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Prevalence of Bombay blood group in a tertiaryhealth care centre, Karnataka, India

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ARTICLE INFO Article history: Received: 27 January 2011; Received in revised form: 20 February 2011; Accepted: 23 February 2011;	— ABSTRACT The prevalence of Bombay blood group in Employees State Insurance Medical College and Post Graduate Institute of Medical Science and Research centre(ESICMC-PGIMSR), a tertiary health provider in Karnataka, South India.	
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Introduction

The authors conducted investigation on the recipients and donor subjects over a period of 3 years numbering 37117, covering urban as well as rural population of Karnataka. The grouping and typing was done at ESICMC-PGIMSR blood bank to determine the prevalence of Bombay blood group. History of consanguinity in the parents of Bombay group positive subjects was recorded.

The ABO and Rh-D typing were carried out by standard cell and serum grouping by test tube method using commercially available antisera and known cells prepared in house, from pooled blood units. All blood samples showing "O" group were tested with commercial anti-H lectin of Ulex europaeus seed extract from J.Mitra and co.

Analyzing the results of 37117 study subjects showed that the most common was "O" group (40.5%); 6 oh phenotypes (0.016%) were detected of which 2 were males and 4 females, and all were Rh-D positive.

• The prevalence of Bombay blood group in our study, in a mixed population covering urban and rural areas of Bangalore district, was found to be higher (0.016%) compared to the studies done by Das et al⁽¹⁾ in Tamil Nadu and Periyavan .S. et al ⁽²⁾in Karnataka(0.004% and 0.005% respectively).Consanguinity among parents was observed in 4 out of 6 cases. However study done by Anjuverma et al⁽³⁾ in Andhra Pradesh has shown a slight increase in the prevalence of this phenotype (0.048%). This

increase in their prevalence may be attributed to the screening of the family members of oh Phenotypes.

To conclude, population surveys are needed and also to improve necessary technology in blood banks to detect Bombay blood group, which is commonly mistaken as "O" group. It is necessary in all the blood banks to maintain a detailed registry of this rare blood group positives and can be used as donors in case of emergencies.Consanguinity appears to be an important, preventable risk factor.

Table-1: Total number of donor and recipient blood sample screened and the oh phenotypes in males and females.

Total number screened	Number of oh phenotype	e males	Females
37117	6	2	4

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