et al.
- Blood products for transfusion were identified for DARZALEX®-treated patients, after using DTT-treated reagent RBCs for antibody screening.
- Since the Kell blood group system is also sensitive to DTT treatment, K-negative units should be supplied after ruling out or identifying alloantibodies using DTT-treated RBCs.

Genotype

- To date, no clinically significant hemolysis has been observed in patients receiving DARZALEX®.
- DARZALEX® does not interfere with identification of ABO/RhD antigens.
- If an emergency transfusion is required, noncrossmatched, ABO/RhD-compatible RBCs can be given, per local blood bank practices.
- A patient’s compatibility profile, determined prior to the patient’s first dose of DARZALEX®, is recorded on the patient’s ID card.
DARZALEX® (daratumumab) Interference Is Clinically Manageable

- To date, no clinically significant hemolysis has been observed in patients receiving DARZALEX®.
- DARZALEX® does not interfere with identification of ABO/RhD antigens².
- If an emergency transfusion is required, noncrossmatched, ABO/RhD-compatible RBCs can be given, per local blood bank practices⁶.
- A patient’s compatibility profile, determined prior to the patient’s first dose of DARZALEX®, is recorded on the patient’s ID card.
Additional Resources

For additional information, please contact Janssen Medical Information by using one of the following methods:

Phone: Call 1-800-JANSSEN (1-800-526-7736)
Email: Submit questions via our askjanssenmedinfo.com site
Search: www.janssenmd.com

Contact your local Medical Science Liaison: www.janssenmsl.com
References


