



CDC Screening: overview from the survey

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EXTRA MURAL MEETING 2023



CDC screening



- "A complement dependent cytotoxicity (CDC) screening for HLA specific antibodies <u>must</u> be done at least once a year."
 ET manual Chapter 10
- CDC is regarded as an important technique for the definition of clinically relevant antibodies
- CDC screening permits interpretation of the CDC crossmatch
- CDC reactivity is a prerequisite for inclusion into the AM program
- Therefore, it is important that all laboratories performing
 CDC screening retain their expertise



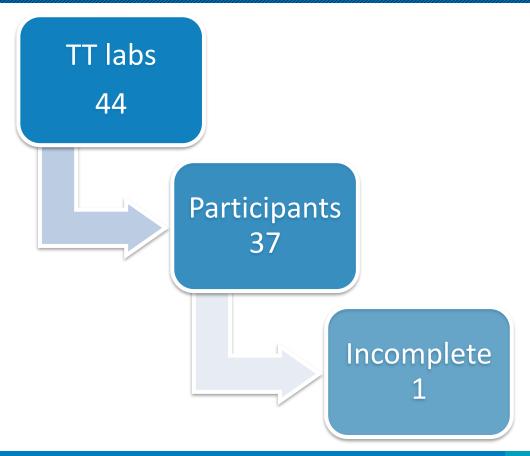
CDC screening survey



Inventory of the current status and future of CDC screening for detection and identification of HLA-specific antibodies in all Eurotransplant affiliated laboratories

CDC survey participants





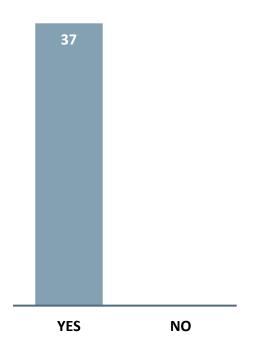
Frequency of CDC screening

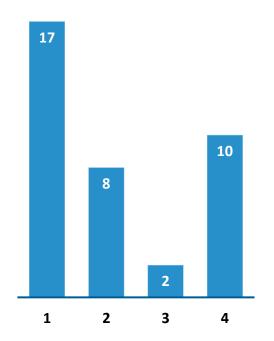


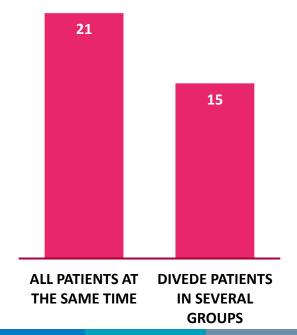
Do you use CDC screening for all your patients on the waiting list as described in ET manual?

How many times/year do you perform CDC screening for patients on the waiting list?

Do you perform CDC screening for all patients at the same time or divided in several groups?

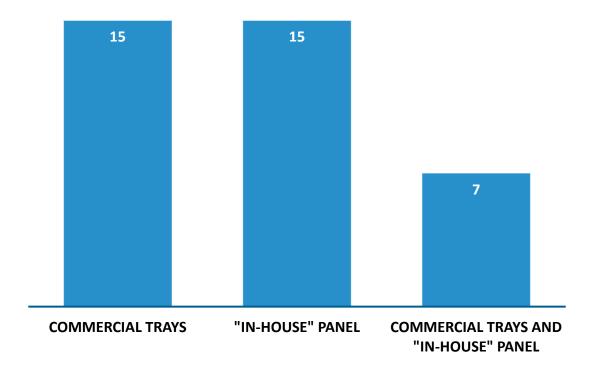






"In-house" panel vs commercial trays



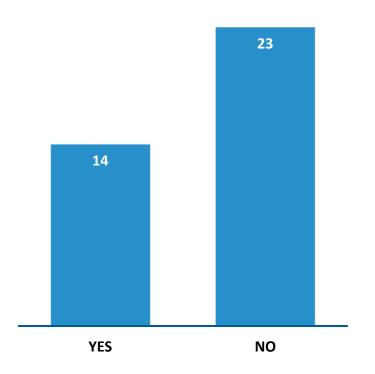


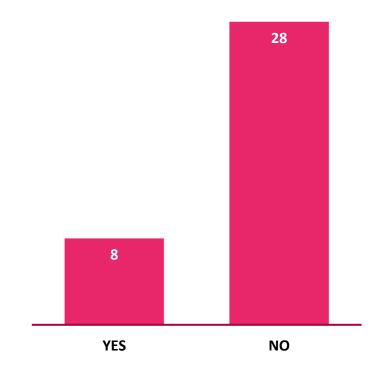
The use of automated systems



Do you use an automated system to dispense serum/cells?

Do you use an automated system to read the results?





Automated systems used



Dispense cells

• Lambda Dot & Jet

Dispense serum

- 60 syringes serum dispenser (Greiner)
- Automatic Seradot
- Automatic Serum Dispenser
- Biotest Seradot OF-2
- Liquid Handler (Hamilton STAR)
- Mantis Liquid Dispenser

Reading

- Lambda Scan
- Patimed

Evaluation

- Semiautomated evaluation
- Interface between microscope and in-house laboratory software

Technical aspects of CDC screening



Serum pretreatment • Yes: 11%

• No: 89%

Number of cells

• 1.000 – 7.000 cells

• 40.000 cells

Volume of serum

• 1µl (overall)

2μl

Cell-serum incubation

- 30 min (33/36)
- 25 min (1/36)
- 45 min (1/36)
- 30 or 60 min (1/36)

Complement incubation

- 60 min (33/36)
- 90 min (2/36)
- 60 or 120 min (1/36)

CDC screening using commercial trays



Vendor

- BAG
- BioRad
- CTS Heidelberg
- One Lambda

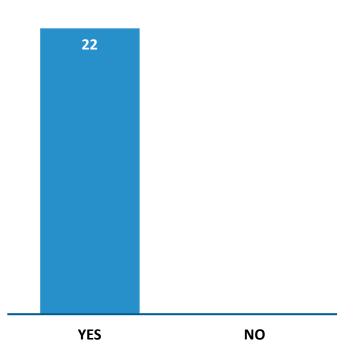
How many different HLA – typed donor cells suspension does the commercial tray contain?

- 56
- 58
- 60

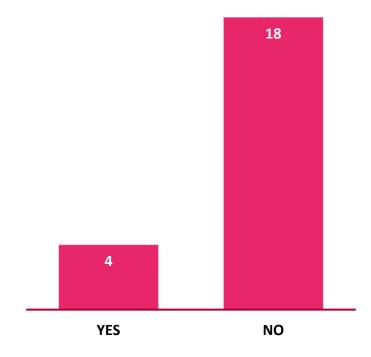
CDC screening using commercial trays



Does the panel cover the most common HLA types in the ET donor population?



Are frequently occurring antigens missing from your cell panel?



In-house panel for CDC screening



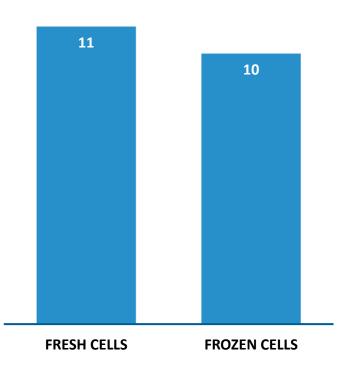
Terasaki Trays

- Greiner Bio-One
- Nunc

Staining method

- Bromphenol blue
- CFDA
- Eosin
- Acridine Orange
- Ethidium Bromide
- Fluoroquench
- Propidiumjodide ink
- Stainfix
- Trypan Blue / Eosin Y

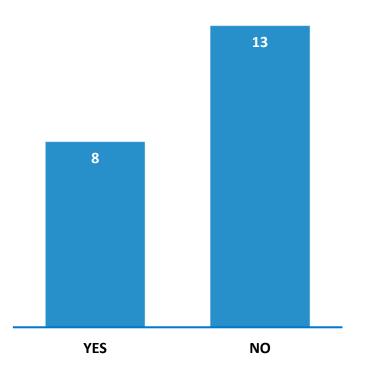
Fresh or frozen cells?



In-house panel for CDC screening



Does your "in-house" cell panel vary in size?



How many different HLA-typed cells does your in-house panel contain?

• 25

• 58

• 30

• 60

• 50

• 100

• 54

Min – max number of cells

• 35 – 65

• 50 **–** 60

40 − 60

• 52 **–** 58

24 − 54

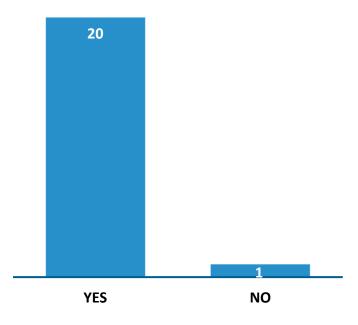
• 50 – 56

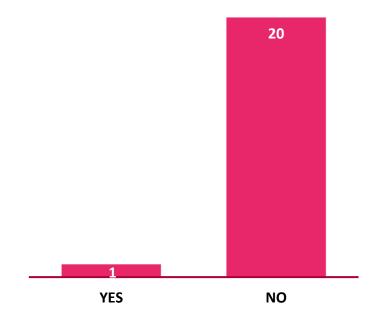
In-house panel for CDC screening



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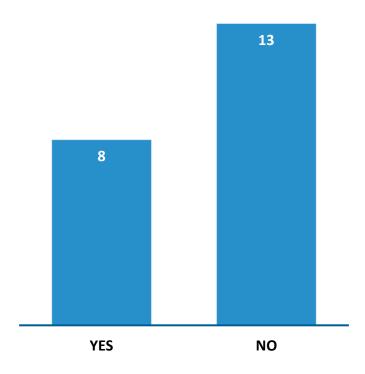
Are frequently occurring antigens missing from your cell panel?





Do you have your in-house CDC screening test ISO15189 certified?



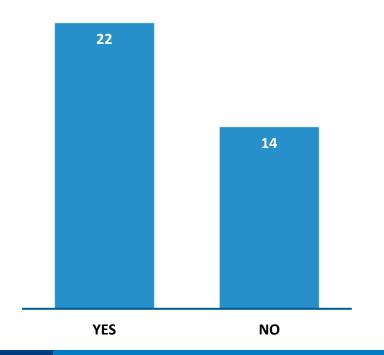


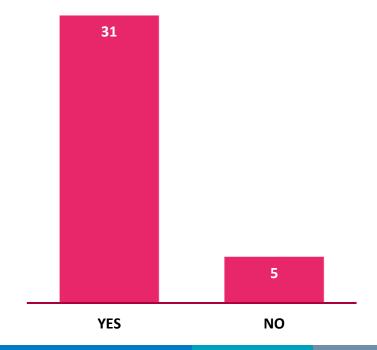
CDC screening for sensitized patients



Would you be in favor to change the mandatory annual CDC screening for all patients to only sensitized patients?

If the annual CDC screening would be only required for sensitized patients, do you expect to retain sufficient expertise in the technique?

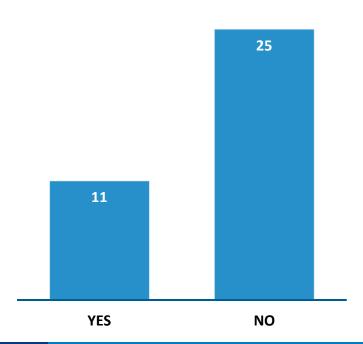




Alternatives for CDC screening



Do you think C1q or C3d based Luminex could replace CDC screening?



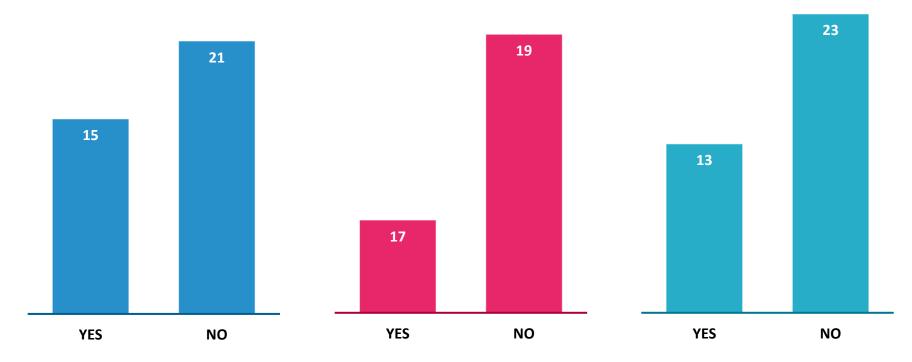
Future needs



Would you be interested in a machine for dispensing cells/cysteine/complement etc?

Would you be interested in an automated reader for Terasaki trays?

Would you need/like help from ETRL to continue CDC screening?







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