REMEMBER

For a patient who may receive DARZALEX Faspro® (daratumumab and hyaluronidase-fihj) or DARZALEX® (daratumumab) and may require a transfusion:

- Type and screen patients prior to starting daratumumab and inform the blood bank that your patient has been treated with daratumumab.
- Ensure that your patient's blood sample is identified as treated with daratumumab.
- Double-check standing orders for transfusions to determine if your patient received daratumumab within the last year.
- Provide your patient's pre-daratumumab compatibility profile, if available, to the blood bank.
- Ask your patient to tell their other healthcare providers that they have received daratumumab, particularly before a transfusion.

Understanding Daratumumab Interference With Blood Compatibility Testing

References


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To Ensure Timely Transfusions

REMEMBER

For a patient who may receive DARZALEX FASPRO® (daratumumab and hyaluronidase-fihj) or DARZALEX® (daratumumab) and may require a transfusion:

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References


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Daratumumab Results in a False Positive Indirect Coombs Test

Daratumumab binds to CD38, a protein that is expressed on red blood cells (RBCs)\(^2\)\(^-\)\(^4\).

Daratumumab binding to RBCs interferes with blood bank compatibility tests, including the antibody screening and crossmatching\(^1\) (both indirect Coombs tests) that are part of a routine pretransfusion workup.

**Typical Negative Indirect Coombs Test**
- RBCs
- Patient serum without antibodies to minor antigen
- No patient antibodies to bind RBC antigens
- Coombs reagent
- No agglutination
- Negative indirect Coombs test

**Typical Positive Indirect Coombs Test**
- RBCs
- Patient serum containing antibodies to minor antigen
- Patient antibodies to bind RBC antigens
- Coombs reagent
- Agglutination
- Positive indirect Coombs test

**Typical Indirect Coombs Test From a Patient Treated With Daratumumab**
- RBCs
- Patient serum containing daratumumab
- Daratumumab binds CD38 on RBCs
- Coombs reagent
- Agglutination
- False positive indirect Coombs test

RBCs, red blood cells.
Daratumumab Results in a False Positive Indirect Coombs Test Help Prevent Blood Transfusion Delays

- Daratumumab binding to RBCs interferes with blood bank compatibility tests, including the antibody screening and crossmatching that are part of a routine pretransfusion workup.
- Blood compatibility testing can still be performed on daratumumab-treated patients.
- Blood products for transfusion can be identified for daratumumab-treated patients using protocols available in the literature or by using genotyping.
- To ensure that your patient receives a timely transfusion, type and screen patients prior to starting daratumumab and inform the blood bank that they will receive a daratumumab-treated sample.

Note: Additional information to share with your blood banks can be found in the Prescribing Information.
Daratumumab Interference Is Clinically Manageable

- Daratumumab 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
- Once treatment with daratumumab is discontinued, panagglutination may persist; the duration of this effect varies from patient to patient, but may persist for up to 6 months after the last daratumumab infusion

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
To Ensure Timely Transfusions

REMEMBER

For a patient who may receive DARZALEX FASPRO® (daratumumab and hyaluronidase-fihj) or DARZALEX® (daratumumab) and may require a transfusion:

1. Type and screen patients prior to starting daratumumab and inform the blood bank that your patient has been treated with daratumumab.
2. Ensure that your patient's blood sample is identified as treated with daratumumab.
3. Double-check standing orders for transfusions to determine if your patient received daratumumab within the last year.
4. Provide your patient's pre-daratumumab compatibility profile, if available, to the blood bank.
5. Ask your patient to tell their other healthcare providers that they have received daratumumab, particularly before a transfusion.

References