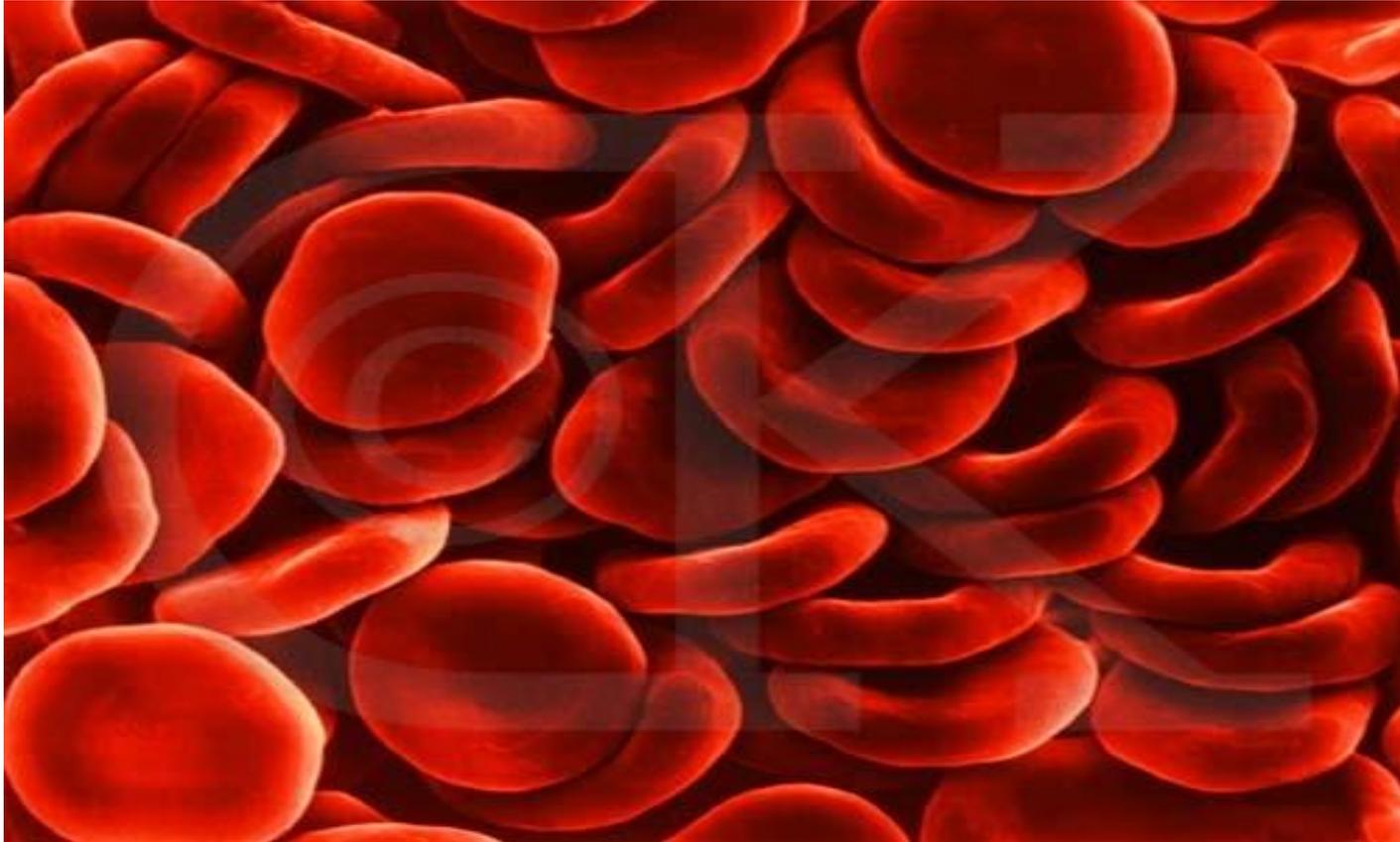


# Blood Groups



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# ***STUDY OBJECTIVES***

**By the end of the lecture the student will able to:**

**1-Understand different blood group.**

**2-Understand Rh factor and its role in blood typing.**

# ABO BLOOD GROUP SYSTEM

Group	A	B	AB	O
Antigen on RBCs	A	B	A & B	-----
Antibody in plasma	Anti-B	Anti-A	-----	Anti-A & Anti-B
% Population	41	9	3	47

-The site of danger in blood transfusion is the agglutinogen of donor (with agglutinin of the recipient) this is because The agglutinin of the donor (with very few amounts =250 ml) in plasma:

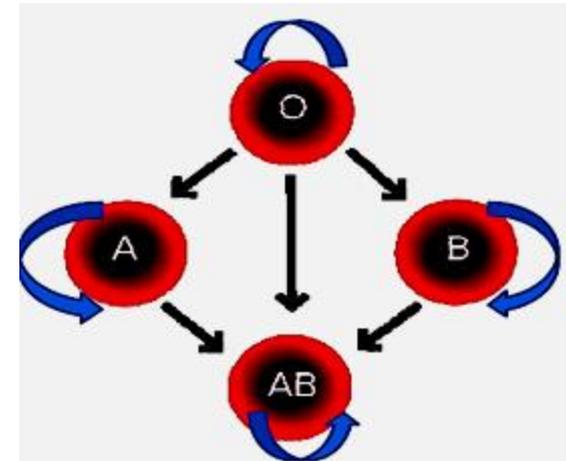
A- is diluted by the recipient plasma because its very large amount (5 L) and so no agglutination occur.

B- is neutrilized by recipient's aggluitonogen.

# Universal Donor and Universal Recipient

- The group “O” is called universal donors (this because RBCs of group O contains no agglutinogen and so no agglutination occurs) and the group “AB” also is called universal recipient (no agglutinin in its plasma and so

	<i>A</i>	<i>B</i>	<i>AB</i>	<i>O</i>
<b>Can give blood to</b>	A & AB	B & AB	AB	All groups Universal donor
<b>Can receive blood from</b>	A & O	B & O	All groups Universal recipient	O



### Donor

O- O+ B- B+ A- A+ AB- AB+

### Recipient

AB+

AB-

A+

A-

B+

B-

O+

O-



# Rh. Factor

**-Def.** It is the agglutinogen which was discovered in RBCs of “Rhesus monkeys” (hence the name).

-According to presence of Rh-agglutinogen on RBCs membrane:

1) Rh +ve	85% of people.	Has D-antigen (genotype may be DD or Dd).
2) Rh -ve	15% of people.	No D-antigen (genotype is dd).

-Normally there is no anti -Rh antibodies and it is formed only by 2 methods:

- 1-Blood transfusion from person Rh +ve to person Rh-ve.
- 2-Pregnancy of Rh -ve by baby Rh +ve.

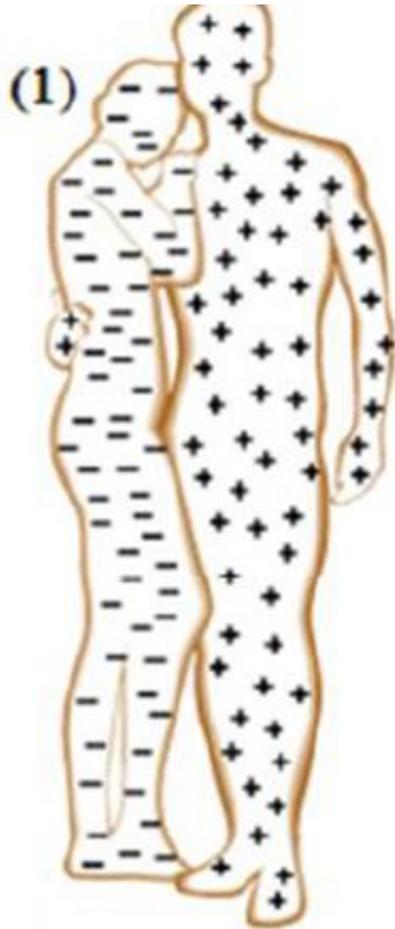
# Rh. Factor

## -Importance:

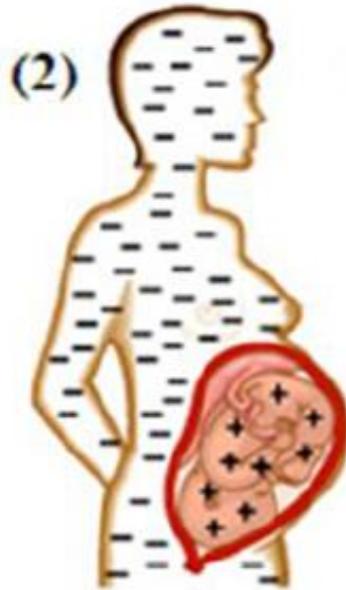
**In Blood Transfusion:** If Rh -ve person is transfused with Rh +Ve blood, anti-Rh antibodies will develop in the plasma. Later on, if he needs a second blood transfusion and is given Rh +Ve blood the agglutination of this blood will occur.

**In Marriage:** If Rh -ve female married Rh +ve male, the fetus will be Rh +ve in most cases. 1st baby should not be affected while from the 2nd will be die by “Erythroblastosis fetalis” or hemolytic diseases of the newly born (= severe anaemia and jaundice)

# Erythroblastosis Foetalis



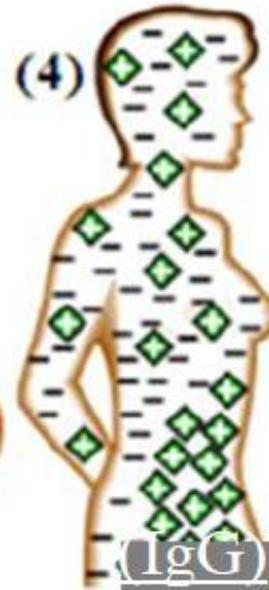
Rh-negative woman and Rh-positive man conceive a child



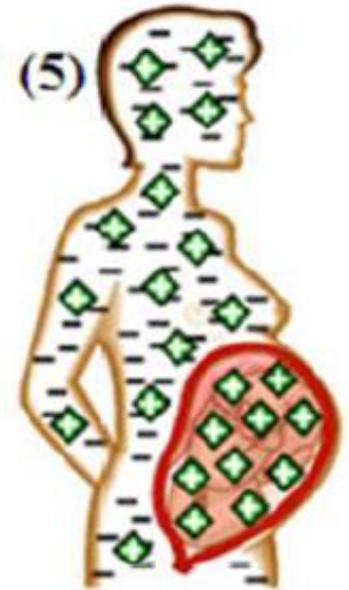
Rh-negative woman with Rh-positive fetus



During delivery, some fetal RBCs containing Rh antigen many reach the mother's blood.



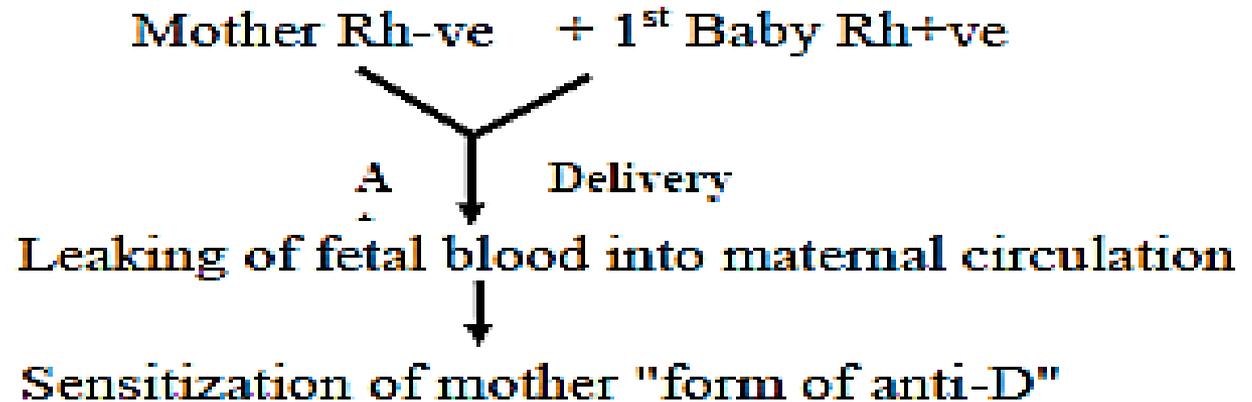
Woman becomes sensitized—antibodies (◊) form to fight Rh-positive blood cells



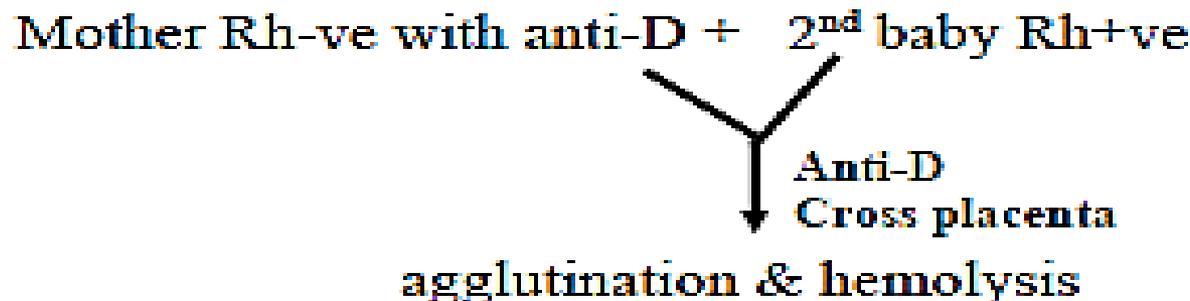
In the next Rh-positive pregnancy, maternal antibodies attack fetal red blood cells

# Erythroblastosis Foetalis

## 1<sup>st</sup> pregnancy:



## 2<sup>nd</sup> pregnancy:



- ① If severe hemolysis: **intrauterine death.**
- ② If mild or moderate hemolysis.
  - ◆ Anemia
  - ◆ Severe jaundice
  - ◆ Edema (hydrops fetalis)
- ③ Kernicterus: **"Neurological deficit"**

# Erythroblastosis Foetalis

-Treatment: -Preventing Rh -ve females from receiving (or marrying) Rh +ve. But if this occurs:

1- MOTHER must be given a single dose of (Rh immune globulin = anti D) within 48 hours (which neutralize the antigens and inhibits the formation of anti Rh antibodies).

2- BABY can be treated by repeated exchange blood transfusion with Rh-ve group O blood during the first few weeks of life. (determination of neonatal blood group is difficult. He has no agglutinin).

# Erythroblastosis Foetalis

## N.B:

*The first baby usually born normal but may be affected*

*(if the mother was previously sensitized by Rh (+ve) blood transfusion).*

*Rh antibodies (IgG) can cross the placenta*

*ABO antibodies (IgM) can't cross the placenta, so no fetal complication.*

**TEST YOUR  
SELF**

# GIVE REASONS:

**-The site of danger in blood transfusion is the agglutinogen of donor with agglutinin of the recipient.**

Because the agglutinin of the donor (with very few amounts) in plasma is diluted by the recipient plasma because it's very large amount and so no agglutination occur.

**-The group "O" is called universal donors while group "AB" is called universal recipient.**

The group "O" is called universal donors (this because RBCs of group O contains no agglutinogen and so no agglutination occurs) and the group "AB" also is called universal recipient (no agglutinin in its plasma and so no agglutination occur).

**-Hemolytic diseases of the newly born due to Rh incompatibility is called erythroblastosis fetalis?**

Because the maternal antibodies destroy many fetal erythrocytes, the fetal bone marrow releases immature precursors of erythrocytes, such as reticulocytes and erythroblasts

# MCQs

**1- The group which has no agglutinogen is:**

- a) A group.
- b) B group.
- c) O group.
- d) AB group.

# MCQs

**2-It is said to be agglutinated when the:**

- A. RBCs are separated
- B. RBCs are clumped together
- C. WBCs are clumped together
- D. Platelets are clumped together

# MCQs

## **3-Blood type O persons are considered universal donors because:**

- A. Type O blood has the commonest distribution.
- B. Their R.B.C's contain neither A nor B agglutinogens.
- C. Their R.B.C's may contain the Rh factor.
- D. Their plasma contain both  $\alpha$  &  $\beta$  agglutinins.

# MCQs

**4-A lady presented with shock due to post partum hemorrhage, her blood group was unknown but became coagulated when mixed with serum containing anti-A antibodies and similarly her serum coagulated with blood group B. The most suitable blood group to be transfused in this case is:**

- A. O negative.
- B. O positive.
- C. A positive.
- D. AB positive.

# MCQs

**5-Mr. Karim's blood was determined to be AB positive. What does this mean?**

- a) Antibodies to A and B are present in plasma
- b) He has antigen A and B but not antigen D on his RBC's
- c) There are no antigen A, B or D
- d) There are no antibodies to A, B or D

# MCQs

**6- The blood group known as the ABO system is based on the presence of what proteins on blood cells?**

- A. Antibodies
- B. Antigens
- C. Agglutinins
- D. Immunoglobulins

# MCQs

**7- What type of blood may a patient with blood type “B+” be infused with? Any blood that is**

- A. Positive for rhesus antigen D
- B. Negative for rhesus antigen D
- C. Negative for antigen B
- D. Negative for antigen A

# MCQs

**8-What can be said about a person who has the “A” antigen on their red blood cells?**

- A. Their blood contains anti-B agglutinins.
- B. Their blood contains anti-A agglutinins.
- C. Their blood contains anti-A and anti-B agglutinins.
- D. Their blood contains neither anti-A nor anti-B agglutinins.

# MCQs

9- Which is the most rare blood group

a. A Rh+

b. AB Rh+

c. AB Rh-

d. B Rh-

# MCQs

**10- A person whose blood group is “B positive” has which of the following?**

- A. The rhesus D antigen and the B antigen on their RBC and the anti-A agglutinin
- B. The rhesus D antigen and the B antigen on their RBC and the anti-B agglutinin
- C. The rhesus D antigen and the A antigen on their RBC and the anti-B agglutinin
- D. No rhesus D antigen and the B antigen on their RBC and the anti-A agglutinin

# MCQs

**11- With which blood types can a person with blood type B be safely transfused?**

A. A or AB

B. B or O

C. A or O

D. B or AB

# MCQs

**12- A mother with blood type O negative has a 2-year-old child of blood type A positive and is pregnant with a second child who is B positive. What should have been done to ensure the health of the people involved?**

- A. The mother was administered anti-A antibodies after delivery of the first child.
- B. The second child should be administered anti-D antibodies while in utero.
- C. The mother was administered anti-D antibodies after delivery of the first child.
- D. The first child was administered anti-D antibodies after the birth.

# MCQs

**13- Which of the following transfusions will result in an immediate transfusion reaction?**

- A) O Rh-negative whole blood to an O Rh-positive patient
- B) A Rh-negative whole blood to a B Rh-negative patient
- C) AB Rh-negative whole blood to an AB Rh-positive patient
- D) B Rh-negative whole blood to a B Rh-negative patient

# MCQs

**14- Which blood unit carries the least risks for inducing an immediate transfusion reaction into a B-positive recipient?**

- A) Whole blood A positive
- B) Whole blood AB positive
- C) Packed red blood cells O positive
- D) Packed red blood cells AB negative

# MCQs

**15- Which transfusion will result in a transfusion reaction?**

**Assume that the patient has never had a transfusion.**

- A) Type O Rh-negative packed cells to an AB Rh-positive patient
- B) Type A Rh-positive packed cells to an A Rh-negative patient
- C) Type AB Rh-positive packed cells to an AB Rh-positive patient
- D) Type A Rh-positive packed cells to an O Rh-positive patient

Donor	Donor Antigen	Recipient	Recipient Antibody	Reaction
O-negative	None	AB-positive	None	None
A-positive	A, Rh	A-negative	B	None
AB-positive	A, B, Rh	AB-positive	None	None
A-positive	A, Rh	O-positive	A, B	A (antigen) and A (antibody)

# MCQs

16- A woman whose blood type is A positive and who has always been healthy just delivered her second child. The father's blood type is O negative. Because the child's blood type is O negative, what would you expect to find in this child?

- A) Erythroblastosis fetalis due to rhesus incompatibility
- B) Erythroblastosis fetalis due to ABO blood group incompatibility
- C) The child would not be expected to have erythroblastosis fetalis
- D) Both A and B

# MCQs

## **17-Rhesus incompatibility of the new born occurs only if:**

- a) The mother is Rh-, father is Rh+, and the baby is Rh-
- b) The father is Rh+, mother is Rh+ and the baby is Rh-
- c) The mother is Rh-, father is Rh+ and the baby is Rh+
- d) The baby is Rh+, mother is Rh- and the father is Rh-
- e) The mother and fetus are ABO incompatible

# MCQs

**18-Which of the following transfusions will result in an immediate transfusion reaction?**

- A. O-negative whole blood to an O-positive patient
- B. A-negative whole blood to a B-negative patient
- C. AB-negative whole blood to an AB-positive patient
- D. B-negative whole blood to a B-negative patient

# MCQs

19-A woman whose blood type is A positive and who has always been healthy just delivered her second child. The father's blood type is O negative. Because the child's blood type is O negative (O, Rh negative), what would you expect to find in this child?

- A. Erythroblastosis fetalis due to rhesus incompatibility
- B. Erythroblastosis fetalis due to ABO blood group incompatibility
- C. Both A and B
- D. The child would not be expected to have erythroblastosis fetalis

# Answers

## MCQs

**1-C**

**2-C**

**3-B**

**4-C**

**5-D**

**6-B**

**7-D**

**8-A**

**9-C**

**10-A**

**11-B**

**12-C**

**13-B**

**14-C**

**15-D**

**16-C**

**17-C**

**18-B**

**19-D**