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(54) **Molecular structure of RHD negative locus**

Molekularstruktur des RHD-negativ Genortes

Structure moléculaire de lieu de RDH négatif

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Description

[0001] The present invention relates to a nucleic acid molecular structure representing the Rhesus genes locus comprising the *RHD* gene. Furthermore, the invention relates to a process for the specific detection of the common *RHD* negative haplotypes. The invention further relates to the detection of *RHD* positive haplotypes in D-negative individuals. Various mutations in the *RHD* gene have been identified that allow for the development of diagnostic tools. The invention also relates to oligonucleotides. Additionally, the invention relates to kits comprising or employing the above recited compounds of the invention.

[0002] The Rhesus D antigen (ISBT 004.001; RH1) is the most important blood group antigen determined by a protein. Anti-D remains the leading cause of hemolytic disease of the newborn (Filbey, *Acta Obstet Gynecol Scand*, 74:687, 1995; Bowman, J, *Semin Perinatol* 21:39, 1997). Depending on the population, 3% to 25% of whites lack the antigen D (Mourant, *The distribution of the human blood groups and other polymorphisms*, London, Oxford University Press, 1976). Anti-D immunization can occur readily in D-negative recipients (Urbaniak, *Transfusion* 21:64, 1981).

[0003] The antigens of the RH blood group are carried by proteins coded by two genes, *RHD* and *RHCE*, that are located at chromosomal position 1p34.1 - 1 p36 (Cherif-Zahar, *Hum. Genet.* 86: 398, 1991; MacGeoch, *Cytogenet. Cell Genet.* 59:261, 1992) probably within less than a 450,000 base pair (bp) distance (Carritt, *Hum. Mol. Genet.* 6:843, 1997). Both genes encompass ten exons and their structures are highly homologous. The relative orientation of the genes, their distance, and the possibility of interspersed other genes were unknown (Flegel, *Transfus. Med.* 8:281, 1998). Very recently, Okuda et al. (Okuda, *Biochem. Biophys. Res. Commun.* 263:378, 1999) reported a sequence of about 11,000 bp, which was thought to represent the DNA segment between *RHD* and *RHCE*.

[0004] In whites, the vast majority of D-negative haplotypes is due to a deletion of the *RHD* gene: This deletion spans the whole *RHD* gene, because *RHD*-specific sequences ranging from exon 1 to the 3' untranslated region are absent (Gassner, *Transfusion* 37:1020, 1997). The exact extent of the deletion was uncertain, leaving open the possibility that neighboring genes were also affected.

[0005] The identification of the *RHD* gene as the molecular basis of the D antigen allowed RhD phenotype prediction by DNA typing (Flegel, *Transfus. Med.* 8:281, 1998; Lo, *Lancet* 341:1147, 1993). However, since the structure of the prevalent D-negative haplotype is unknown, a specific detection of the *RHD* deletion remained impossible and the discrimination of *RHD*⁺/*RHD*⁺ homozygous from *RHD*⁺/*RHD* heterozygous individuals relied on indirect methods. This discrimination is of clinical interest in particular, because in D-negative mothers with an anti-D, the risk of an affected child is 100% with a *RHD*⁺/*IRH*⁺ father, but only 50% with a *RHD*⁺/*RHD* father.

[0006] Several indirect approaches have been applied to determine the zygosity: (i) a simple guess based on the phenotype is correct in about 95% of cases, (ii) determination of the D antigen density which can be confounded by factors such as the presence of the C antigen, and (iii) several methods involving the parallel quantitative amplification of *RHD*- and *RHCE*-specific sequences (Cossu, *Electrophoresis* 17:1911, 1996; Döscher, *Infusionsther. Transfusionsmed.* 26(suppl 1):31, 1999 (abstr.)). These elaborate techniques may not be practical in routine laboratories. In addition, several investigators identified polymorphisms in the *RICE* gene or neighboring sequences genetically linked to the lack of the *RHD* gene (Carritt, *Hum. Mol. Genet.* 6:843, 1997; Huang, *Am. J. Hum. genet.* 58: 133, 1996; Fujiwara, *Hum. genet.* 104:301, 1999; Onda, *Gene* 159:225, 1995). This indirect approach relied on the linkage disequilibrium associating the *RHD* deletion with a polymorphism.

[0007] Furthermore, the utility of the *RHD* PCR is limited by the incomplete knowledge of presumably rare *RHD* positive alleles in RhD-negative. *RHD* positive alleles in RhD negative are caused by *RHD-CE-D* hybrid genes (Huang, *Blood* 88:2326-33, 1996; Faas, *Transfusion* 37:38-44, 1997; Faas, *Transfusion* 36:506-11, 1996), nonsense-mutations (Avent, *Blood* 89:2568-77, 1997), frameshifts (Andrews, *Blood* 92:1839-40, 1998; Cherif-Zahar *Br. J. Haematol.* 102:1263-70, 1998), or pseudogenes (Singleton, *Blood* 95:12-8, 2000). Such alleles are frequent in Africans (Faas, *Transfusion* 37: 38-44, 1997; Singleton, *Blood* 95:12-18, 2000) and Asians (Okuda, *J. Clin. Invest.* 100:373-9, 1997) but rare in whites. Nevertheless, recent analyses (Avent, *Blood* 89:2568-77, 1997; Flegel, *Transfus. Med.* 8:281-302, 1998) suggested that even for whites these alleles are likely the leading cause of incorrect Rh phenotype prediction. Several observations in whites (Avent, *Blood* 89:2568-77, 1997; Hyland, *Blood* 84:321-4, 1994) indicated that these alleles clustered in the Cde and cdE haplotypes.

[0008] The most direct approach for analyzing the *RHD* locus on the molecular level would be PCR amplification spanning the *RHD* deletion site. Such an assay has, so far, not been available because the structure of the *RHD* locus in RhD positives and RhD negatives was incompletely understood.

[0009] Accordingly, the technical problem underlying the present invention was to provide means and methods for a reliable, nucleic acid based analysis of the Rhesus D locus. These means and methods should be, inter alia, suitable for the detection and/or discrimination of *RHD*⁺/*RHD*⁺ and *RHD*⁺/*RHD*⁻ individuals.

[0010] The solution to said technical problem is achieved by providing the embodiments characterized in the claims.

[0011] Thus, the invention relates to a nucleic acid molecule as characterised in the claims.

[0012] The *RHD* gene consists of a *RHD* 5' region homologous to genomic clone HS469D22 (GenBank accession

number AL031284.9) bases 56,012 to 51,472; also represented by a nucleotide segment dubbed "stuffer fragment" (GenBank accession number AB029152) bases 7,716 to 11,005; the *RHD* promoter (GenBank accession number AJ252314) bases 1 to 1,246 (see Figure 11) and the *RHD* gene defined by the *RHD* cDNA (GenBank accession number X63097) bases 1 to 1,371 and by its intron sequences.

[0013] In accordance with the present disclosure, the term "nucleic acid molecular structure" comprises also any feasible derivative of the above referenced nucleic acid structure to which a nucleic acid probe may hybridize. In other words, the structure may be prepared by synthetic or semisynthetic means and thus consist of or comprise peptide nucleic acid. Said term also bears the meaning of a nucleic acid molecule.

[0014] In accordance with the present invention the term "identity" refers to the determination of sequence identity using suitable alignment programs, such as BLAST.

[0015] As has been pointed out above, the diagnostic analysis of *RHD* negatives on the molecular level has so far been hampered by the fact, that the overall structure of the *RHD/RHCE* loci was unknown. It has now been surprisingly found, that the two genes, *RHD* and *RHCE*, have opposite orientation and face each other with their 3' ends. It has further been found that the *RHD* gene is surrounded by two highly homologous *Rhesus boxes*. The physical distance between *RHD* and *RHCE* is about 30,000 bp and is filled with a *Rhesus box* and the *SMP1* gene. The breakpoints of the *RHD* deletion in the prevalent *RHD* negative haplotypes are located in the 1,463 bp identity region of the *Rhesus boxes*. Similar *RHD* deletion events may involve any other region within the highly homologous *Rhesus boxes*. Hence, a region of a breakpoint comprising an *RHD* deletion other than the common *RHD* deletion may be anticipated to occur anywhere within the *Rhesus boxes* as defined above.

[0016] The opposite orientation of the two *RH* genes explains the different character of hybrid genes in the MNS and RH blood group: The glycoprotein genes encoding the MNS antigens occur in the same orientation (Onda, Gene 159: 225, 1995), and many recombinations may be explained as unequal crossing over resulting in single hybrid genes (Blumenfeld, Hum. Mutat. 6:1999, 1995). Based on the surprising findings referred to above, the events on the molecular level that lead to *RHD* negatives can now be more fully understood. In the *RH* locus, the inversely oriented sequences are unlikely to trigger unequal crossing over, and if this event occurred, no functional hybrid gene would result. The conclusion that unequal crossing over at the *RH* gene locus is unlikely may explain that most *RH* hybrid genes are of *RHD-CE-D* or *RHCE-D-CE* type and involve stretches of homologous DNA positioned *in cis* as noted previously (Wagner, Blood 91:2157, 1998). Currently, the *RH* gene system is the only well investigated gene locus where the two genes have opposite orientation, rendering it a model system for the evolution of neighboring, oppositely oriented genes that are frequent throughout genomes.

[0017] Based on the structure of the *RH* gene locus (Fig. 1), a parsimonious model for the *RHD* gene deletion event is proposed (Fig. 7). Although the applicant does not wish to be bound to theory, the following is believed with regard to the generation of RhD negative. The *RHD* deletion may be explained by unequal crossing over triggered by the highly homologous *Rhesus boxes* embracing the *RHD* gene. The hybrid-type *Rhesus box* of *RHD*-negatives arises, when a crossover leading to a deletion event involving a breakpoint region within the identity region of the upstream and downstream *Rhesus boxes* takes place. Thus, the hybrid *RHD* box is characterized by a 5' portion derived from the upstream *RHD* box fused to a 3' portion from the downstream *RHD* box. In one preferred embodiment the breakpoint region is 903bp long. The sequence of this preferred hybrid *Rhesus box* is depicted in figure 5. In the specific embodiments described in the examples, said 903 bp breakpoint region in the *Rhesus boxes* is located in a 1,463 bp stretch of 99.9% homology resembling a THE-1B human transposable element and a L2 repetitive DNA element (Fig. 4). Interestingly, the >60,000 bp DNA segment that is deleted in the *RHD* negative haplotype consisted only of and contained all sequences that are duplicated in the *RHD* positive haplotype.

[0018] The findings referred to herein above allow for the establishment of a number of easy to do or refined methods for the analysis of the genotype of an individual with regard to the *RH* gene locus. Examples of such methods are provided herein below.

[0019] While the molecular mechanism resulting in the prevalent *RHD* negative haplotype is now apparent, it is less clear how the much older duplication event gave rise to the structure of the *RH* genes in *RHD* positives. The duplication of the *Rhesus box* and the *RH* genes probably occurred as a single event, because the overall homology of the two *Rhesus boxes* is very similar to that of the *RH* genes. Without being bound by theory, it is tempting to speculate that the *RHD* duplication originate in causal connection with the insertion of the near full-length THE-1B transposon-like human element in duplicate. However, the open reading frame of the THE-1 B element probably was non-functional at the time of the duplication.

[0020] According to the present invention, the term "is representative of" relates to a nucleic acid molecular structure comprising all sequential and structural features to relate said structure to a group of molecular structures sharing said features. In the above preferred embodiment, said features give rise to the common *RHD* negative haplotype. In the present context this means preferably the deletion of the *RHD* gene encompassing the whole *RHD* gene and its 5' region, which are located between the upstream *Rhesus box* and the downstream *Rhesus box*.

[0021] In the present context this could also mean, for example, that all structures sharing a nonsense mutation,

missense mutation, splice site mutation, partial deletion, partial insertion, partial inversion or a combination thereof within the *RHD* gene, which terminates or obliterates the expression of a protein product of the *RHD* gene, are representative of the *RHD* negative haplotype.

[0022] The term "haplotype" relates to a series of linked alleles within a defined region on a single maternal or paternal chromosome.

[0023] The term "*RHD* positive haplotype" refers to any haplotype that comprises DNA sequences specific for the *RHD* gene.

[0024] In one embodiment the nucleic acid molecular structure is derived from a sample comprising an *RHD* positive haplotype that is serologically classified RhD negative.

[0025] In the context of the invention, the term "serologically classified RhD negative" describes a sample that has been tested for the presence of RhD antigen using, e.g., routine serological assays wherein the result of such assays was negative.

[0026] In a particularly preferred embodiment the sample that is classified RhD negative is obtained from a Caucasian population.

[0027] *Cde^s*, also known as *r^S*, is a *RH* haplotype resembling *Cde* that was initially characterized as expressing antigen e^s instead of antigen e, expressing antigen c, and expressing reduced and altered antigen C (Issitt, P.D. Applied Blood Group Serology, Miami: Montgomery Scientific Publications, 1985, page 239). The molecular structure underlying this haplotype has recently been elucidated (Blunt, T., Daniels, G., and Carritt, B. Serotype switching in a partially deleted *RHD* gene. *Vox Sang.* 67:397-401, 1994; Faas, B.H.W., Becker, E.A.M., Wildoer, P., Ligthart, P.C., Overbeeke, M.A.M., Zondervan, H.A., von dem Borne, A.E.G.K., and van der Schoot, C.E. Molecular background of VS and weak C expression in blacks. *Transfusion* 37:38-44, 1997; Daniels, G.L., Faas, B.H., Green, C.A., Smart, E., Maaskant-van Wijk, P.A., Avent, N.D., Zondervan, H.A., von dem Borne, A.E., and van der Schoot, C.E. The VS and V blood group polymorphisms in Africans: a serologic and molecular analysis. *Transfusion* 38:951-958, 1998.): The *Cde^s* haplotype contains a *RHD-CE-D* hybrid gene encoding for an antigen C immunoreactivity, in which exons 4 to 7 derived from *RHCE* and exon 3 has a *RHD* like structure but possesses a *RHCE* specific Thr at codon 152.

[0028] Several additional *RHD* positive alleles occurring in RhD negative individuals have previously been partly or fully characterized (Table 10). Three of these ten published *RHD* alleles represented *RHD-CE-D* hybrid alleles in which the *RHCE* specific stretch encompassed at least exons 4 to 7. For each of these three hybrid *RHD* alleles, alleles were found whose patterns would be compatible (Table 10). Out of the seven RhD negative patterns observed in the present study, six were compatible with such type of hybrid *RHD* allele. Seven out of ten published *RHD* alleles represented deletions, nonsense mutations or a pseudogene. None of these alleles occurred in this study, which may indicate that they are rare in whites.

[0029] The invention relates to a nucleic acid molecule being derived from the *RHD* gene comprising a single nucleotide substitution within the coding region of the *RHD* gene or within a 5' or 3' splice site, as characterised in the claims.

[0030] The term "a nucleic acid molecule derived from the *RHD* gene" is intended to mean that this nucleic acid molecule originates from the *RHD* gene but carries a mutation, deletion, insertion, substitution or duplication within the coding region, any of the splice sites or a non-coding region. Preferably, said nucleic acid molecule gives rise to an aberrant polypeptide.

[0031] In a further preferred embodiment said nucleotide substitution gives rise to a stop-codon at codon 16.

[0032] In a more preferred embodiment said substitution gene gives rise to an *RHD(W16X)* mutation.

[0033] In an additional more preferred embodiment said substitution is a G→A substitution at nucleotide position 48.

[0034] In a further preferred embodiment of the invention said nucleotide substitution gives rise to a stop codon at codon 330.

[0035] In a more preferred embodiment of the invention said substitution gives rise to a *RHD(Y330X)* mutation

[0036] In an even more preferred embodiment of the invention said substitution is a C→G substitution at nucleotide position 985.

[0037] In another preferred embodiment of the invention said substitution gives rise to a missense mutation at codon 212.

[0038] In another preferred embodiment of the invention said substitution gives rise to a *RHD(G212V)* missense mutation.

[0039] In a more preferred embodiment of the invention said substitution is a G→T substitution at nucleotide position 635.

[0040] In a different preferred embodiment of the invention said substitution gives rise to a mutation within a 4 nucleotide sequence, a 6-nucleotide sequence or an 8-nucleotide sequence comprising the consensus splice site at the exon 8/intron 8 boundary.

[0041] In another more preferred embodiment of the invention said substitution give rise to a *RHD(G1153(+1)A)* mutation.

[0042] In an additional more preferred embodiment of the invention said substitution is a substitution at the 5' splice site intron 8 from AGgt to AGat.

[0043] In a further more preferred embodiment the nucleic acid molecular structure of the invention or a nucleic acid molecule being derived from the *RHD* gene correlates with a RhD-negative phenotype.

[0044] In another preferred embodiment of the invention said substitution gives rise to a mutation within a 4-nucleotide, a 6-nucleotide sequence or an 8-nucleotide sequence comprising the consensus splice site of the exon 3/intron3 boundary.

[0045] In a further preferred embodiment of the invention said substitution gives rise to a *RHD(G486(+1)A)* mutation.

[0046] In an additional more preferred embodiment of the invention said substitution is a substitution at the 5' splice site intron 3 from ACgt to ACat.

[0047] In a further preferred embodiment of the invention said substitution gives rise to a mutation within a 4-nucleotide sequence, a 6-nucleotide sequence or an 8-nucleotide sequence comprising the consensus splice site of exon 9/intron 9 boundary.

[0048] In another preferred embodiment said substitution gives rise to a *RHD(K409K)* mutation.

[0049] In an additional more preferred embodiment of the invention said substitution is a substitution at the 5' splice site intron 9 from AGgt to AAgt.

[0050] In a more preferred embodiment of the invention the nucleic acid molecular structure of the invention or a nucleic acid molecule being derived from the *RHD* gene correlates with a D_{el}-phenotype.

[0051] In summary and referring to the above, *RHD* positive alleles can harbour single nucleotide substitutions leading to termination or reduction of the D-antigen expression. Using the improved detection methods disclosed in the present invention four *RHD* positive alleles in RhD negatives were found that had not been described previously. Two alleles, *RND(W16X)* and *RHD(Y330X)* harbored stop codons preventing the expression of the full RhD protein. In three alleles, splice site mutations were found that may prevent correct splicing and RhD expression.

[0052] These alleles typed *RHD* positive in all *RHD* PCR methods tested, and a correct antigen D prediction necessitates a specific detection of these alleles or of polymorphisms linked to these alleles.

[0053] Previously, the discrimination of *RHD* homozygotes from *RHD* heterozygotes was difficult. The prevalent *RHD* negative allele could not be detected specifically (Flegel, Transfus. Med. 8:281, 1998; Cossu, Electrophoresis 17:1911, 1996). The above defined mutation found in accordance with the present invention provides the basis for the detection of the prevalent *RHD* negative haplotypes, and hence true *RHD* genotyping is now feasible.

[0054] The invention additionally relates to a protein product of the *RHD* gene encoded by the nucleic acid molecule of the invention.

[0055] Preferably, the protein is in the same way post translationally modified and has the same chemical structure as naturally occurring antigen.

[0056] Furthermore, the invention relates to an oligonucleotide hybridizing under stringent conditions to a portion of the nucleic acid molecules of the invention, wherein said portion comprises said (missense) mutation or said stop codon or to the complementary portion thereof as characterised in the claims.

[0057] In this embodiment of the invention, it is understood that the oligonucleotides hybridizes directly to the mutated sequence. The setting of stringent hybridization conditions is well described, for example, in Sambrook et al, "Molecular Cloning, A Laboratory Handbook" CSH Press, Cold Spring Harbor 1989 or Hames and Higgins, "Nucleic acid hybridization, a practical approach", IRL Press, Oxford (1985). Thus, the detection of the specifically hybridizing sequences will usually require hybridization and washing conditions such as 0.2 x SSC, 0.1 % SDS at 65°. As is well known, the length of the probe and the composition of the nucleic acid to be determined constitute further parameters of the stringent hybridization conditions. Preferably, the oligonucleotide is a deoxynucleotide. It is further preferred that the oligonucleotide comprises 12 to 50 nucleotides and more preferably 15 to 24 nucleotides.

[0058] Further, the invention relates to an antibody or an aptamer specifically binding to the protein product of the *RHD* gene of the invention.

[0059] The antibody may be tested and used in any serologic technique well known in the art, like agglutination techniques in tubes, gals, solid phase and capture techniques with or without secondary antibodies, or in flow cytometry with or without immunofluorescence enhancement.

[0060] The antibody of the invention may be a monoclonal antibody or an antibody derived from or comprised in a polyclonal antiserum. The term "antibody", as used in accordance with the present invention, further comprises fragments of said antibody such as Fab, F(ab')₂, Fv or scFv fragments; see, for example, Harlow and Lane, "Antibodies, A Laboratory Manual" CSH Press 1988, Cold Spring Harbor, N.Y. The antibody or the fragment thereof may be of natural origin or may be (semi) synthetically produced. Such synthetic products also comprise non-proteinaceous as semi-proteinaceous material that has the same or essentially the same binding specificity as the antibody of the invention. Such products may, for example, be obtained by peptidomimetics.

[0061] The term "aptamer" is well known in the art and defined, e.g., in Osborne et al., Curr. Opin. Chem. Biol. 1 (1997), 5-9 or in Stall and Szoka, Pharm. Res. 12 (1995), 465-483.

[0062] Furthermore, the invention relates to a method for testing for the presence of a nucleic acid molecule encoding a mutant Rhesus D antigen as characterized by the nucleic acid molecule of the invention in a sample comprising

hybridizing the oligonucleotide of the invention under stringent conditions to nucleic acid molecules comprised in the sample obtained from a human and detecting said hybridization.

[0063] Preferably, the method of the invention further comprises digesting the product of said hybridization with a restriction endonuclease or subjecting the product of said hybridization to digestion with a restriction endonuclease and analyzing the product of said digestion.

[0064] This preferred embodiment of the invention allows by convenient means, the differentiation between an effective hybridization and a non-effective hybridization. For example, if the wild type *RHD* gene comprises an endonuclease restriction site, the hybridized product will be cleavable by an appropriate restriction enzyme whereas a mutated sequence will yield no double-stranded product or will not comprise the recognizable restriction site and, accordingly, will not be cleaved. Alternatively, the hybridizing oligonucleotide may only hybridize to the mutated sequence. In this case, only a hybrid comprising the mutated sequence, but not the wild type sequence, will be cleaved by the appropriate restriction enzyme. The analysis of the digestion product can be effected by conventional means, such as by gel electrophoresis which may be optionally combined by the staining of the nucleic acid with, for example, ethidium bromide. Combinations with further techniques such as Southern blotting are also envisaged.

[0065] Detection of said hybridization may be effected, for example, by an anti-DNA double-strand antibody or by employing a labeled oligonucleotide. Conveniently, the method of the invention is employed together with blotting techniques such as Southern or Northern blotting and related techniques. Labeling may be effected, for example, by standard protocols and includes labeling with radioactive markers, fluorescent, phosphorescent, chemiluminescent, enzymatic labels, etc.

[0066] The invention additionally relates to a method for testing for the presence of a nucleic acid molecule encoding a mutant Rhesus D antigen as characterized by the nucleic acid molecule of the invention in a sample comprising determining the nucleic acid sequence of at least a portion of the nucleic acid molecule of the invention, said portion encoding said (missense) mutation, said stop codon or a breakpoint of said hybrid gene.

[0067] Preferably, the method of the invention further comprises, prior to determining said nucleic acid sequence, amplification of at least said portion of said nucleic acid molecular structure.

[0068] Furthermore, the invention relates to a method for testing for the presence of a nucleic acid molecule encoding a mutant Rhesus D antigen as characterized by the nucleic acid molecule of the invention in a sample comprising carrying out an amplification reaction using a set of primers that amplifies at least a portion of said sequence wherein at least one of the primers employed in said amplification reaction is the oligonucleotide of the invention. Moreover, in a further embodiment the method of the invention wherein at least one of the primers employed in said amplification reaction is the oligonucleotide of the invention.

[0069] Preferably, amplification is effected by polymerase chain reaction (PCR). Other amplification methods such as ligase chain reaction may also be employed.

[0070] In a preferred embodiment of the method of the invention said PCR is PCR-RFLP, PCR-SSP or long-range PCR.

[0071] Additionally, in another preferred embodiment of the invention the molecular weight of the amplification product is analyzed. Said analysis of the molecular weight utilizes standard techniques, such as agarose gel electrophoresis, SDS-PAGE, mass spectrometry such as MALDI-TOF for this purpose, which are well known to the person skilled in the art.

[0072] In one preferred embodiment of the method of the invention, said method detects *RHD* positive alleles comprising the following steps:

- (a) isolating DNA from a blood sample or blood donor;
- (b) hybridizing at least two oppositely oriented primers under stringent conditions to the DNA so as to carry out a PCR;
- (c) amplifying the target sequence;
- (d) separating the amplification products on a gel; and
- (e) analyzing the amplicons.

[0073] With regard to specific conditions to be applied in the various steps, it is referred to the corresponding description herein above.

[0074] In a preferred embodiment the *RHD* positive alleles are derived from a serologically RhD negative population. In another preferred embodiment the RhD-negative sample is selected from a Caucasian population.

[0075] The method of the invention will result in an amplification of only the target sequence, if said target sequence carries the at least one mutation. This is because the oligonucleotide will, under preferably stringent hybridization conditions, not hybridize to the wild type sequence (with the consequence that no amplification product is obtained) but only to the mutated sequence. Naturally; primer oligonucleotides hybridizing to one or more as one, such as two mutated sequences may be employed in the method of the invention. The latter embodiment may be favorable in cases where combinations of mutations are tested for. It is important to note that not all or none of said mutations are necessarily missense mutations. This may be true for cases where other types of mutations occur in combination with the above missense mutations or with the above gene conversion.

[0076] Preferably, in the method of the invention said amplification or amplification reaction is or is effected by the polymerase chain reaction (PCR). Other amplification methods such as ligase chain reaction may also be employed.

[0077] Further, the invention relates to a method for testing for the presence of a protein product of the *RHD* gene of the invention in a sample comprising assaying a sample obtained from a human for specific binding to the antibody or aptamer or phage of the invention.

[0078] Testing for binding may, again, involve the employment of standard techniques such as ELISAs; see, for example, Harlow and Lane, "Antibodies, A Laboratory Manual" CSH Press 1988, Cold Spring Harbor.

[0079] In another preferred embodiment the invention relates to a method for testing for the presence of a protein product of the *RHD* gene encoding the nucleic acid molecule of the invention, comprising utilizing direct agglutination methods, indirect antiglobulin tests, monoclonal anti-D antibodies and adsorption/elution techniques.

[0080] Thus, the embodiment may comprise direct agglutination with two monoclonal anti-D antibodies, alternatively indirect antiglobulin tests using a gel matrix comprising an oligoclonal anti-D antibody, in a further alternative using monoclonal anti-Rhesus antibodies in another alternative adsorption of polyclonal anti-D antibodies to red cells and elution using a chloroform technique. Further description of the methods is given in example 18.

[0081] Preferably, in the method of the invention said, sample is blood, serum, plasma, fetal tissue, saliva, urine, mucosal tissue, mucus, vaginal tissue, fetal tissue obtained from the vagina, skin, hair, hair follicle or another human tissue.

[0082] Furthermore, the method of the invention preferably comprises the step of enrichment of fetal cells. This enrichment may be achieved by using appropriate antibodies, lectins or other reagents specifically binding fetal cells or by any technique attempting the differential separation of maternal and fetal cells, like by density gradients. Also preferably, in said method fetal DNA or mRNA from maternal tissue like peripheral blood, serum or plasma may be extracted, advantageously according to conventional procedures.

[0083] In an additional preferred embodiment of the method of the invention, said nucleic acid molecule or proteinaceous material from said sample is fixed to a solid support.

[0084] Preferably, said solid support is a chip.

[0085] The advantages of chips are well known in the art and need not be discussed herein in detail. These include the small size as well as an easy access of computer based analysis of analytes.

[0086] Furthermore, the present invention relates to the use of the nucleic acid molecule of the invention for the analysis of a negative or a positive Rhesus D phenotype.

[0087] The analysis can be effected, for example, on the basis of the methods described herein above.

[0088] The invention also relates to the use of the nucleic acid molecule of the invention, or the protein product of the *RHD* gene of the invention for the assessment of the affinity, avidity and/or reactivity of monoclonal anti-D or anti-C antibodies or of polyclonal anti-D or anti-C antisera or of anti-globulin or of anti-human-globulin antisera or of preparations thereof.

[0089] Anti-C is a monoclonal antibody or polyclonal antiserum binding to antigen C.

[0090] The invention also relates to the use of cells, preferably red blood cells, from probands carrying the nucleic acid molecule of the invention for the assessment of the affinity, avidity and/or reactivity of monoclonal anti-D antibodies or of polyclonal anti-D antisera or of anti-globulin or of anti-human-globulin antisera or of preparations thereof.

[0091] Said preparations can be provided according to techniques well known in the art. Said preparations may comprise stabilisators such as albumins, further sodium azide, salt ions, buffers etc. The formulation of the preparation may have an influence on the binding characteristics of the antibodies, as is well known in the art.

[0092] For example, in a first step, the Rhesus D gene of a carrier or of a blood donor and its allelic status is analyzed and it is determined whether said gene comprises a mutation that was found in accordance with the present invention. In a second step, said mutation is correlated to a certain RhD antigen density on the surface of red blood cells. Conveniently, said correlation can be established by data provided in the present invention (such as mutations per se) and techniques that are well known in the art (see, e.g. Jones et al. 1996, Flegel and Wagner, 1996). In a third step, the features of an antibody or an antiserum such as reactivity, sensitivity, affinity, avidity, and/or specificity are determined with suitable blood group serological techniques preferably using red blood cells that were molecularly and with respect to the RhD antigen surface density characterized as described in step 2. Such data can be used, for example, in quality controls, standardization, etc.

[0093] The invention will be most useful for the characterization, standardization and quality control of monoclonal and polyclonal antisera, preferably anti-D monoclonals or antisera. Further, for example, anti-globulin and anti-human-globulin antisera can be characterized on the basis of the teachings of the present invention. An appropriately characterized anti-D monoclonal antibody can be conveniently used in RhD diagnostics. For example, a suitably characterized monoclonal antibody will be useful in determining the D antigen density on the surface of blood cells. Cut-off values for monoclonal antibodies useful in diagnosis can thus be established. This is important for the quality control of antibodies used in RhD diagnosis.

[0094] Thus, the invention also relates to a method for the characterization of monoclonal antibodies or polyclonal antisera or of a preparation thereof, said method comprising

acid molecules is indicative of the father being RhD negative.

[0108] Alternatively, a positive testing indicating the concomitant presence of two identical copies of one of said nucleic acid molecular structures or nucleic acid molecules representative of *RHD* negative haplotypes is indicative of the father being RhD negative.

[0109] Furthermore, also described herein is a method for assessing the possibility or likelihood of a man being the father of a child by assaying a sample obtained from said man for the presence of one or more of said nucleic acid molecular structures or nucleic acid molecules of the invention, wherein the test results are used to determine the homozygosity for, the heterozygosity for or the absence of any nucleic acid molecular structures or nucleic acid molecules representative of the *RHD* negative haplotype of the present invention used to infer the possibility or likelihood of said man being the father of the child.

[0110] The preparation may be a diagnostic or pharmaceutical preparation.

[0111] The pharmaceutical composition may further comprise a pharmaceutically acceptable carrier and/or diluent. Examples of suitable pharmaceutical carriers are well known in the art and include phosphate buffered saline solutions, water, emulsions, such as oil/water emulsions, various types of wetting agents, sterile solutions etc. Compositions comprising such carriers can be formulated by well known conventional methods. These pharmaceutical compositions can be administered to the subject at a suitable dose.

[0112] Preparations for parenteral administration include sterile aqueous or non-aqueous solutions, suspensions, and emulsions. Examples of non-aqueous solvents are propylene glycol, polyethylene glycol, vegetable oils such as olive oil, and injectable organic esters such as ethyl oleate. Aqueous carriers include water, alcoholic/aqueous solutions, emulsions or suspensions, including saline and buffered media. Parenteral vehicles include sodium chloride solution, Ringer's dextrose, dextrose and sodium chloride, lactated Ringer's, or fixed oils. Intravenous vehicles include fluid and nutrient replenishers, electrolyte replenishers (such as those based on Ringer's dextrose), and the like. Preservatives and other additives may also be present such as, for example, antimicrobials, anti-oxidants, chelating agents, and inert gases and the like. Furthermore, the pharmaceutical composition of the invention may comprise further agents such as interleukins or interferons depending on the intended use of the pharmaceutical composition.

[0113] Also described herein is a method of treating a pregnant woman being Rhesus D negative wherein the fetus does not carry two nucleic acid molecular structures or nucleic acid molecules of the invention or is not homozygous for any nucleic acid molecular structure or nucleic acid molecule of the invention, comprising administering anti-D to said woman.

[0114] Pregnant women may be currently treated with an anti-D prophylaxis, when a Rhesus negative mother carries a RhD positive fetus. Also described herein is the discrimination of an anti-D prophylaxis requirement depending on the status of the mother's and/or the fetus' possessing a RhD protein of the invention. One or more of the RhD proteins may be prone to immunization of their carriers and, hence, would be indicative for the therapy of the mother. Similarly, one or more RhD proteins, when carried by the fetus, may be known to be of low immunogenicity to the mother and, hence, would be indicative for the omission of anti-D prophylaxis in difference to current clinical therapy.

[0115] The administration can be effected by standard routes and doses which can be defined by the attending physician; Mollison, 1993. Preferably, a monoclonal anti-D or combinations/mixtures of monoclonal anti-Ds is/are administered in doses of 50 μ g to or exceeding 500 μ g anti-D antibody/antisera for intravenous or intramuscular administration (Bowman, 1998). For the quality control of these anti-D antibodies/antisera, the results and methods provided by the present invention may be advantageously employed.

[0116] Also described herein is the use of a phage, aptamer, monoclonal antibody or a polyclonal antisera or a preparation thereof as characterized in the present invention for determination of the protein product of the *RHD* gene.

[0117] It is further described herein that said determination of the protein product of the *RHD* gene is effected in connection with blood group typing.

[0118] Furthermore, the invention relates to a preparation comprising the antibody or aptamer or phage of the invention.

[0119] The present invention also relates to a method of identifying an antibody V_H or V_L chain or a combination thereof or an aptamer specifically binding to a protein product of the *RHD* gene of the invention comprising

(a) contacting the protein product of the *RHD* gene of the invention with a phage library displaying V_H or V_L chains or combinations thereof on the surface of the phage or with aptamers;

(b) identifying phage or aptamers that bind to said protein product of the *RHD* gene; and optionally

(c) repeating steps (a) and (b) one or more times.

[0120] The preparation of phage library and the screening/identification of desired antibody (chains) per se is well known in the art and reviewed, for example, in Winter et al., Annu. Rev. Immunol. 12 (1994), 433-455 and references cited therein. Also, aptamers can be prepared and cloned in phage according to conventional protocols. Whereas single V_H or V_L chains may be identified by the method of the invention as binding to the protein product of the *RHD* gene of the invention, it is preferred to identify V_H - V_L combinations expressed by the phage because this situation resembles

the situation of natural antibody binding. By repeating steps (a) and (b) one or more times, better binding specificities may be identified. Protocols for the optimization of binding properties such as affinities, including elution steps for removing bound phage, are well established in the art. For example, once a V_H chain with a convenient binding capacity has been found, V_L chains may be identified that significantly improve the binding capacity of the antibody, e.g. by replacing the V_L chain that was associated with the V_H chain in the first selection step with a more suitable V_L chain.

[0121] The invention also relates to a method of identifying a monoclonal antibody specifically binding to a protein product of the *RHD* gene of the invention comprising

- (a) contacting the protein product of the *RHD* gene of the invention with one or more monoclonal antibodies;
- (b) identifying monoclonal antibodies that bind to said protein product of the *RHD* gene; and optionally
- (c) repeating steps (a) and (b) one or more times.

[0122] The invention also relates to a method of identifying an antibody V_H or V_L chain or a combination thereof or an aptamer specifically binding to a protein product of the *RHD* gene of the invention comprising

- (aa) contacting said protein product of the *RHD* gene and
- (ab) a normal D polypeptide wherein the normal D polypeptide is present in a molar mass that is higher, equal or less than the protein product of the *RHD* gene of (aa) with a phage library displaying V_H or V_L chains or combinations thereof on the surface of the phage or with aptamers;
- (b) identifying phage or aptamers that bind to said protein product of the *RHD* gene of (a); and optionally
- (c) repeating steps (a) and (b) one or more times.

[0123] Particularly preferred in step (ab) is that the molar mass of the normal D polypeptide is higher than that of the protein product of the *RHD* gene of (aa).

[0124] In the case that only one round of selection is employed for the identification (i.e. when step (c) does not apply), it is preferred that the number of protein product of the *RHD* gene of (aa) is in molar excess over the number of phage particles. The preferred embodiments of the method of identifying an antibody V_H or V_L chain or of a combination thereof or of an aptamer described hereinbefore equally apply to this embodiment of the invention.

[0125] The invention also relates to a method of identifying a monoclonal antibody specifically binding to a protein product of the *RHD* gene of the invention comprising

- (aa) contacting the protein product of the *RHD* gene and
- (ab) a normal D polypeptide wherein the normal D polypeptide is present in a molar mass that is higher, equal or less than the protein product of the *RHD* gene of (aa) with one or more monoclonal antibodies;
- (b) identifying monoclonal antibodies that bind to said protein product of the *RHD* gene of (aa); and optionally
- (c) repeating steps (a) and (b) one or more times.

[0126] Preferably, the protein product of the *RHD* gene is exposed on the surface of a cell. An appropriate surface is the surface of an erythrocyte. However, other host cells may be transfected with a vector suitable for expression of the protein product of the *RHD* gene of the invention and express the same on their surface. Antibodies may also bind to recombinant proteins or parts of proteins of D antigen and purified proteins.

[0127] It is further preferred that the polypeptide or host cell is affixed to a solid support. Suitable examples for solid supports are microtiter plates or beads.

[0128] In an additionally preferred antibody, subsequent to step (b) or (c), the following step is carried out:

- (d) identifying the amino acid sequence of the V_H or V_L chains and/or identifying the nucleic acid sequences encoding said amino acid sequence.

[0129] The identification of the amino acid/nucleic acid sequences can be effected according to conventional protocols; see, e.g., Sambrook et al., loc. cit.

[0130] Hence and in summary, the present invention provides means and methods for the detection of *RHD* haplotypes, comprising presumably rare *RHD* positive alleles in serologically RhD negative populations. Latter alleles, harbouring *RHD* sequences and therefore determined as *RHD*-positive, can comprise either *RHD/RHCE* hybrid genes, stop codons, splice site mutations or gene deletions, that terminate or reduce the RhD antigen expression. Carrying out the improved detection methods of the invention, it was surprisingly found, that several samples, determined as RhD negative in routine serology, could be identified having *RHD* positive alleles. Furthermore, some of those samples were even RhD

antigen positive when performing a detection assay based on adsorption and elution, indicating that the molecular basis for the *RHD* positive alleles in RhD negatives is more heterogeneous than anticipated. Advantageously, the disclosure content of the present invention now provides new and practicable nucleic acid amplification techniques to determine whether *RHD* specific sequences cause RhD positive or RhD negative phenotypes.

[0131] In a particularly preferred embodiment the method of present invention, wherein, in the case that only one round of selection is employed for the identification, the number of protein molecules of the *RHD* gene of (a) is in molar excess over the number of phage particles.

[0132] Moreover, the present invention relates to the use of cells, preferably red blood cells comprising the protein product of the *RHD* gene of the present invention, from probands for the assessment of the affinity, avidity and/or reactivity of monoclonal anti-D antibodies of the present invention or of polyclonal anti-D antisera or of anti-globulin or of anti-human-globulin antisera or of preparations thereof.

[0133] According to the present invention the term "polymorphism" relates to the existence in a population of more than one genetic structure or a gene of a haplotype or of a DNA segment. Nevertheless, sometimes such a genetic polymorphism does not always result in a differing phenotype, but may only be detected at the genetic level.

[0134] Furthermore, the invention relates to a kit comprising

- (a) the oligonucleotide of the invention; and/or
- (b) the antibody of the invention;
- (c) the aptamer of the invention; and/or
- (d) the phage of the invention;
- (e) a pair of primers useful for carrying out the amplification reaction of the invention.

[0135] Parts of the kit can be packaged individually in vials or in combination in containers or multicontainer units. The kit of the present invention may be advantageously used for carrying out the method of the invention and could be, inter alia, employed in a variety of applications referred to above. The manufacture of the kits follows preferably standard procedures which are known to people skilled in the art.

[0136] The figures show

Figure 1 Schematic structure of the *RH* gene locus. The positions and orientations of the genes and the *Rhesus boxes* are indicated by open arrows and triangles, respectively (Panel A). The exons are shown as vertical bars and their exon number is indicated. The two *RH* genes have opposite orientation, face each other with their 3' ends, and are separated by about 30,000 bp. A third gene, *SMP1*, has the same orientation as *RHD* and is positioned in between *RHD* and *RHCE*. The *RHD* gene is flanked on both sides by the two highly homologous *Rhesus boxes* (b). All exons are shorter than 200 bp with the exception of the *RHD* and *SMP1* 3' terminal exons. Data used to establish this structure (Panel B) include the extension of genomic sequences represented in the cDNAs (horizontal arrows), identities and homologies to genomic clones (bar a: identity with dJ465N24; b: homology of *RHD* to dJ469D22; c: homology of *RHD* 3' part to dJ465N24; d: identity with dJ469D22). The positions of three bridging PCR reactions are indicated. They correct position of a nucleotide stretch previously reported by Okuda et al. (Okuda, Biochem. Biophys. Res. Commun. 263:378, 1999) as "spacer" sequence between *RHD* and *RHCE* is indicated by the bar labeled s.

Figure 2 Chromosomal organization of the DNA regions located 5' to the *RHD* and *RHCE* genes. The proposed structure of the *RHCE* and *RHD* 5' flanking regions is depicted (Panel A). A total of 4,941 bp immediately 5' of the ATG start codons are homologous between the *RHCE* and *RHD* genes (vertically hatched bars). No homology is present further beyond this homology region (diagonally hatched bars). Two genomic clones, dJ469D22 and dJ465N24, were utilized for primer design. dJ469D22 comprises the full length of the depicted *RHCE* region, whereas dJ465N24 extends only 466 bp into the homology region. The positions of several PCR primers are indicated (a, rey14a; b, rend32; c, rey15a; d, re014; e, re011d). This proposed structure is supported by several PCR reactions (panel B). Forward priming was done with primer a (*RHCE* specific, lane 1 - 3), primer b (*RHD* specific, lane 4 - 6), and primer c (*RHCE* and *RHD* homology region, lane 7 - 9). Amplicons were lacking for primer a with *RHD* specific reverse primer e (lane 2) and for primer b with *RHD* negative DNA (lane 6). The other seven PCR reactions yielded amplicons of the predicted sizes in accordance with the genomic structure shown in panel A.

Figure 3 Chromosomal organization of the *SMP1* gene. The *SMP1* gene has seven exons. The positions and approximate sizes of the introns are shown. The start of the published cDNA (GenBank accession number AF081282) is separated by 15 nucleotides from the downstream *Rhesus box*. Exon 1 contains only 5'

untranslated sequence, the *SMP1* start codon is located in exon 2. Exon 7 contains 16 codons and 1,656 bp 3' untranslated sequences and is contiguous with the 3' untranslated sequence of *RHCE* exon 10.

5 **Figure 4** Chromosomal organization of the *Rhesus boxes*. The physical extension of the upstream *Rhesus box* (5' to *RHD*) is 9,145 bp (black bar). About 63% of the boxes' nucleotide sequence consists of repetitive DNA; the types of the repeat families are indicated. The overall homology between the upstream and downstream *Rhesus box* is 98.6%, but within an 1,463 bp identity region (horizontal arrows), there is only a single 4 bp insertion (double vertical line). A CpG-island (double-headed arrow) is located at the 3' end and is in the downstream *Rhesus box* (3' to *RHD*) adjacent to the *SMP1* promoter.

10 **Figure 5** *RHD* gene deletion in the Rh negative haplotypes. Three 3,100 bp segments of the *Rhesus boxes* are shown. The upper line indicates the nucleotide sequence of the upstream *Rhesus box* in D-positives, the lower line the nucleotide sequence of the downstream *Rhesus box* in D-positives. The middle line gives the nucleotide sequence of the single *Rhesus box* carried by Rh negatives. Asterisks denote identical nucleotides. The *RHD* deletion occurred in a 903 bp segment of absolute identity that was part of a 1,463 bp identity region. The positions of primers *rez7* and *mb31* is shown (m indicates mismatch). *PstI* restriction sites are indicated by carets (^). The three *Rhesus boxes* are deposited at EMBL under accession numbers AJ252311 (upstream *Rhesus box*), AJ252312 (downstream *Rhesus box*), and AJ252313 (hybrid *Rhesus box*).

15 **Figure 6** Two technical procedures for specific detection of the *RHD* deletion in the common *RHD* negative haplotypes. A long-range PCR amplification with primers located in non-*Rhesus box* sequences (Panel A) and PCR-RFLP with primers located in the *Rhesus boxes* are shown (Panel B). The deduced genotypes are indicated. The primers of the long-range PCR were located 5' of the upstream *Rhesus box* (primer *rez4*) and in *SMP1* exon 1 (primer *sr9*). *RHD* negative haplotypes were detected specifically (Panel A, lane 1 - 6). DNA homozygous for the *RHD* gene was negative, because the PCR cannot amplify the 70,000 bp DNA stretch of the *RHD* gene. For the PCR-RFLP method, the PCR amplicons (primer *rez7* and *mb31*) were digested with *PstI*. In D-negatives, there are three *PstI* sites in the amplicon (see Fig. 5) resulting in fragments of 1,888 bp, 564 bp, 397 bp, and 179 bp (lane 1 to 3). The downstream *Rhesus box* of D-positives lacks one *PstI*-site resulting in fragments of 1,888 bp, 744 bp, and 397 bp (lane 7 to 9). *RHD*⁺/*RHD*⁻ heterozygotes show both fragments of 744 and 564 bp (lane 4 to 6). The 564 bp fragment appears weaker because heterodimers are not cut by *PstI*. Primer *mb31* does not amplify the upstream *Rhesus box* of D-positives.

20 **Figure 7** Model of the proposed mechanism causing the prevalent *RHD* negative haplotypes in whites. The physical structure of the *RHD* and *RHCE* gene locus is depicted (panel A). An unequal crossing over between the upstream and downstream *Rhesus boxes* can be triggered by their high homology (panel B). The breakpoint region in the *Rhesus boxes* was found to be of 100% homology for 903 bp (see Fig. 5). Resolving the crossed over chromosome yields the *RH* gene structure of the extant *RHD* negative haplotype (panel C).

25 **Figure 8** DNA sequence of the hybrid *Rhesus box* of *RHD* negatives.

30 **Figure 9** DNA sequence of the upstream *Rhesus box* of D-positives.

35 **Figure 10** DNA sequence of the downstream *Rhesus box* of D-positives.

40 **Figure 11** DNA sequence of the *RHD* promoter. The last three nucleotides represent codon 1 of the *RHD* gene.

45 **Figure 12.** *Cde*^s breakpoint region in *RHD* intron 3. The nucleotide sequence of a part of the intron 3 of *Cde*^s, *RHD* and *RHCE* 2,938 to 3,636 bp 3' of the exon 3/intron 3 junction is shown. The human DNA sequence from clone RP3-469D22 on chromosome 1p35.1-36.13 containing the 5' part of the gene for *RHCE* (GenBank accession number AL031284) was taken as reference; numbers indicate the position in this sequence relative to the first base of intron 3 in the *RHCE* gene. The corresponding *RHD* gene sequence derives from GenBank accession number AL139426. Nucleotides indicating *RHD* or *RHCE* origin of the *Cde*^s sequences are highlighted. A 154 bp DNA stretch comprising the breakpoint region of *Cde*^s is indicated by asterisks.

Figure 13. *Cde^s* breakpoint region in *RHD* intron 7. The nucleotide sequence of a part of the intron 7 of *Cde^s*, *RHD* and *RHCE* about 2,726 to 3,719 3' of the exon 7/intron 7 junction is shown. The human DNA sequence from clone RP3-469D22 on chromosome 1p35.1-36.13 containing the 5' part of the gene for *RHCE* (GenBank accession number AL031284) was taken as reference; numbers indicate the position in this sequence relative to the first base of intron 7 in the *RHCE* gene. The corresponding *RHD* gene sequence derives from GenBank accession number AL139426. Nucleotides indicating *RHD* or *RHCE* origin of the *Cde^s* sequences are highlighted. A 666 bp DNA stretch comprising the breakpoint region of *Cde^s* is indicated by asterisks.

Figure 14. Specific detection of *Cde^s* by PCR-SSP. A PCR-SSP detecting the 3' breakpoint region of *Cde^s* in intron 7 is shown. Both, a *RHD* negative sample (lane 1, ccddee) and a normal *RHD* positive sample (lane 2, ccD.EE) yield the 434 bp control product only, which is derived from the HGH gene. In contrast, a *Cde^s* sample (CcddEe, lane 3) yields the 338 bp specific product, which is derived from the breakpoint region in intron 7, and in addition the 434 bp control fragment. This reaction is specific for *Cde^s*; the two partial D phenotypes D^{rv}a (lane 4) and D^{III} type IV (lane 5) do not yield a specific product. The reaction also detects *Cde^s* specifically, if *Cde^s* occurs *in trans* to other *RHD* alleles, like in a *RHD Ψ /Cde^s* sample (lane 6).

Figure 15. *RHD* PCR-SSP for routine DNA typing. The PCR is performed as a modular system consisting of two multiplex reactions, an intron 4/exon 7 multiplex PCR-SSP (Panel A) and an intron 7 PCR enhanced by specific detection of *RHD(W16X)* and *RHD Ψ* (Panel B). Results are shown for a normal D positive sample (lane 1), a normal D negative sample (lane 2), several rare D negative samples (lanes 3 to 6) and major D positive *RHD* variants (lanes 7 and 8). Standard D positive and D negative samples and D categories IV and VI are recognized in reaction A. *RHO-CE(8-9)-O* is detected in reaction B by the absence of the intron 7 band. The presence of *RHD(W16X)* and *RHD Ψ* is also detected in reaction B. Band size is Panel A, control, 434 bp (HGH gene); intron 4, 226 bp; exon 7, 123 bp; Panel B, control, 659 bp (chromosome 1 genomic sequence about 90,000 bp 5' of *Rhesus box*); intron 7.390 bp; *RHD(W16X)*, 248 bp; *RHD Ψ* , 154 bp. The internal control amplicons, which were devised to be larger than the specific amplicons, may be suppressed because of competition, if a specific product is amplified.

[0137] The examples illustrate the invention:

Example 1: Blood samples and DNA isolation

[0138] EDTA- or citrate-anticoagulated blood samples were collected from white blood donors and characterized as D negative in routine typing including an antiglobulin test with anti-D (Wissenschaftlicher Beirat der Bundesärztekammer; Paul-Ehrlich-Institut. Richtlinien zur Blutgruppenbestimmung und Bluttransfusion (Hämotherapie). Köln: Deutscher Ärzte-Verlag; 1996; Wagner, Infusionsther Transfusionsmed 22:285-90, 1995). If necessary, samples were collected at random for specific CcEe phenotypes. A total of 314 ccddee, 433 Ccddee, 271 ccddEe, 19 CcddEe, 24 CCddee, 1 CcddEE and 6 ccddEE samples were tested. DNA was isolated by a modified salting-out procedure as described in Gassner et al., Transfusion 37; 1020, 1997.

Example 2: Molecular work-up

[0139] All samples were tested by PCR-SSP for the presence of four different *RHD* specific polymorphisms located in the *RHD* promoter, intron 4, exon 7 and the 3' untranslated region of exon 10. 48 samples with at least one positive PCR reaction were detected (Table 5). Those samples were further investigated for the presence of *RHD* specific polymorphisms in exon 3, exon 4, exon 5, exon 6, exon 7, intron 7 and exon 9. Twenty-six samples showed one of eight distinct PCR patterns involving a mixture of positive and negative reactions (Table 6). Twenty-two samples were positive for all *RHD* specific polymorphisms investigated and were assigned to eight *RHD* alleles by *RHD* specific sequencing of the ten *RHD* exons from genomic DNA (Table 7). For each PCR pattern and each *RHD* allele, one sample was serologically investigated. The phenotypes were determined to represent weak D, partial D, and D_{el}, or confirmed as serologically D negative by adsorption/elution (Table 6 and 7).

Example 3: DNA database searches and analysis

[0140] The GenBank (<http://www.ncbi.nlm.nih.gov/BLAST/>) and the chromosome 1 database of the Sanger Center (http://www.sanger.ac.uk/cgi-bin/nph-Blast_Server.html) were searched with cDNA sequences representative of *RHD* (RhXIII, accession number X63097) and *RHCE* (RhVI, X63095) using the BLAST program. The 84,810 bp genomic

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clone dJ469D22 (GenBank accession number AL031284), the 129,747 bp genomic clone dJ465N24 (GenBank accession number AL031432) and the 2,234 bp *SMP1* cDNA (GenBank accession number AF081282) were identified. dJ469D22 represented a major fragment of the *RHCE* gene, starting 33,340 bp 5' of the *RHCE* start codon and ending 1,142 bp 3' of exon 9. In dJ465N24, an internal stretch of 1,418 bp located between position 120,158 and 121,568 was 96% homologous to the 3' end of the *RHD* cDNA. The 3' end of the *SMP* cDNA was complementary to the 3' end of the *RHCE* cDNA with an overlap of 58 bp.

Example 4: PCR

[0141] If not mentioned otherwise, PCR reactions were done with 60°C annealing, 10 min extension at 68°C and denaturation at 92°C using the expand long template or the expend high fidelity PCR systems (Boehringer Mannheim, Mannheim, Germany) and the listed primers (Table 1). Three PCR reactions were used to bridge gaps in the 3' flanking regions of the *RH* genes. PCR 1 was done using primers rea7 and rend31 (PCR 2, rend32, sf1c; PCR 3, rea7, sf3). The structure of the 5' flanking regions was confirmed with PCR amplifications involving sense primers rend32, rey14a, rey15a and antisense primers re011d and re014. Intron 9 size was estimated to be about 9,000 bp based on PCR amplifications using rb10b and rr4 for *RHD* (re96 and rh7 for *RHCE*).

Example 5: Nucleotide sequencing

[0142] Nucleotide sequencing was performed with a DNA sequencing unit (Prism BigDye terminator cycle-sequencing ready reaction kit; ABI 373A, Applied Biosystems, Weiterstadt, Germany).

Example 6: Characterizing the *RH* gene locus

[0143] A physical structure of the *RH* genes' locus was derived (Fig. 1). This structure was deduced from the following considerations: (i) 3' flanking regions. The 3' flanking region of *RHD* was highly homologous to the 3' part of dJ465N24 (Fig. 1B, region c). This homology continued beyond the end of the *RHD* cDNA and extended for at least 8,000 bp as proven by the fact that it was possible to obtain PCR amplicons (Fig. 1B, PCR 1). Sequences homologous to the 3' part of dJ465N24 were neighboring to the 5' region of the *SMP1* gene (Fig. 1B; PCR 2). The 3' end of the *SMP1* gene occurred immediately adjacent to the *RHCE* gene as indicated by the complementarity of the 3' ends of the respective, cDNAs and confirmed by PCR (Fig. 1B, PCR 3). Further details of the *RHD* 3' flanking region (*Rhesus box*) and the *SMP1* gene are described below. (ii) 5' flanking regions. dJ469D22 comprised 33,340 bp 5' flanking region of *RHCE*. For *RHD*, a 466 bp homology between the 3' end of dJ465N24 and dJ469D22 indicated that dJ465N24 might represent the 5' flanking sequence of *RHD*. This assumption was proven by PCR (Fig. 2). (iii) Analysis of YAC 38A-A10. DNA from the YAC 38A-A10 (UK HGMP resource centre, Cambridge, UK) was isolated after a single growth phase by standard methods (http://hdklab.wustl.edu/lab_manuavyeast). It was confirmed that this YAC contained *RH* DNA. Furthermore, shotgun cloning experiments indicated that some of its insert probably derived from the X chromosome (data not shown). This YAC had been known to contain *RHCE* exons 2 to 10 and *RHD* exons 1 to 10 (Carritt, Hum. Mol. Genet. 6:843, 1997) and was thus expected to contain the DNA segments interspersed between *RHD* and *RHCE*. The presence of DNA segments representative of different parts of the *RH* locus in this YAC was observed (Table 2). The results were concordant with the proposed structure of the *RH* locus shown in Fig. 1, Panel A.

Example 7: Identification of *RHD* specific sequences in the *RHD* promoter

[0144] About 2,000 bp *RHD* promoter sequence was established by chromosomal walking (GenomeWalker kit, Clontech, Heidelberg, Germany). D-positive and D-negative samples were amplified using primers re04 and re11d (Table 1) and *RHD*- and *RHCE*-specific sequences established for 1,200 bp 5' of the start codon by sequencing with internal primers. A short deletion in the *RHD* gene was identified and used to develop the *RHD*-specific primer re011d. The 1,200 bp sequence including the *RHD* promoter has been deposited at EMBL under accession no. AJ252314.

Example 8: Characterization of *Rhesus boxes*

[0145] Two DNA segments of about 9,000 bp, located 5' and 3' of the *RHD* gene, were highly homologous, had identical orientation, and were designated "*Rhesus boxes*" (Fig. 4). The *Rhesus boxes* were amplified and sequenced using internal primers in two overlapping fragments using PCR primer pairs rez4/rend31 and rend32/re011d (upstream *Rhesus box*), rea7/rend31 and rend32/sr9 (downstream *Rhesus box*), and rez4/rend31 and rend32/sr9 (hybrid *Rhesus box* of *RHD*-negative). The upstream *Rhesus box* (5' of *RHD*) was about 9,142 bp long and ended about 4,900 bp 5' of the *RHD* start codon. The downstream *Rhesus box* (3' of *RHD*) was 9,145 bp long and started 104 bp after the *RHD*

stop codon. The *Rhesus boxes* exactly embraced the part of *RHD* with homology to *RHCE*. The central portion of both *Rhesus boxes* contained an almost complete remnant of a transposon-like human element (THE-1B). The single open reading frame usually found in the THE-1B element was, however, abolished due to several nucleotide aberrations occurring in both *Rhesus boxes* in parallel, including a nonsense mutation in codon 4. While there was overall 98.6% homology between both *Rhesus boxes*, a 1,463 bp "identity region" located between positions 5,701 and 7,163 was completely identical with the single exception of a 4 bp T insertion in a poly T tract.

Example 9: Evaluation of the genomic structure of *SMP1*

[0146] The genomic structure of the *SMP1* gene was evaluated by PCR using internal primers and nucleotide sequencing (Fig. 3). The sizes of the *SMP1* introns were estimated by PCR amplicons obtained with primers *rend32*, *sr9*, *sf1c*, *sf1*, *sm19*, *sr45*, *sr47*, *sr47c*, *sr5*, *sr5c*, *sr55*, *sr55c*, *sr3*, *sr3kp*, *rea7*. The positions of the intron/exon junctions and the absence of additional introns were determined by nucleotide sequencing. Six introns could be identified. Exon 1 contained 5' untranslated sequences only and was separated from the *Rhesus box* by 15 bp. The long 3' untranslated sequence of exon 7 overlapped with *RHCE* exon 10. The total gene size was estimated to be 20,000 bp resulting, in conjunction with the downstream *Rhesus box*, in a distance between *RHD* and *RHCE* of about 30,000 bp (Fig. 1).

Example 10: Localization of the *RHD* gene deletion in the *RHD* negative haplotypes

[0147] It was reasoned that the homology of the two *Rhesus boxes* may have been instrumental for the mechanism of the *RHD* deletion in the common *RHD* negative haplotypes. The nucleotide sequence of the *Rhesus box* in *RHD* negative DNA was determined (Fig. 5). The single *Rhesus box* detected in *RHD* negatives had a hybrid structure. The 5' end of this *Rhesus box* represented an upstream *Rhesus box*, the 3' end a downstream *Rhesus box*. It was determined that the 903 bp breakpoint region of the *RHD* deletion was located in the identity region of the *Rhesus boxes* (Fig. 4, arrow pointing to left).

Example 11: Specific detection of the *RHD* deletion by PCR

[0148] Two PCR based methods were developed for specific detection of the *RHD* gene deletion occurring in the prevalent *RHD* negative haplotypes (Fig. 6). Long-range PCR-SSP was performed using the expand long template PCR system with buffer 3 and primers *rez4* (5' of upstream *Rhesus box*) and *sr9* (*SMP1* exon 1). Annealing was at 60°C and extension 20 min at 68°C. PCR amplicons were resolved using a 1% agarose gel. PCR-RFLP was performed using the expand high fidelity PCR system and primers *rez7* (non-specific, 5' of *Rhesus box* identity region) and *mb31* (specific for downstream *Rhesus box*, 3' of *Rhesus box* identity region). Annealing was at 65°C and extension 10 min at 68°C. PCR amplicons were digested with *PstI* for 3 hrs at 37°C and fragments resolved using a 1% agarose gel. These techniques allowed the ready and direct detection of the common *RHD* negative haplotypes, even if they are *in trans* to *RHD* positive haplotypes. PCR-RFLP was further applied to a larger number of samples (Table 3). As expected, all 33 samples with known genotype were correctly typed. In 68 additional samples representative of the most common phenotypes, the results were consistent with the known haplotype frequencies in the population.

Example 12: *RHD* PCR-SSP

[0149] The PCR-SSP reactions (Table 4) were adapted and extended from a previously described *RHD* exon specific PCR-SSP method (Gassner, *Transfusion* 37:1020-6, 1997) and were triggered to work under identical thermocycling conditions. Concentrations of specific primers were 0.2 μM for all reactions with the exception of exon 6 (0.1 μM), intron 7 (0.4 μM) and exon 9 (0.4 μM). For most samples intron 4/exon 7 was tested as multiplex reaction containing 0.2 μM of exon 7 (primer set *ga71/ga72*) and 0.1 μM of intron 4 primers. Each reaction contained a set of HGH primers (Gassner, *Transfusion* 37:1020-6, 1997) as an internal control in concentrations of 0.05 μM for promoter, intron 4, and exon 7 with *ga71/ga72*; 0.075 μM for exon 10; 0.1 μM for intron 7; 0.15 μM for exon 3, exon 4, exon 7 with *rb26/re71*, and exon 9; 0.2 μM for exon 5 and exon 6. Mg²⁺ concentration was 0.4 μM for intron 7 and for all other reactions 0.15 μM. For exon 6, 20% solution Q (Qiagen, Hilden, Germany) was added.

Example 13. Improved *RHD* PCR-SSP for routine DNA typing.

[0150] Based on the alleles detected in this study and described previously, we devised an improved *RHD* PCR-SSP for routine DNA typing that included the specific detection of *RHD*Ψ and alleles detected in this study, like *RHD*(W16X) in a single PCR tube. Reaction A contained primers *ga71* and *ga72* at 0.3 μM, *rb12* and *re41* at 0.1 μM, and HGH primers at 0.1 μM. Mg²⁺ was at 0.175 μM. Reaction B contained primers *RhPsiF* and *RhPsiB* at 0.5 μM, *re11d* and

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RhX1f1 at 0.3 μ M, re721 and rb9 at 0.2 μ M and as control primers rend9b1 and rend 9b2 at 0.2 μ M. Primer sequences were ga71, gttgtaaccgagtgctggggattc; ga72, tgccggctccgacgggtatc; rb12, tcctgaacctgctctggaagtgc; re41, cgataccagttt-gtctgccatgc; RhPsiF, agacagactaccacatgaacttac; RhPsiB, tctgatcttatctcctccgttccctc; re11d, agaagatgggggaatcttttctc; RhX1f1, cgctgcctgccctctga; re721, ctggaggctctgagaggttgag; rb9, aagctgagttcccaatgctgagg; rend9b1, cactgcactt-ggcaccattgag; rend9b2, ttccgaaggctgcttttccc.

[0151] The PCR reactions could be performed in two tubes (Fig. 15), tested five polymorphisms and were expected to have a false-positive rate of less than 1:10,000 (Table 11).

Example 14: PCR reactions for *Cde^s*

[0152] A hybrid exon 3 with a N152T substitution occurring in the *Cde^s* haplotype was detected by a PCR-SSP reaction using specific primers Rh152Tb and ga31 at 0.3 μ M. The L245V substitution observed in *Cde^s* was detected with specific primers Rh223Vf and Rh245Vb at 0.2 μ M. HGH primer concentrations were 0.1 μ M. The other PCR conditions were identical as described in the previous paragraph. Primers sequences were Rh152Tb, gatattactgatgaccatctcatgg; Rh223Vf, ttgtgatgttctggccaagtg; and Rh245Vb, gctgtcaccactctgactgctac. The *Cde^s* haplotype, that is frequent in Africans (Faas, Transfusion 37:38-44, 1997; Singleton, Blood 95:12-8, 2000), possesses a hybrid exon 3 harboring the *RHCE* specific N152T substitution (Faas, Transfusion 37:38-44, 1997). This hybrid exon is expected to be typed as *RHD* positive by the *RHD* exon 3 specific PCR that detected an A at position 383 (codon 128) and was used in the population survey. Since pattern 4 and pattern 8 were compatible with the known data about the *Cde^s* haplotype, the presence of a hybrid exon 3 was evaluated in the two samples by sequencing the 3' part of exon 3 and by a PCR-SSP specific for an exon 3 hybrid indicative of *Cde^s*. The pattern 4 sample possessed a normal *RHD* exon 3, while the pattern 8 sample had a hybrid exon 3 as predicted for a *Cde^s* haplotype. Also, the T at position 410 (A137V substitution) typical for the *Cde^s* haplotype (Daniels, Transfusion 38:951-8, 1998) and also present in *D category III type IV* was detected. The identity of pattern 8 and *Cde^s* was further corroborated by a PCR-SSP detecting G at position 733 (L245V substitution).

Example 15: 5' breakpoint region of, *Cde^s* in intron 3.

[0153] Based on its cDNA, *Cde^s* had been characterized as an *RHD-CE(3-7)-D* hybrid gene, in which the 5' part of exon 3 derived from *RHD* and the 3' part of exon 3 including codon 152 derived from *RHCE*. We noted that a similar hybrid exon 3 with a N152T substitution was found in *D category III type IV* (Wagner, F.F., Frohmajer, A., Ladewig, B., Eicher, N.L., Lonicer, C.B., Müller, T.H., Siegel, M.H., and Flegel, W.A. Weak D alleles express distinct phenotypes. Blood 95:2699-2708, 2000) and in *D category IVa* (Rouillac, C., Colin, Y., Hughes-Jones, N.C., Beolet, M., D'Ambrosio, A.-M., Cartron, J.P., and Le Van Kim, C. Transcript analysis of *D category* phenotypes predicts hybrid Rh D-CE-D proteins associated with alteration of D epitopes. Blood 85:2937-2944, 1995), two aberrant *RHD* alleles in which exons 4 to 7 derived from *RHD*. We reasoned that the N152T substitution might have antedated the substitution of *RHD* exons 4 to 7 in *Cde^s*. In this case, the 5' breakpoint region was expected to be located in intron 3 rather than exon 3 as predicted from the cDNA. We hence evaluated the presence of *RHD* specific polymorphisms in, *Cde^s* intron 3.

[0154] To evaluate the presence of the *EcoRV*-site at nucleotide position 752 (*RHD* specific) and 2872 (*RHCE* specific) and of the *PvuII*-site at nucleotide position 1777 (*RHCE* specific), the 5' part of intron 3 of *RHD* and *RHCE* was amplified using primers rb3 and rb33 and digested with *EcoRV* or *PvuII*. To evaluate the presence of the *SacI*-site at nucleotide position 7797 (*RHCE* specific) and of the *Alw44I*-site at nucleotide position 8550 (*RHD* specific), the 3' part of intron 3 of *RHD* and *RHCE* was amplified using primers rb34 and rb5 and digested with *SacI* or *Alw44I*. Primer sequences were rb3, aaggtcaacttgccgagttggtg; rb33, gtgagactgagttctgtattctg; rb34, ccagaatacagaactcagtctcac; rb5, ggcagacaaact-gggtatcggtg.

[0155] The PCR-RFLP analysis of these intron 3 polymorphisms indicated that *RHD* specific sequences were present at least up to intron 3 position 2872. To further determine the 5' breakpoint region of *Cde^s*, we sequenced a DNA stretch encompassing the breakpoint region. DNA was amplified using primers rb3 and re37 and sequenced using primers rb33, rb34 and Cdesf1. Primer sequences were re37, gggtaaagtcacatacacagatg; Cdesf1, atacagaactcagtctcaacttag. We determined that the breakpoint region was located in intron 3 as shown in Figure 12.

Example 16: 3' breakpoint region of *Cde^s* in intron 7.

[0156] To determine the 3' breakpoint region of *Cde^s* in intron 7, we sequenced parts of intron 7. DNA was amplified using sense primers rb8, re77 and rex1 and antisense primers rb51 and re711b. Primers rb43, rex19c, cdes7b2, and cdes7f2 were used for nucleotide sequencing. Primer sequences were rb8, gtgttgtaaccgagtgctgggg; re77, ttccacagctc-catcatggg; rex1, ggctgtaaaaatgctgaagcag; rb51, gcatgacgtgttctgcctctg; re711b, ctatcagcattctgatctcaacg; rb43, gaat-agcagagaaaaxtcagactgcc; rex19c, gctccattctgacaatacaggc; cdes7b2, gcttactatataagttgggtttttg; cdes7f2, gtttgaatc-ccaagagccactcat. We established the breakpoint region as shown in Fig. 13. The structure of the 3' breakpoint region

was intriguing, because there were multiple switches between *RHCE* and *RHD* specific sequences. Those features are unusual for a breakpoint region and may be used for specific diagnosis of *Cde^s*. They may indicate that the parental alleles differed from the standard *RHCE* and *RHD* sequences or that after the major gene conversion, additional small gene conversions were introduced.

Example 17: A. PCR-SSP to specifically detect *Cde^s*.

[0157] Usually, the presence of *Cde^s* is identified by the *RHD-CE-D* hybrid pattern in an *RHD* exon specific PCR. Such an approach does not allow the specific detection of the D negative *Cde^s* haplotype, if an *RHD* positive haplotype occurs *in trans*. Since *Cde^s* does not contain a hybrid *Rhesus box*, a *RHD/Cde^s* heterozygous person is likely mistyped as *RHD⁺/RHD⁺* homozygous. There are several distinct features of *Cde^s* in the promoter, intron 2, exon 2, and exon 3 that might be used for a specific detection. These features are, however, shared by the D positive alleles D category IVa and partially by D category III type IV, which would hence confound such methods of detection.

[0158] Based on the *Cde^s* specific DNA sequence in intron 7, we developed a PCR-SSP that specifically detected *Cde^s*. The 3' breakpoint region of *Cde^s* in intron 7 was detected by PCR-SSP using specific primers *Cdes7f2* and *Cdes7b2* at 0.4 μ M and HGH control primers at 0.15 μ M. The other PCR conditions were identical as described in example 12. Primer sequences were *Cdes7f2*, gttggaatccaagagccactcat; *Cdes7b2*, gcttatactatataagtgggtttttg. We obtained a specific product with the index *Cde^s* sample (Figure 14), two additional *Cde^s* samples and a *RHD⁺/Cde^s* heterozygous sample (Figure 14). Normal *RHD* positive and *RHD* negative samples as well as samples of D category III type IV and of D category IVa did not result in a specific PCR product (Figure 14). We concluded that our PCR-SSP method allowed a specific detection of *Cde^s*, even if it occurred *in trans* to another *RHD* positive allele. Furthermore, the detection method was not confounded by D category III type IV or D category IVa that shared the N152T substitution with *Cde^s*. It should be noted that the latter haplotypes are frequent in populations comprising African ethnic background, in which *Cde^s* is prevalent. The method described by us in this example allowed the specific detection of *Cde^s*, is not confounded by the other haplotypes and hence represents a considerable improvement to the prior art. Our characterization of the 5' breakpoint region (example 15) will likewise allow the specific detection of *Cde^s* by any suitable method known in the art, like PCR-SSP, PCR-LP, PCR-RFLP, PCR-SSO, Southern blotting etc.

[0159] The specific detection of *Cde^s* is also important for the correct prediction of the antigen C. The *RHD* gene of *Cde^s* encodes for an antigen C that is often missed in DNA based methods for the prediction of antigen C.

Example 18: Immunohematology

[0160] One sample of each *RHD* positive allele was evaluated by direct agglutination with two monoclonal anti-D (Seraclon anti-D, clone BS226; Biotest, Dreieich, Germany, and Frekaklon anti-D, clone MS201; Gull, Bad Homburg, Germany). Indirect antiglobulin test was done in a gel matrix test (LISS-Coombs 37 °C, DiaMed-ID Micro Typing System, DiaMed, Cressier sur Morat, Switzerland) using an oligoclonal anti-D (Seraclon anti-D blend, clones H41 11B7, BS221 and BS232; Biotest). Samples reactive in gel matrix technique were further investigated using the monoclonal anti-D HM10, HM16, P3x61, P3x35, P3x212 11F1, P3x212 23B10, P3x241, P3x249, P3x290 (Diagast, Loos, France) and H41 11B7 (Biotest). The presence of a *D_{ed}* phenotype was determined by adsorption of 500 μ l of a polyclonal anti-D (Human incomplete anti-D; Lome Laboratories, Reading, UK) to 500 μ l red cells for 1 h at 37 °C and elution using a chloroform technique (Flegel, Transfusion 40:428-434, 2000). The analysis of samples routinely grouped as D negative revealed 16 *D_{el}* samples and 3 D positive samples with weak or partial D. These samples clustered among samples previously believed to be D negative with a C or E (Table 9). Nineteen of twenty-seven discrepancies between routine serology and a PCR testing intron 4 and exon 7 represented D positive samples missed by serology, only eight were due to false-positive PCR.

Example 19: Haplotype frequencies

[0161] For alleles observed more than once, their haplotype association was trivial. Alleles that were observed only once were assumed to be associated with the Cde or cdE. haplotype rather than the cde haplotype, because no *RHD* positive allele was detected in any ccddee sample. An allele occurring in a single CcddEe sample was formally counted half for Cde and half for cdE. CCddee samples were assumed to harbour one aberrant and one normal Cde allele. The frequency of a given aberrant *RHD* allele in its haplotype was calculated as the number of observed samples divided by the number of the corresponding haplotypes under observation (500 Cde, 302 cdE). The population frequency of an *RHD* allele was calculated from the frequency of this allele in its haplotype and the known frequency of the haplotype in the local population (Wagner, Infusionsther. Transfusionsmed. 22:285-90, 1995). The haplotype frequencies were calculated for each PCR pattern and for each *RHD* allele (Table 8). In accordance with a previous study in England by Avent et al. (Avent, Blood 89:2568-77, 1997), 4.9% of Cde haplotypes and 1.5% of cdE haplotypes were *RHD* positive

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in our population. As no *RHD* positive allele was detected among 314 ccddee samples, the frequency in the cde haplotype was less than 0.5 % (upper limit of one-sided 95% confidence interval, Poisson distribution). The three frequencies differed statistically significantly from each other ($p < 0.05$; two sided Fisher's exact test for each pairwise comparison corrected according to Bonferoni-Holm). The population frequency of any D negative *RHD* positive haplotype was estimated to be 1:1,606. D_{el} alleles could only be observed in the presumed Cde haplotypes. About 3% of samples carrying antigen C that were typed D-negative in the blood bank routine represented D_{el} . The population frequency of D_{el} alleles was 1:3,030.

Table 1. Primers

Primer	Nucleotide sequence	Localization	Position
rb10b	ggctaaatatttgatgaccaagtt	<i>RHD</i> cDNA	1,194 to 1,217
re011d	gcagccaactcccctgtg	<i>RHD</i> promoter	-883 to -901
re014	gctctaccttggtcacctcc	dJ469D22	52,189 to 52,209
reD4	aggtcacatcatttatcccactg	dJ469D22	53,968 to 53,945
re11d	agaagatgggggaatcttttct	dJ469D22	51,193 to 51,216
re96	tttgactgggctagaaagaagtg	dJ469D22	242 to 216
rea7	tgtgcctgcattgtacgtgag	<i>RHD</i> cDNA	1,311 to 1,333
rend31	ttctgtctgggtggggagg	dJ465N24	128,649 to 128,629
rend32	ggaggggttaatatgggtggc	dJ465N24	127,355 to 127,375
rend8b1	ttgtcctggtgcctgtggtc	dJ465N24	69,296 to 69,274
rend8b2	caaactctgtgactggtctcgg	dJ465N24	68,451 to 68,473
rend9a1	aacggctccatcacccctaaag	dJ465N24	50,008 to 49,987
rend9a2	cccactcctagataccaaccaag	dJ465N24	49,059 to 49,083
rey14a	ctttatgcactgcctcgttgaatc	dJ469D22	56,792 to 56,769
rey14b	ttgactggtgtggtgctgttg	dJ469D22	55,863 to 55,884
rey15a	gcagaaagggaggtgatgctg	dJ469D22	55,416 to 55,395
rey7	ctgacaaagtgagagcccactg	dJ469D22	62,324 to 62,346
rey8	ttaagcctacatccacatgctgag	dJ469D22	62,854 to 62,831
rez2	ccttggctcgcagaaatttca	<i>RHD</i> cDNA	2738 to 2717
rez4	gtttggcatcataggagatttggc	dJ465N24	120,101 to 120,124
rez7	cctgtccccatgattcagttacc	dJ465N24	124,831 to 124,854
rh7	acgtacaaatgcaggcaac	<i>RHD</i> cDNA	1,330 to 1,312
rnb31	ccttttttgttttttggcgggtgc	downstream <i>Rhesus</i> box	6,710 to 6,684
rr4	agcttactggatgaccacca	<i>RHD</i> cDNA	1,541 to 1,522
sf1	gactgggggaaagcgcaatac	<i>SMP1</i> cDNA	142 to 164
sf1c	gtattgcgctttccccccagtc	<i>SMP1</i> cDNA	164 to 142
sf3	tgactgtctctatcccacatg	<i>SMP1</i> cDNA	1,696 to 1,717
sm19	gggcttgaagcaagtaaatggaag	<i>SMP1</i> intron 1	.58 to -35
sr1	gctatcaataitttctgttacagacac	<i>SMP1</i> cDNA	2,172 to 2,144
sr3	gttactgcccataagtcttcagtc	<i>SMP1</i> cDNA	575 to 551
sr3kp	tgcccgactgaagacttatgg	<i>SMP1</i> cDNA	546 to 567
sr45	cagctgcatctatgataatccacc	<i>SMP1</i> cDNA	224 to 243
sr47	atggacaagtcgaggtgatag	<i>SMP1</i> cDNA	315 to 344
sr47c	atcacctcggactgtccattc	<i>SMP1</i> cDNA	342 to 321
sr5	gcaatcagagatccaaaggccaac	<i>SMP1</i> cDNA	428 to 405
sr5c	gttggcctttggatctctgattgc	<i>SMP1</i> cDNA	405 to 428
sr55	gacatagtataccctggaattgctgt	<i>SMP1</i> cDNA	472 to 497
sr55c	acagcaattccagggtatactatgctc	<i>SMP1</i> cDNA	497 to 472

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(continued)

Primer	Nucleotide sequence	Localization	Position
sr9	ctccccgatttagccaagaa	<i>SMP1</i> cDNA	27 to 6

For the *RHD* promoter and the *RHD* cDNA, the positions refer to the distance from the A of the start codon. For introns, they refer to the distance from the intron/exon junction. For all other sequences including the *SMP1* cDNA, they refer to the distance from the start of the published sequences. The mismatches in primers rey14b, rnb31, and sf3 were inadvertently introduced. Primers re11d, re014 and re04 do not exactly match dJ469D22, because they were designed from our raw sequences covering the 5' flanking region of *RHD*.

Table 2. Presence of *RHD* flanking sequences in the YAC 38A-A10

Primer	sense	antisense	Predicted position	Amplicon size	Amplicons obtained with		
					Genomic DNA	YAC	38A-A10
rend9a1	rend9a2	yes	<i>RHD</i> 5' flanking region	about 85,000 bp from ATG	948 bp	yes	yes
rend8b1	rend8b2	yes	<i>RHD</i> 5' flanking region	about 50,000 bp from ATG	845 bp	yes	yes
rea7.	rez2	yes	<i>RHD</i> 3' flanking region	about 1,500 bp from STOP	1,412 bp	yes	no
rend32	sr9	yes	<i>RHCE</i> 3' flanking region	about 20,000 bp from STOP	1,989 bp	yes	yes
sr1	sf3	yes	<i>RHCE</i> 3' flanking region	about 1,000 bp from STOP	477 bp	yes	yes
rey14b	rey14a	yes	<i>RHCE</i> 5' flanking region	about 5,300 bp from ATG	929 bp	yes	yes
rey7	rey8	no	<i>RHCE</i> 5' flanking region	about 10,000 bp from ATG	530 bp	yes	yes
		no					

Table 3. PCR-RFLP for the specific detection of the *RHD* deletion.

Phenotype	Known genotype	Samples tested (n)	Number of samples with <i>RHD</i> genotype						P [¶]
			determined			expected			
			+/+	+/-	-/-	+/+	+/-	-/-	
<i>Known genotype</i>									
ccddee	cde/cde	14	0	0	14	0	0	14	N.A.
CCddee	Cde/Cde [†]	5	0	0	5	0	0	5	N.A.
ccddEE	cdE/cdE [†]	1	0	0	1	0	0	1	N.A.
D variants	D/cde [‡]	9	0	9	0	0	9	0	N.A.
ccDEe	cDe/cDE [§]	4	4	0	0	4	0	0	N.A.
<i>Common phenotypes</i>									
CcDee		10	1	9	0	0.5	9.5	0	>0.4

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(continued)

Common phenotypes

5	ccDEe	10	0	10	0	0.3	9.7	0	>0.5
	ccDee	10	1	9	0	0.5	9.5	0	>0.4
	CCDee	10	9	1	0	9.5	0.5	0	>0.4
	CcDEe	12	11	1	0	11	1	0	>0.5
	ccDEE	10	10	0	0	9.2	0.8	0	>0.4
10	CCDEe	6	5	1	0	5.8	0.2	0	>0.1

* Expected number of RHD^+/RHD^+ and RHD^+/RHD^- samples based on known genotypes or the haplotype frequencies in the local population⁴¹

† RHD^- negative in PCR.

‡ RHD^+/RHD^- , because a weak or partial D phenotype would be masked in a RHD^+/RHD^+ genotype. These samples were weak D type 1 (n=2), type 2 (n=2), type 3 (n=2), type 4 (n=2) and D^{VII} (n=1).

§ Presence of two RHD genes differing in their polymorphic $HaeIII$ -site in intron 3⁴² demonstrated by PCR-RFLP.

N.A. - not applicable. Probabilities were calculated based on confidence limits of binomial distribution.

Table 4. RHD PCR-SSP

Region	Name Reference	DNA sequence	Position	Polymorphisms detected	Amplicon size
Promoter	re012	tccactttccacctccctgc	Promoter	-1,137 to -1,1197 bp deletion at -1125	255 43
	re011d	gcagccaacttcccctgtg	Promoter	-883 to -9014 bp deletion at -896	44
Exon 3	ga31 (D-3-383)	ttgtcggctgatctcagtgga	Exon 3	361 to 383 A	154 21
	rb21	aggtccctctccagcac	Intron 3	28 to 11	42
Exon 4	ga41 (D-4-527)	acatgatgcacatctacgtgttcgc	Exon 4	503 to 527	123 21
	ga42 (D-4-602)	cagacaaactgggtatcgttgctg	Exon 4	625 to 602 C	21
Intron 4	re41	cgataccagttgtctgcatgc	Exon 4	608 to 631	226
	this study				
	rb12	tcctgaacctgctctggaagtgc	Intron 4	198 to 175 Intron 4 deletion in RHD	40
Exon 5	rb24	agaccttggagcaggagtg	Intron 4	-53 to -34	228 40
	ga51 (D-5-787)	ctgctcaccttctgatcttccc	Intron 5/Exon5	8 to 787	787 G 21
Exon 6	ga62 (D-6-826)	ttatgtgcacagtcgggttgg	Exon 6	804 to 826	133 21
	ga61 (D-6-916)	caggctactggctccccggac	Exon 6	936 to 916 G	21
Exon 7†	ga71 (D-7-967)	gttgtaaccgagtctggggattc	Exon 7	944 to 967	123 21
	ga72 (D-7-1048)	tgccggctccgacggatc	Exon 7	1,066 to 1,048 G	21

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(continued)

Region	Name Reference	DNA sequence	Position	Polymorphisms detected	Amplicon size		
5	Exon 7†	rb26	aggggtgggtagggaatag	Intron 6 -62 to -43	130	42	
		re71	accagcaagctgaagtttagcc	Exon 7 1,008 to 985	985/986 GG	42	
10	Intron 7	rb52	ccaggttgtaagcattgctgtacc	Intron 7 6,666 to 6,690	6,690 C	42	
		rb51	gcatgacgtgttctgcctctg	Intron 7 6,734 to 6,713	6,713 C	169	
15	Exon 9	this study re83	gagattaaaaatcctgtgctcca	Intron 8 -56 to -34	119	42	
		re94	cttggtcatcaaaaatttagcct	Exon 9 1,216 to 1,193	1,193 A		
20	Exon 10 (3' UTR)	this study rea7	tgttgctgcattgtacgtgag	3'UTR 1,310 to 1,333	<i>RHD/Rhesus box</i>	23	44
		rr4	agcttactggatgaccacca	3'UTR 1,541 to 1,522	junction		42

* Primer names in brackets are as described by Gassner et al. 21.

† Primer set ga71/ga72 was used for the screening, primer set rb26-re71 for *RHD* exon specific PCR-SSP.

Table 5. Population survey of known D negative blood donors screened by *RHD* PCR-SSP

Documented phenotype	Samples (n)	
	screened	PCR-SSP positive*
ccddee	314	0
Ccddee	433	34
ccddEe	271	5
CCddee	24	4
CcddEe	19	4
ccddEE	6	1
CcddEE	1	0
Total	1,068	48

Positive for at least one of four *RHD* specific polymorphisms tested (promoter, intron 4, exon 7 or 3' UTR).

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Table 6. PCR patterns compatible with *RHD-RHCE-RHD* hybrid genes or partial *RHD* deletions in 25 D negative samples

5	PCR pattern	<i>RHD</i> specific PCR-SSP*	Samples Possible cause†	Phenotype (n)	Phenotype		Haplotype	Reference‡
					Documented	Confirmed		
10	Pattern 1	+ - - - - - - - +	<i>RHD-CE</i> (3-9)- <i>D</i>	11	Ccddee§	D negative	Cde	Whites ^{1,25} Africans ²⁴
15	Pattern 2	+ - - - - - - + +	<i>RHD-CE</i> (3-7)- <i>D</i>	4	Ccddee	D negative	Cde	this study
	Pattern 3	+ + - - - - - + +	<i>RHD-CE</i> (4-7)- <i>D</i>	3	ccddEe	D negative	cdE	Whites ¹⁶
20	Pattern 4	+ + - - - - + + +	<i>RHD-CE</i> (4-7)- <i>D</i>	1	CcddEe	D negative	n.k.¶	this study
	Pattern 5	+ + - - - + + + + +	<i>RHD-CE</i> (4-5)- <i>D</i>	2	ccddEe ^α	partial D/D _{el} ^α	cDE	Whites ^{3,22,30,40}
	Pattern 6	+ + + + + + + - - +	<i>RHD-CE</i> (8-9)- <i>D</i>	3	CCddee	D negative	Cde	Whites ²¹
25	Pattern 7	- - - - - - - +	<i>RHCE</i> (1-9)- <i>D</i> (10)	1	ccddEe	D negative	cdE	this study
30	Pattern 8	- + - - - - + + +	<i>RHD</i> (1-3)- <i>CE</i> (4-7)- <i>D</i>	1	CcddEe	D negative	Cde ^β	Africans ^{5,15}

* P - Promoter, E3 - Exon 3, E4 - Exon 4,14 - Intron 4, E5 - Exon 5, E6 - Exon 6; E7 - Exon 7; 17 - Intron 7; E9 - Exon 9; E10 - Exon 10 (3' UTR)

† Assuming the presence of a single *RHD-CE-D* hybrid allele.

‡ Previously described alleles that fit PCR pattern and haplotype.

§ 11 samples: 9 Ccddee, 1 CCddee, 1 CcddEe

¶ n.k. - not known.

^α 2 samples, 1 labeled CcddEe with D_{el} phenotype, 1 labeled ccddEe with partial D D^{VI} phenotype.

^β Probably identical to Cde^β (see below).

Table 7. *RHD* alleles with single nucleotide substitutions in 22 D negative samples

45	Allele	Substitution Reference	Effect(s)	Samples (n)	Phenotype		Haplotype	
					Documented	Confirmed		
	<i>RHD</i> (W16X) study	G->A at 48	Stop codon at codon 16	2	Ccddee	D negative	Cde	this
50	<i>RHD</i> (G486 (+1)A) study	g->a at 486+1	5' splice site Intron 3 ACgt->ACat	3	Ccddee	D _{el}	CDe	this
55	<i>RHD</i> (G212V) study	G->T at 635	3' splice site intron 4 agGC->agTC Missense mutation G212V	1	Ccddee	D negative	Cde	this

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(continued)

	Allele	Substitution Reference	Effect(s)	Samples (n)	Phenotype		Haplotype	
					Documented	Confirmed		
5	<i>RHD</i> (C285Y) study ¹	G->A at 854	Missense mutation C285Y	1	ccddEe	partial D*	cDE	this
10	<i>RHD</i> (M2951)	G->T at 885	Missense mutation M2951	7	Ccddee	D _{el}	CDe [†]	42
	<i>RHD</i> (Y330X) study	C->G at 985	Stop codon at codon 330	1	Ccddee	D negative	Cde	this
15	<i>RHD</i> (G1153 (+1)A) study	g->a at 1153+1	5' splice site intron 8 AGgt->AGat	1	Ccddee	D negative	Cde	this
20	<i>RHD</i> (G385A)	G->C at 1154	3' splice site intron 8 agGT->agCT Missense mutation G385A	1	CcddEe	weak D	cDE	42
25	<i>RHD</i> (K409K) study	G->A at 1227	5' splice site intron 9 AGgt->AAgt	5	Ccddee	D _{el}	CDe	this

* A detailed serologic analysis of this sample representing the partial D DIM has been published previously⁴³.

† The same allele occurring in a cDe haplotype has been described as weak D type 11.

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Table 8. Estimated frequencies in population
Frequency

	PCR pattern/Allele	Frequency	
		among Cde/ cdE	in population
35	Pattern 1	1:45	1:4,132
	Pattern 2	1:125	1:11,364
	Pattern 3	1:101	1:17,976
	Pattern 4	1:500*	1:45,455*
40	Pattern 6	1:167	1:15,152
	Pattern 7	1:302	1:53,929
	Pattern 8	1:500	1:45,455
	<i>RHD</i> (W16X)	1:250	1:22,727
	<i>RHD</i> (G212V)	1:500	1:45,455
45	<i>RHD</i> (Y330X)	1:500	1:45,455
	<i>RHD</i> (G1153(+1)A)	1:500	1:45,455
	Any D negative	1:20 / 1:67 [†]	1:1,607
50	<i>RHD</i> (G486(+1)A)	1:167	1:15,152
	<i>RHD</i> (M2951)	1:71	1:6,493
	<i>RHD</i> (K409K)	1:100	1:9,091

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(continued)

PCR pattern/Allele	Frequency	
	among Cde/ cdE	in population
Any D _{el}	1:33 [‡]	1:3,030

* Assuming a Cde haplotype; a cdE haplotype would result in a frequency of 1:302 among cdE and 1:53,929 in the population. For statistics and sum frequencies, the haplotype was formally counted as 0.5 Cde and 0.5 cdE.
[†] 1:20 among Cde, 1:67 among cdE.
[‡] 1:33 relative to the Cde haplotype.

Table 9 False negative rate in routine typing for antigen D

Phenotype	Documented Samples (n)	Confirmed phenotype (n)		False negatives	
		D _{el}	partial or weak D	n	Rate
ccddee	314	0	0	0	0% [†]
Ccddee	433	15	0	15	3.5%
ccddEe	271	0	2	2	0.7%
other [†]	50	1	1	2	4%
D negative	N.A. [‡]	0.15%	0.02%		0.17%

* CCddee, CcddEe, ccddEE, and CCddEe
[†] Upper limit of 95% confidence interval was 0.95% (Poisson distribution)
[‡] N.A. - not applicable. The frequencies are estimates based on the phenotype frequencies in the population ⁴¹.

Table 10 Previously described D negative, *RHD* positive alleles

Allele	Haplotype	Population	Possible match
<i>RHD</i> (Q41X) ²	Cde	Whites	not detected
<i>RHD-CE</i> (2-9)-D ^{1,24,25}	Cde	Whites ^{1,25} , Blacks ²⁴	Pattern 1
<i>RHD-CE</i> (3:455-7)-D ^{5,15}	Cde ⁸	Blacks	Pattern 8
<i>RHD</i> (488del4) ¹	Cde	Whites	not detected
<i>RHD-CE</i> (4-7)-D ¹⁶	cdE	Whites	Pattern 3 or 4
<i>RHD</i> Ψ ³⁸	cde	Blacks	not detected
<i>RHD</i> (600del) ¹⁰	Cde	somatic mutation*	not detected
<i>RHD</i> (exon 5 variant) ⁸	cde	not communicated	not detected
<i>RHD</i> (G314V) ³⁴	Cde	Japanese	not detected
<i>RHD</i> (exon 9 variant)	Cde	Whites	Pattern 6

Table 11 Population rates of false positives and positive predictive value of different *RHD* PCR strategies

PCR strategy	Rate of false positives	Positive predictive value of positive result	Number of polymorphism tested
Exon 10 only	1:1,275	0.999216	1
Intron 4/Exon 7	1 :4,081	0.999755	2
Intron 4/Exon 7/ <i>RHD</i> Ψ	1:4,700	0.999787	3
Intron 4/Exon 7/ <i>W16X</i>	1:5,212	0.999808	3
Intron 4/Exon 7/Intron 7	1:6,051	0.999835	3
Exons 3, 4, 5, 6, 7, 9	1:6,051	0.999835	6
Exons 2, 3, 4, 5, 6, 7, 9, 10	1:6,051	0.999835	8

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(continued)

Table 11 Population rates of false positives and positive predictive value of different RHD PCR strategies

PCR strategy	Rate of false positives	Positive predictive value of positive result	Number of polymorphism tested
Intron 4/Exon 7/W16X/ <i>RHD</i> Ψ	1:6,267	0.999840	4
All Exons/ <i>RHD</i> Ψ	1:7,520	0.999867	9
Intron 4/Exon 7/Intron 7/W16X	1:8,921	0.999888	4
Intron 4/Exon 7/Intron 7/W16X/ <i>RHD</i> Ψ	1:12,533	0.999920	5

* Allele acquired by somatic mutation in a woman with chronic myelogenous leucemia and restricted to the myeloid lineage

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[0162]

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SEQUENCE LISTING

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Claims

- 45 1. A nucleic acid molecule that is an *RHD* gene comprising a single nucleotide substitution within a 5' or 3' splice site, wherein said substitution gives rise to a mutation within a 4-nucleotide sequence, a 6-nucleotide sequence or an 8-nucleotide sequence comprising the consensus splice site at the exon9/intron9 boundary or at the exon3/intron3 boundary and wherein said nucleic acid molecule correlates with a Del-phenotype.
- 50 2. The nucleic acid molecule of claim 1 wherein said substitution gives rise to an *RHD*(K409K) mutation.
3. The nucleic acid molecule of claim 2 wherein said substitution is a substitution at the 5' splice site intron 9 from AGgt to AAgt.
- 55 4. The nucleic acid molecule of claim 1 wherein said substitution gives rise to an *RHD*(G468+1)A) mutation.
5. The nucleic acid molecule of claim 4 wherein said substitution is a substitution at the 5' splice site intron 3 from ACgt to ACat.

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- 5 6. A nucleic acid molecule that is an *RHD* gene comprising a single nucleotide substitution within the coding region of the *RHD* gene or within a 5' or 3' splice site wherein said nucleotide substitution gives rise to a stop codon at codon 16, to a stop codon at codon 330, to a missense mutation at codon 212 or to a mutation within a 4-nucleotide sequence, a 6-nucleotide sequence or an 8-nucleotide sequence comprising the consensus splice site at the exon8/intron8 boundary wherein said nucleic acid molecule correlates with an *RHD* negative phenotype.
7. The nucleic acid molecule of claim 6 wherein said substitution gives rise to an *RHD*(W16X) mutation.
- 10 8. The nucleic acid molecule of claim 7 wherein said substitution is a G → A substitution at nucleotide position 48.
9. The nucleic acid molecule of claim 6 wherein said substitution gives rise to an *RHD*(Y330X) mutation.
10. The nucleic acid molecule of claim 9 wherein said substitution is a C → G substitution at nucleotide position 985.
- 15 11. The nucleic acid molecule of claim 6 wherein said substitution gives rise to an *RHD*(G212V) missense mutation.
12. The nucleic acid molecule of claim 11 wherein said substitution is a G → T substitution at nucleotide position 635.
- 20 13. The nucleic acid molecule of claim 6 wherein said substitution gives rise to an *RHD*(G1153(+1)A) mutation.
14. The nucleic acid molecule of claim 13 wherein said substitution is a substitution at the 5' splice site intron 8 from AGgt to AGat.
- 25 15. A protein product of the *RHD* gene encoded by the nucleic acid molecule of any one of claims 1 to 5.
16. An oligonucleotide comprising 12 to 50 nucleotides hybridizing under stringent conditions to a portion of the nucleic acid molecule of any one of claims 1 to 14 wherein said portion comprises said (missense) mutation or said stop codon or to the complementary portion thereof.
- 30 17. An antibody or aptamer or phage specifically binding to a protein product of the *RHD* gene of claim 15.
18. A method for testing for the presence of a nucleic acid molecule encoding a mutant Rhesus D antigen as **characterized by** the nucleic acid molecule of any one of claims 1 to 14 in a sample comprising hybridizing the oligonucleotide of claim 16 under stringent conditions to nucleic acid molecules comprised in the sample obtained from a human and detecting said hybridization.
- 35 19. The method of claim 18 further comprising digesting the product of said hybridization with a restriction endonuclease and analyzing the product of said digestion.
- 40 20. A method for testing for the presence of a nucleic acid molecule encoding a mutant Rhesus D antigen as **characterized by** the nucleic acid molecule of any one of claims 1 to 14 in a sample comprising determining the nucleic acid sequence of at least a portion of the nucleic acid molecular structure or nucleic acid molecule of any one of claims 1 to 14, said portion encoding said (missense) mutation or said stop codon.
- 45 21. The method of claim 20 further comprising, prior to determining said nucleic acid sequence, amplification of at least said portion of said nucleic acid molecule or structure.
22. A method for testing for the presence of a nucleic acid molecule encoding a mutant Rhesus D antigen as **characterized by** the nucleic acid molecule of any one of claims 1 to 14 in a sample comprising carrying out an amplification reaction using a set of primers that amplifies at least a portion of said sequence wherein at least one of the primers employed in said amplification reaction is the oligonucleotide of claim 16.
- 50 23. The method of claim 21 to 22 wherein said amplification is effected by or said amplification reaction is the polymerase chain reaction (PCR).
- 55 24. The method of claim 23 wherein said PCR is PCR-RFLP, PCR-SSP or long-range PCR.
25. The method of any one of claims 21 to 24 wherein the molecular weight of the amplification product is analyzed.

26. A method for testing for the presence of the nucleic acid molecule of any one of claims 1 to 14 encoding *RHD* positive alleles comprising the following steps:

- (a) isolating the DNA from a blood sample or blood donor;
- (b) hybridizing at least two oppositely oriented primers under stringent conditions to the DNA so as to carry out a PCR;
- (c) amplifying the target sequence;
- (d) separating the amplification products on a gel; and
- (e) analyzing the amplicons

wherein said *RHD* positive alleles are derived from a serologically RhD negative sample.

27. The method of claim 26 wherein said sample is selected from a Caucasian population.

28. A method for testing for the presence of a protein product of the *RHD* gene of claims 15 in a sample comprising assaying a sample obtained from a human for specific binding to the antibody or aptamer of phage of claim 17.

29. A method for testing for the presence of a protein product of the *RHD* gene encoding the nucleic acid molecule of any one of claims 1 to 5 in a sample comprising utilizing direct agglutination methods, indirect antiglobulin tests, monoclonal anti-D antibodies and/or adsorption/elution techniques.

30. The method of any one of claims 18 to 29 wherein said sample is blood, serum, plasma, fetal tissue, saliva, urine, mucosal tissue, mucus, vaginal tissue, skin, hair, hair follicle or another human tissue.

31. The method of claim 30 comprising enrichment of fetal cells or extraction of fetal DNA or mRNA from maternal tissue, like peripheral blood, serum or plasma.

32. The method of any one of claims 18 to 31 wherein said nucleic acid molecule or proteinaceous material from said sample is fixed to a solid support.

33. The method of claim 32 wherein said solid support is a chip.

34. Use of the nucleic acid molecule of any one of claims 1 to 14 for the analysis of a negative or a positive Rhesus D phenotype.

35. Use of the nucleic acid molecule of any one of claims 1 to 14, or the protein product of the *RHD* gene of claim 15 for the assessment of the affinity, avidity and/or reactivity of monoclonal antibodies or of polyclonal antisera preferably anti-D antisera, anti-globulin or anti-human-globulin antisera.

36. Use of cells, preferably red blood cells from probands carrying the nucleic acid molecule of any one of claims 1 to 14 for the assessment of the affinity, avidity and/or reactivity of monoclonal anti-D antibodies or of polyclonal anti-D or of anti-globulin or of anti-human-globulin antisera or of preparations thereof.

37. A method for the characterization of the monoclonal antibodies or polyclonal antisera or of a preparation thereof said method comprising

- (a) testing the nucleic acid molecule of a sample of a proband for the presence of a mutation as defined in any one of claims 1 to 14;
- (b) correlating, on the basis of the mutation and the allelic status of the *RHD* gene, the nucleic acid with the density of the protein product of the *RHD* gene on the surface of red blood cells of said proband;
- (c) reacting said monoclonal antibodies or polyclonal antisera or said preparation thereof with a cell carrying the protein product of the *RHD* gene on its surface;
- (d) characterizing said monoclonal antibodies or polyclonal antisera or said preparation thereof on the basis of the results obtained in step (c).

38. The method of claim 37 wherein said characterization comprises the determination of reactivity, sensitivity, avidity, affinity specificity and/or other characteristics of antibodies and antisera.

39. The method of claim 37 or 38 wherein said cell carrying the protein product of the *RHD* gene on its surface is a red blood cell.
- 5 40. A method for determining whether a patient in need of a blood transfusion is to be transfused with RhD negative blood from a donor comprising the step of testing a sample from said patient for the presence of one or more nucleic acid molecules of any one of claims 1 to 14 wherein a positive testing for two different of said nucleic acid molecules is indicative of the need for a transfusion with Rh negative blood.
- 10 41. A method of assessing of the risk of the RhD negative mother of conceiving or carrying an RhD positive fetus or of the risk of a mother having an anti-D titer of conceiving or carrying a fetus at risk to develop haemolytic disease of the newborn comprising assessing a sample obtained from the father of the fetus for the presence of one or more nucleic acid molecules as defined in any one of claims 1 to 14.
- 15 42. A preparation comprising the antibody or aptamer or phage of claim 17.
- 20 43. A method of identifying an antibody V_H or V_L chain or a combination thereof or an aptamer specifically binding to a protein product of the *RHD* gene of claim 15 comprising
- (a) contacting the protein product of the *RHD* gene of claim 15 with a phage library displaying V_H or V_L chains or combinations thereof on the surface of the phage or with aptamers;
- (b) identifying phage or aptamers that bind to said protein product; and optionally
- (c) repeating steps (a) and (b) one or more times.
- 25 44. A method of identifying a monoclonal antibody specifically binding to a protein product of the *RHD* gene of claim 15 comprising
- (a) contacting the protein product of claim 15 with one or more monoclonal antibodies;
- (b) identifying monoclonal antibodies that bind to said protein; and optionally
- (c) repeating steps (a) and (b) one or more times.
- 30 45. A method of identifying an antibody V_H or V_L chain or a combination thereof or an aptamer specifically binding to a protein product of the *RHD* gene of claim 15 comprising
- (aa) contacting said protein product; and
- (ab) a normal D polypeptide
- wherein the normal D polypeptide is present in a molar mass that is higher, equal or less than the protein product of the *RHD* gene of (aa) with a phage library displaying V_H or V_L chains or combinations thereof on the surface of the phage or with aptamers;
- (b) identifying phage or aptamers that bind to said protein product of the *RHD* gene of (aa); and optionally
- (c) repeating steps (a) and (b) one or more times.
- 35 46. A method of identifying a monoclonal antibody specifically binding to a protein product of the *RHD* gene of claim 15 comprising
- (aa) contacting the protein product of the *RHD* gene; and
- (ab) a normal D polypeptide
- wherein the normal D polypeptide is present in a molar mass which is higher, equal or less than the protein product of the *RHD* gene of (aa) with one or more monoclonal antibodies;
- (b) identifying monoclonal antibodies that bind to said protein product of the *RHD* gene of (aa); and optionally
- (c) repeating steps (a) and (b) one or more times.
- 40 47. The method of any one of claims 43 to 46 wherein the protein product of the *RHD* gene is exposed on the surface of a cell.
- 45 48. The method of any one of claims 43 to 47 wherein the polypeptide or host cell is affixed to a solid support.
- 50 49. The method of any one of claims 43 to 48 wherein subsequent to step (b) or (c) the following step is carried out:

(d) identifying the amino acid sequence of the V_H or V_L chains and/or identifying the nucleic acid sequence encoding said amino acid sequence.

5 50. The method of any one of claims 43 to 46 wherein, in the case that only one round of selection is employed for the identification, the number of protein molecules of the *RHD* gene of (a) is in molar excess over the number of phage particles.

10 51. Use of cells, preferably red blood cells comprising the protein product of the *RHD* gene of claim 15, from probands for the assessment of the affinity, avidity and/or reactivity of monoclonal anti-D of claim 17 or of polyclonal anti-D or of anti-globulin or of anti-human-globulin antisera or of preparations thereof.

52. Kit comprising

15 (a) the oligonucleotide of claim 16, and/or

(b) the antibody of claim 17; and/or

(c) the aptamer of claim 17, and/or

(d) the phage of claim 17; and/or

(e) a pair of primers useful for carrying out the amplification reaction of any one of claims 20 and 25.

20 **Patentansprüche**

25 1. Nukleinsäuremolekül, das ein *RHD*-Gen ist, das einen Einzelnukleotid-Austausch in einer 5-' oder 3'-Spleiß-Stelle umfasst, wobei der Austausch eine Mutation in einer Sequenz von 4 Nukleotiden, einer Sequenz von 6 Nukleotiden oder einer Sequenz von 8 Nukleotiden hervorruft, die die Konsensus-Spleiß-Stelle an der Exon9/Intron9-Grenze oder an der Exon3/Intron3-Grenze umfasst und wobei das Nukleinsäuremolekül mit einem Del-Phänotyp korreliert.

2. Nukleinsäuremolekül nach Anspruch 1, wobei der Austausch eine *RHD*(K409K)-Mutation hervorruft.

30 3. Nukleinsäuremolekül nach Anspruch 2, wobei der Austausch ein Austausch von AGgt zu AAgt an der 5'-Spleiß-Stelle von Intron 9 ist.

4. Nukleinsäuremolekül nach Anspruch 1, wobei der Austausch eine *RHD*(G468+1A)-Mutation hervorruft.

35 5. Nukleinsäuremolekül nach Anspruch 4, wobei der Austausch ein Austausch von ACgt zu ACat an der 5'-Spleiß-Stelle von Intron 3 ist.

40 6. Nukleinsäuremolekül, das ein *RHD*-Gen ist, das einen Einzelnukleotid-Austausch im kodierenden Bereich des *RHD*-Gens oder in einer 5-' oder 3'-Spleiß-Stelle umfasst, wobei der Nukleotid-Austausch ein Stoppkodon in Kodon 16, ein Stoppkodon in Kodon 330, eine Missense-Mutation in Kodon 212 oder eine Mutation in einer Sequenz von 4 Nukleotiden, einer Sequenz von 6 Nukleotiden oder einer Sequenz von 8 Nukleotiden hervorruft, die die Konsensus-Spleiß-Stelle an der Exon8/Intron8-Grenze umfasst und wobei das Nukleinsäuremolekül mit einem *RHD*-negativen Phänotyp korreliert.

45 7. Nukleinsäuremolekül nach Anspruch 6, wobei der Austausch eine *RHD*(W16X)-Mutation hervorruft.

8. Nukleinsäuremolekül nach Anspruch 7, wobei der Austausch ein G → A Austausch in Nukleotidposition 48 ist.

9. Nukleinsäuremolekül nach Anspruch 6, wobei der Austausch eine *RHD*(Y330X)-Mutation hervorruft.

50 10. Nukleinsäuremolekül nach Anspruch 9, wobei der Austausch ein C → G Austausch in Nukleotidposition 985 ist.

11. Nukleinsäuremolekül nach Anspruch 6, wobei der Austausch eine *RHD*(G212V)-Missense-Mutation hervorruft.

55 12. Nukleinsäuremolekül nach Anspruch 11, wobei der Austausch ein G → T Austausch in Nukleotidposition 635 ist.

13. Nukleinsäuremolekül nach Anspruch 6, wobei der Austausch eine *RHD*(G1153(+1A)-Mutation hervorruft.

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14. Nukleinsäuremolekül nach Anspruch 13, wobei der Austausch ein Austausch von AGgt zu AGat an der 5'-Spleiß-Stelle von Intron 8 ist.
- 5 15. Proteinprodukt des *RHD*-Gens, das von dem Nukleinsäuremolekül nach einem der Ansprüche 1 bis 5 kodiert wird.
16. Oligonukleotid umfassend 12 bis 50 Nukleotide, die unter stringenten Bedingungen an einen Teil des Nukleinsäuremoleküls nach einem der Ansprüche 1 bis 14 hybridisieren, wobei der Teil die (Missense-) Mutation oder das Stoppkodon oder den dazu komplementären Teil umfasst.
- 10 17. Antikörper oder Aptamer oder Phage, der spezifisch an ein Proteinprodukt des *RHD*-Gens nach Anspruch 15 bindet.
18. Verfahren zum Testen auf das Vorhandensein eines Nukleinsäuremoleküls, das ein mutiertes Rhesus D-Antigen, wie durch das Nukleinsäuremolekül nach einem der Ansprüche 1 bis 14 **gekennzeichnet** kodiert, in einer Probe, umfassend das Hybridisieren des Oligonukleotids nach Anspruch 16 unter stringenten Bedingungen an Nukleinsäuremoleküle, die in der von einem Menschen erhaltenen Probe enthalten sind, und den Nachweis der Hybridisierung.
- 15 19. Verfahren nach Anspruch 18, des weiteren umfassend das Verdauen des Hybridisierungsprodukts mit einer Restriktionsendonuklease und das Analysieren des Verdauungsprodukts.
- 20 20. Verfahren zum Testen auf das Vorhandensein eines Nukleinsäuremoleküls, das ein mutiertes Rhesus D-Antigen, wie durch das Nukleinsäuremolekül nach einem der Ansprüche 1 bis 14 **gekennzeichnet** kodiert, in einer Probe, umfassend das Bestimmen der Nukleinsäuresequenz von mindestens einem Teil der Nukleinsäuremolekülstruktur oder des Nukleinsäuremoleküls nach einem der Ansprüche 1 bis 14, wobei der Teil die (Missense-) Mutation oder das Stoppkodon kodiert.
- 25 21. Verfahren nach Anspruch 20, des weiteren umfassend die Amplifikation von mindestens einem Teil des Nukleinsäuremoleküls oder der Nukleinsäuremolekülstruktur vor der Bestimmung der Nukleinsäuresequenz.
- 30 22. Verfahren zum Testen auf das Vorhandensein eines Nukleinsäuremoleküls, das ein mutiertes Rhesus D-Antigen, wie durch das Nukleinsäuremolekül nach einem der Ansprüche 1 bis 14 **gekennzeichnet** kodiert, in einer Probe, umfassend das Ausführen einer Amplifikationsreaktion unter Verwendung eines Primersatzes, der mindestens einen Teil der Sequenz amplifiziert, wobei mindestens einer der in der Amplifikationsreaktion verwendeten Primer das Oligonukleotid nach Anspruch 16 ist.
- 35 23. Verfahren nach Anspruch 21 oder 22, wobei die Amplifikation mittels der Polymerase-Kettenreaktion (PCR) erfolgt oder die Polymerase-Kettenreaktion (PCR) ist.
- 40 24. Verfahren nach Anspruch 23, wobei die PCR eine PCR-RFLP, eine PCR-SSP oder eine Long-Range-PCR ist.
25. Verfahren nach einem der Ansprüche 21 bis 24, wobei das Molekulargewicht des Amplifikationsprodukts analysiert wird.
- 45 26. Verfahren zum Testen auf das Vorhandensein des Nukleinsäuremoleküls nach einem der Ansprüche 1 bis 14, das *RHD*-positive Allele kodiert, umfassend die folgenden Schritte:
- (a) Isolieren der DNA aus einer Blutprobe oder aus einer Probe eines Blutspenders;
 - (b) Hybridisieren von mindestens zwei entgegengesetzt ausgerichteten Primern unter stringenten Bedingungen an die DNA zum Ausführen einer PCR;
 - 50 (c) Amplifizieren der Zielsequenz;
 - (d) Auftrennen der Amplifikationsprodukte in einem Gel; und
 - (e) Analysieren der Amplikons
- wobei die *RHD*-positiven Allele aus einer serologisch RhD-negativen Probe stammen.
- 55 27. Verfahren nach Anspruch 26, wobei die Probe aus einer kaukasischen Population ausgewählt ist.
28. Verfahren zum Testen auf das Vorhandensein eines Proteinprodukts des *RHD*-Gens nach Anspruch 15 in einer

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Probe, umfassend das Untersuchen einer von einem Menschen erhaltenen Probe auf spezifische Bindung des Antikörpers oder Aptamers oder Phagen nach Anspruch 17.

- 5
29. Verfahren zum Testen auf das Vorhandensein eines Proteinprodukts des *RHD*-Gens, das das Nukleinsäuremolekül nach einem der Ansprüche 1 bis 5 kodiert, in einer Probe, umfassend die Verwendung von direkten Agglutinationsverfahren, indirekten Antiglobulin-Tests, monoklonalen anti-D-Antikörpern und/oder Adsorptions-/Elutionstechniken.
- 10
30. Verfahren nach einem der Ansprüche 18 bis 29, wobei die Probe Blut, Serum, Plasma, fötales Gewebe, Speichel, Urin, Schleimhautgewebe, Schleim, vaginales Gewebe, Haut, Haar, Haarfollikel oder anderes menschliches Gewebe ist.
- 15
31. Verfahren nach Anspruch 30, umfassend das Anreichern fötaler Zellen oder die Extraktion fötaler DNA oder mRNA aus mütterlichem Gewebe wie peripherem Blut, Serum oder Plasma.
- 20
32. Verfahren nach einem der Ansprüche 18 bis 31, wobei das Nukleinsäuremolekül oder das proteinöse Material der Probe an einen festen Träger gebunden ist.
33. Verfahren nach Anspruch 32, wobei der feste Träger ein Chip ist.
- 25
34. Verwendung des Nukleinsäuremoleküls nach einem der Ansprüche 1 bis 14 für die Analyse eines negativen oder positiven Rhesus D-Phänotyps.
- 30
35. Verwendung des Nukleinsäuremoleküls nach einem der Ansprüche 1 bis 14 oder des Proteinprodukts des *RHD*-Gens nach Anspruch 15 für die Bestimmung der Affinität, der Avidität und/oder Reaktivität von monoklonalen Antikörpern oder von polyklonalen Antiseren, vorzugsweise anti-D-Antiseren, Antiglobulin- oder Antihumanglobulin-Antiseren.
- 35
36. Verwendung von Zellen, vorzugsweise roten Blutkörperchen von Probanden, die das Nukleinsäuremolekül nach einem der Ansprüche 1 bis 14 tragen, zur Bestimmung der Affinität, der Avidität und/oder Reaktivität von monoklonalen anti-D-Antikörpern oder von polyklonalem anti-D- oder von Antiglobulin- oder von Antihumanglobulin-Antiseren oder Zubereitungen davon.
- 40
37. Verfahren zur Charakterisierung von monoklonalen Antikörpern oder polyklonalen Antiseren oder einer Zubereitung davon, umfassend
- 45
- (a) Testen des Nukleinsäuremoleküls einer Probe eines Probanden auf das Vorhandensein einer Mutation, wie in einem der Ansprüche 1 bis 14 definiert;
- (b) Korrelieren der Nukleinsäure mit der Dichte des Proteinprodukts des *RHD*-Gens auf der Oberfläche von roten Blutkörperchen des Probanden auf der Grundlage der Mutation und des Allel-Status des *RHD*-Gens;
- 50
- (c) Durchführen einer Reaktion der monoklonalen Antikörper oder der polyklonalen Antiseren oder der Zubereitung davon mit einer Zelle, die das Proteinprodukt des *RHD*-Gens auf ihrer Oberfläche trägt;
- (d) Charakterisieren der monoklonalen Antikörper oder der polyklonalen Antiseren oder der Zubereitung davon auf der Grundlage der in Schritt (c) erhaltenen Ergebnisse.
- 55
38. Verfahren nach Anspruch 37, wobei die Charakterisierung die Bestimmung der Reaktivität, der Sensitivität, der Avidität, der Spezifität der Affinität und/oder anderer Eigenschaften von Antikörpern und Antiseren umfasst.
39. Verfahren nach Anspruch 37 oder 38, wobei die Zelle, die das Proteinprodukt des *RHD*-Gens auf ihrer Oberfläche trägt, ein rotes Blutkörperchen ist.
40. Verfahren zur Bestimmung, ob ein Patient, der eine Bluttransfusion benötigt, mit RhD-negativem Blut eines Spenders transfundiert werden soll, umfassend den Schritt des Testens auf das Vorhandensein von einem oder mehreren Nukleinsäuremolekülen nach einem der Ansprüche 1 bis 14 in einer Probe des Patienten, wobei ein positiver Test für zwei verschiedene dieser Nukleinsäuremoleküle anzeigt, dass eine Transfusion mit Rh-negativem Blut notwendig ist.
41. Verfahren zur Einschätzung des Risikos einer RhD-negativen Mutter, einen RhD-positiven Fötus zu empfangen oder zu tragen, oder des Risikos einer Mutter, die einen anti-D-Titer aufweist, einen Fötus zu empfangen oder zu

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tragen, welcher ein Risiko trägt, eine hämolytische Erkrankung von Neugeborenen zu entwickeln, umfassend das Untersuchen einer Probe des Vaters des Fötus auf das Vorhandensein eines oder mehrerer Nukleinsäuremoleküle, wie in einem der Ansprüche 1 bis 14 definiert.

- 5 **42.** Zubereitung umfassend den Antikörper oder das Aptamer oder den Phagen nach Anspruch 17.
- 43.** Verfahren zur Identifizierung einer V_H - oder V_L -Kette eines Antikörpers oder einer Kombination davon oder eines Aptamers, die/das spezifisch an ein Proteinprodukt des *RHD*-Gens nach Anspruch 15 bindet, umfassend
- 10 (a) Inkontaktbringen des Proteinprodukts des *RHD*-Gens nach Anspruch 15 mit einer Phagenbibliothek, die V_H - oder V_L -Ketten oder Kombinationen davon auf der Oberfläche der Phagen präsentiert, oder mit Aptameren;
(b) Identifizieren der Phagen oder der Aptamere, die an das Proteinprodukt binden; und wahlweise
(c) Einmaliges oder mehrmaliges Wiederholen der Schritte (a) und (b).
- 15 **44.** Verfahren zur Identifizierung eines monoklonalen Antikörpers, der spezifisch an ein Proteinprodukt des *RHD*-Gens nach Anspruch 15 bindet, umfassend
- (a) Inkontaktbringen des Proteinprodukts nach Anspruch 15 mit einem oder mehreren monoklonalen Antikörpern;
20 (b) Identifizieren monoklonaler Antikörper, die an das Protein binden; und wahlweise
(c) Einmaliges oder mehrmaliges Wiederholen der Schritte (a) und (b).
- 45.** Verfahren zur Identifizierung einer V_H - oder V_L -Kette eines Antikörpers oder einer Kombination davon oder eines Aptamers, die/das spezifisch an ein Proteinprodukt des *RHD*-Gens nach Anspruch 15 bindet, umfassend
- 25 (aa) Inkontaktbringen des Proteinprodukts; und
(ab) eines normalen D-Polypeptids,
wobei das normale D-Polypeptid in einer molaren Masse vorhanden ist, die höher, gleich oder niedriger ist als die des Proteinprodukts des *RHD*-Gens gemäß (aa), mit einer Phagenbibliothek, die V_H - oder V_L -Ketten oder
30 Kombinationen davon auf der Oberfläche der Phagen präsentiert, oder mit Aptameren;
(b) Identifizieren der Phagen oder der Aptamere, die an das Proteinprodukt gemäß (aa) binden; und wahlweise
(c) Einmaliges oder mehrmaliges Wiederholen der Schritte (a) und (b).
- 46.** Verfahren zur Identifizierung eines monoklonalen Antikörpers, der spezifisch an ein Proteinprodukt des *RHD*-Gens nach Anspruch 15 bindet, umfassend
- 35 (aa) Inkontaktbringen des Proteinprodukts des *RHD*-Gens; und
(ab) eines normalen D-Polypeptids,
wobei das normale D-Polypeptid in einer molaren Masse vorhanden ist, die höher, gleich oder niedriger ist als die des Proteinprodukts des *RHD*-Gens gemäß (aa), mit einem oder mehreren monoklonalen Antikörpern;
40 (b) Identifizieren monoklonaler Antikörper, die an das Proteinprodukt des *RHD*-Gens gemäß (aa) binden; und wahlweise
(c) Einmaliges oder mehrmaliges Wiederholen der Schritte (a) und (b).
- 47.** Verfahren nach einem der Ansprüche 43 bis 46, wobei das Proteinprodukt des *RHD*-Gens auf der Oberfläche einer Zelle exponiert ist.
- 48.** Verfahren nach einem der Ansprüche 43 bis 47, wobei das Polypeptid oder die Wirtszelle an einen festen Träger gebunden ist.
- 50 **49.** Verfahren nach einem der Ansprüche 43 bis 48, wobei nach Schritt (b) oder (c) der folgende Schritt durchgeführt wird:
- (d) Identifizieren der Aminosäuresequenz der V_H - oder V_L -Ketten und/oder Identifizieren der Nukleinsäuresequenz, die die Aminosäuresequenz kodiert.
- 55 **50.** Verfahren nach einem der Ansprüche 43 bis 46, wobei für den Fall, dass nur eine Selektionsrunde für die Identifizierung durchgeführt wird, die Anzahl der Protein-Moleküle des *RHD*-Gens gemäß (a) in molarem Überschuss zu der Anzahl der Phagenpartikel ist.

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51. Verwendung von Zellen, vorzugsweise roten Blutkörperchen, die das Proteinprodukt des *RHD*-Gens nach Anspruch 15 umfassen, aus Probanden zur Bestimmung der Affinität, der Avidität und/oder der Reaktivität von monoklonalem anti-D nach Anspruch 17 oder von polyklonalem anti-D oder Antiglobulin- oder Antihumanglobulin-Antisera oder Zubereitungen davon.

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52. Kit umfassend

(a) das Oligonukleotid nach Anspruch 16, und/oder

(b) den Antikörper nach Anspruch 17; und/oder

10 (c) den Aptamer nach Anspruch 17; und/oder

(d) den Phagen nach Anspruch 17; und/oder

(e) ein Primerpaar, das für die Amplifikationsreaktion nach einem der Ansprüche 20 und 25 einsetzbar ist.

15 **Revendications**

1. Molécule d'acide nucléique qui est un gène *RHD* comprenant une substitution d'un seul nucléotide au niveau d'un site d'épissage 5' ou 3', dans laquelle ladite substitution donne naissance à une mutation dans une séquence de 4 nucléotides, une séquence de 6 nucléotides ou une séquence de 8 nucléotides comprenant le site d'épissage consensus à la limite exon9/intron9 ou à la limite exon3/intron3 et dans laquelle ladite molécule d'acide nucléique correspond à un phénotype Del.

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2. Molécule d'acide nucléique selon la revendication 1, dans laquelle ladite substitution donne naissance à une mutation *RHD*(K409K).

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3. Molécule d'acide nucléique selon la revendication 2, dans laquelle ladite substitution est une substitution au niveau du site d'épissage 5' de l'intron 9 de AGgt à AAg.

4. Molécule d'acide nucléique selon la revendication 1, dans laquelle ladite substitution donne naissance à une mutation *RHD*(G468+1)A.

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5. Molécule d'acide nucléique selon la revendication 4, dans laquelle ladite substitution est une substitution au niveau du site d'épissage 5' de l'intron 3 de ACgt à ACat.

6. Molécule d'acide nucléique qui est un gène *RHD* comprenant une substitution d'un seul nucléotide dans la région codante du gène *RHD* ou au niveau d'un site d'épissage 5' ou 3', dans laquelle ladite substitution de nucléotide donne naissance à un codon stop au codon 16, à un codon stop au codon 330, à une mutation faux-sens au codon 212 ou à une mutation dans une séquence de 4 nucléotides, une séquence de 6 nucléotides ou une séquence de 8 nucléotides comprenant le site d'épissage consensus à la limite exon8/intron8, dans laquelle ladite molécule d'acide nucléique correspond à un phénotype *RHD* négatif.

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7. Molécule d'acide nucléique selon la revendication 6, dans laquelle ladite substitution donne naissance à une mutation *RHD*(W16X).

8. Molécule d'acide nucléique selon la revendication 7, dans laquelle ladite substitution est une substitution G → A au niveau du nucléotide 48.

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9. Molécule d'acide nucléique selon la revendication 6, dans laquelle ladite substitution donne naissance à une mutation *RHD*(Y330X).

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10. Molécule d'acide nucléique selon la revendication 9, dans laquelle ladite substitution est une substitution C → G au niveau du nucléotide 985.

11. Molécule d'acide nucléique selon la revendication 6, dans laquelle ladite substitution donne naissance à une mutation faux-sens *RHD*(G212V).

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12. Molécule d'acide nucléique selon la revendication 11, dans laquelle ladite substitution est une substitution G → T au niveau du nucléotide 635.

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13. Molécule d'acide nucléique selon la revendication 6, dans laquelle ladite substitution donne naissance à une mutation *RHD*(G1153(+1)A).
- 5 14. Molécule d'acide nucléique selon la revendication 13, dans laquelle ladite substitution est une substitution au niveau du site d'épissage 5' de l'intron 8 de AGgt à AGat.
15. Produit protéique du gène *RHD* codé par la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 5.
- 10 16. Oligonucléotide comprenant de 12 à 50 nucléotides s'hybridant dans des conditions stringentes à une partie de la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14, dans lequel ladite partie comprend ladite mutation (faux-sens) ou ledit codon stop, ou à la partie complémentaire de celle-ci.
- 15 17. Anticorps ou aptamère ou phage liant de façon spécifique un produit protéique du gène *RHD* selon la revendication 15.
18. Méthode pour tester la présence d'une molécule d'acide nucléique codant un antigène Rhésus D mutant tel que **caractérisée par** la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14 dans un échantillon comprenant l'hybridation de l'oligonucléotide selon la revendication 16 dans des conditions stringentes à des molécules d'acide nucléique comprises dans l'échantillon obtenu à partir d'un humain et la détection de ladite hybridation.
- 20 19. Méthode selon la revendication 18, comprenant en outre la digestion du produit de ladite hybridation avec une endonucléase de restriction et l'analyse du produit de ladite digestion.
- 25 20. Méthode pour tester la présence d'une molécule d'acide nucléique codant un antigène Rhésus D mutant tel que **caractérisée par** la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14 dans un échantillon, comprenant la détermination de la séquence d'acide nucléique d'au moins une partie de la structure moléculaire d'acide nucléique ou de la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14, ladite partie codant ladite mutation (faux-sens) ou ledit codon stop.
- 30 21. Méthode selon la revendication 20 comprenant en outre, avant la détermination de ladite séquence d'acide nucléique, l'amplification d'au moins ladite partie de ladite molécule ou structure d'acide nucléique.
- 35 22. Méthode pour tester la présence d'une molécule d'acide nucléique codant un antigène Rhésus D mutant tel que **caractérisée par** la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14 dans un échantillon, comprenant la réalisation d'une réaction d'amplification en utilisant un ensemble d'amorces qui amplifie au moins une partie de ladite séquence, dans laquelle au moins l'une des amorces utilisées dans ladite réaction d'amplification est l'oligonucléotide selon la revendication 16.
- 40 23. Méthode selon la revendication 21 à 22, dans laquelle ladite amplification est réalisée par, ou ladite réaction d'amplification est, l'amplification en chaîne par polymérase (PCR).
24. Méthode selon la revendication 23, dans laquelle ladite PCR est une PCR-RFLP, PCR-SSP ou PCR longue distance.
- 45 25. Méthode selon l'une quelconque des revendications 21 à 24, dans laquelle le poids moléculaire du produit d'amplification est analysé.
- 50 26. Méthode pour tester la présence de la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14 codant des allèles positifs vis-à-vis de *RHD*, comprenant les étapes suivantes :
- (a) isolement de l'ADN provenant d'un échantillon de sang ou d'un donneur de sang ;
- (b) hybridation d'au moins deux amorces orientées de manière opposée, dans des conditions stringentes, à l'ADN de manière à réaliser une PCR ;
- (c) amplification de la séquence cible ;
- 55 (d) séparation des produits d'amplification sur un gel ; et
- (e) analyse des amplicons,

dans laquelle lesdits allèles positifs vis-à-vis de *RHD* sont dérivés à partir d'un échantillon RhD négatif sur le plan

sérologique.

27. Méthode selon la revendication 26, dans laquelle ledit échantillon est choisi à partir d'une population Caucasienne.
- 5 28. Méthode pour tester la présence d'un produit protéique du gène *RHD* selon la revendication 15 dans un échantillon comprenant l'évaluation d'un échantillon obtenu à partir d'un humain pour la liaison spécifique avec l'anticorps ou l'aptamère ou le phage selon la revendication 17.
- 10 29. Méthode pour tester la présence d'un produit protéique du gène *RHD* codant la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 5 dans un échantillon comprenant l'utilisation des méthodes d'agglutination directe, des tests indirects à l'antiglobuline, des anticorps monoclonaux anti-D et/ou des techniques d'adsorption/élution.
- 15 30. Méthode selon l'une quelconque des revendications 18 à 29, dans laquelle ledit échantillon est du sang, sérum, plasma, tissu foetal, salive, urine, tissu muqueux, mucus, tissu vaginal, peau, cheveu, follicule capillaire ou autre tissu humain.
- 20 31. Méthode selon la revendication 30, comprenant l'enrichissement en cellules foetales ou l'extraction de l'ADN ou l'ARNm foetal, à partir du tissu maternel, comme le sang périphérique, le sérum ou le plasma.
- 25 32. Méthode selon l'une quelconque des revendications 18 à 31, dans laquelle ladite molécule d'acide nucléique ou ledit matériel protéique provenant dudit échantillon est fixé à un support solide.
- 30 33. Méthode selon la revendication 32, dans laquelle ledit support solide est une puce.
- 35 34. Utilisation de la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14 pour l'analyse d'un phénotype Rhésus D négatif ou positif.
- 30 35. Utilisation de la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14 ou du produit protéique du gène *RHD* selon la revendication 15 pour l'évaluation de l'affinité, l'avidité et/ou la réactivité d'anticorps monoclonaux ou d'antisérums polyclonaux, de préférence des antisérums-D, des antisérums anti-globuline ou anti-globuline-humaine.
- 35 36. Utilisation de cellules, de préférence des globules rouges de postulants portant la molécule d'acide nucléique selon l'une quelconque des revendications 1 à 14 pour l'évaluation de l'affinité, l'avidité et/ou la réactivité d'anticorps monoclonaux anti-D ou d'antisérums polyclonaux anti-D, anti-globuline ou anti-globuline-humaine, ou de préparations de ceux-ci.
- 40 37. Méthode de caractérisation des anticorps monoclonaux ou des antisérums polyclonaux ou des préparations de ceux-ci, ladite méthode comprenant
- 45 (a) le test d'une molécule d'acide nucléique d'un échantillon d'un postulant pour la présence d'une mutation telle que définie dans l'une quelconque des revendications 1 à 14 ;
- (b) la corrélation, sur la base de la mutation et du statut allélique du gène *RHD*, de l'acide nucléique avec la densité du produit protéique du gène *RHD* sur la surface des globules rouges dudit postulant ;
- (c) la réaction desdits anticorps monoclonaux ou antisérums polyclonaux ou de ladite préparation de ceux-ci avec une cellule portant le produit protéique du gène *RHD* à sa surface ;
- (d) la caractérisation desdits anticorps monoclonaux ou antisérums polyclonaux ou de ladite préparation de ceux-ci sur la base des résultats obtenus à l'étape (c).
- 50 38. Méthode selon la revendication 37, dans laquelle ladite caractérisation comprend la détermination de la réactivité, la sensibilité, l'avidité, la spécificité d'affinité et/ou d'autres caractéristiques des anticorps et antisérums.
- 55 39. Méthode selon la revendication 37 ou 38, dans laquelle ladite cellule portant le produit protéique du gène *RHD* à sa surface est un globule rouge.
40. Méthode pour déterminer si un patient nécessitant une transfusion sanguine doit être transfusé avec du sang négatif vis-à-vis de RhD provenant d'un donneur, comprenant l'étape de tester un échantillon provenant dudit patient vis-

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à-vis de la présence d'une ou plusieurs molécules d'acide nucléique selon l'une quelconque des revendications 1 à 14, dans laquelle un test positif pour deux desdites molécules d'acide nucléique différentes indique le besoin d'une transfusion avec du sang négatif vis-à-vis de Rh.

- 5
41. Méthode pour évaluer le risque pour une mère RhD négative de concevoir ou porter un foetus RhD positif, ou du risque pour une mère ayant un titre anti-D de concevoir ou porter un foetus risquant de développer une maladie hémolytique du nouveau-né, comprenant l'évaluation d'un échantillon obtenu à partir du père du foetus pour la présence d'une ou plusieurs molécules d'acide nucléique telles que définies dans l'une quelconque des revendications 1 à 14.
- 10
42. Préparation comprenant l'anticorps ou l'aptamère ou le phage selon la revendication 17.
43. Méthode d'identification d'une chaîne V_H ou V_L d'anticorps ou une combinaison de celles-ci, ou un aptamère liant de façon spécifique un produit protéique du gène *RHD* selon la revendication 15 comprenant
- 15
- (a) la mise en contact du produit protéique du gène *RHD* selon la revendication 15 avec une banque de phages présentant des chaînes V_H ou V_L ou des combinaisons de celles-ci à la surface du phage ou avec des aptamères ;
 - (b) l'identification du phage ou d'aptamères qui lient ledit produit protéique; et éventuellement
 - (c) la répétition des étapes (a) et (b) une ou plusieurs fois.
- 20
44. Méthode d'identification d'un anticorps monoclonal liant de façon spécifique un produit de protéine du gène *RHD* selon la revendication 15 comprenant
- (a) la mise en contact du produit protéique du gène *RHD* selon la revendication 15 avec un ou plusieurs anticorps monoclonaux ;
 - (b) l'identification des anticorps monoclonaux qui lient ladite protéine ; et éventuellement
 - (c) la répétition des étapes (a) et (b) une ou plusieurs fois.
- 25
45. Méthode d'identification d'une chaîne V_H ou V_L d'anticorps ou une combinaison de celles-ci, ou un aptamère liant de façon spécifique un produit protéique du gène *RHD* selon la revendication 15 comprenant
- 30
- (aa) la mise en contact du produit protéique; et
 - (ab) d'un polypeptide D normal dans laquelle le polypeptide D normal est présent en une masse molaire qui est supérieure, égale ou inférieure au produit protéique du gène *RHD* selon (aa) avec une banque de phages présentant des chaînes V_H ou V_L ou des combinaisons de celles-ci à la surface du phage ou avec des aptamères ;
 - (b) l'identification du phage ou d'aptamères qui lient ledit produit protéique du gène *RHD* selon (aa) ; et éventuellement
 - (c) la répétition des étapes (a) et (b) une ou plusieurs fois.
- 35
46. Méthode d'identification d'un anticorps monoclonal liant de façon spécifique un produit protéique du gène *RHD* selon la revendication 15 comprenant
- (aa) la mise en contact du produit protéique du gène *RHD* ; et
 - (ab) d'un polypeptide D normal dans laquelle le polypeptide D normal est présent en une masse molaire qui est supérieure, égale ou inférieure au produit protéique du gène *RHD* selon (aa) avec un ou plusieurs anticorps monoclonaux ;
 - (b) l'identification des anticorps monoclonaux qui lient ledit produit protéique du gène *RHD* selon (aa) ; et éventuellement
 - (c) la répétition des étapes (a) et (b) une ou plusieurs fois.
- 40
47. Méthode selon l'une quelconque des revendications 43 à 46, dans laquelle le produit protéique du gène *RHD* est exposé à la surface d'une cellule.
- 45
48. Méthode selon l'une quelconque des revendications 43 à 47, dans laquelle le polypeptide ou la cellule hôte est fixé à un support solide.
- 50
- 55

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49. Méthode selon l'une quelconque des revendications 43 à 48, dans laquelle, à la suite de l'étape (b) ou (c), l'étape suivante est réalisée :

5

(d) l'identification de la séquence d'acides aminés des chaînes V_H ou V_L et/ou l'identification de la séquence d'acide nucléique codant ladite séquence d'acides aminés.

50. Méthode selon l'une quelconque des revendications 43 à 46, dans laquelle, dans le cas où un seul cycle de sélection est utilisé pour l'identification, le nombre de molécules protéiques du gène *RHD* selon (a) est en excès molaire par rapport au nombre de particules de phage.

10

51. Utilisation de cellules, de préférence des globules rouges comprenant le produit protéique du gène *RHD* selon la revendication 15, à partir de proposant pour l'évaluation de l'affinité, l'avidité et/ou la réactivité d'anti-D monoclonaux selon la revendication 17 ou d'anti-D polyclonaux ou d'antisérums anti-globuline ou anti-globuline-humaine ou de préparations de ceux-ci.

15

52. Kit comprenant

(a) l'oligonucléotide selon la revendication 16, et/ou

(b) l'anticorps selon la revendication 17 ; et/ou

20

(c) l'aptamère selon la revendication 17 ; et/ou

(d) le phage selon la revendication 17 ; et/ou

(e) une paire d'amorces utile pour réaliser la réaction d'amplification selon l'une quelconque des revendications 20 et 25.

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Fig. 1

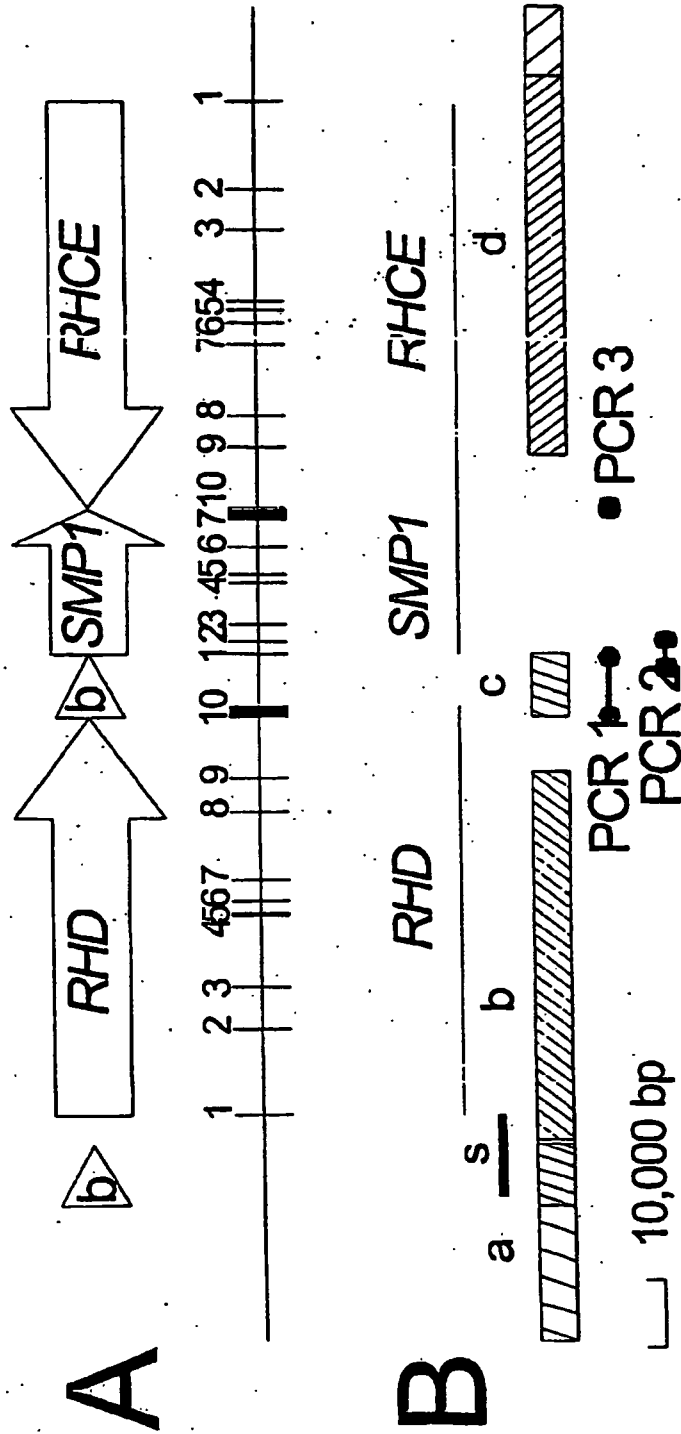


Fig. 2

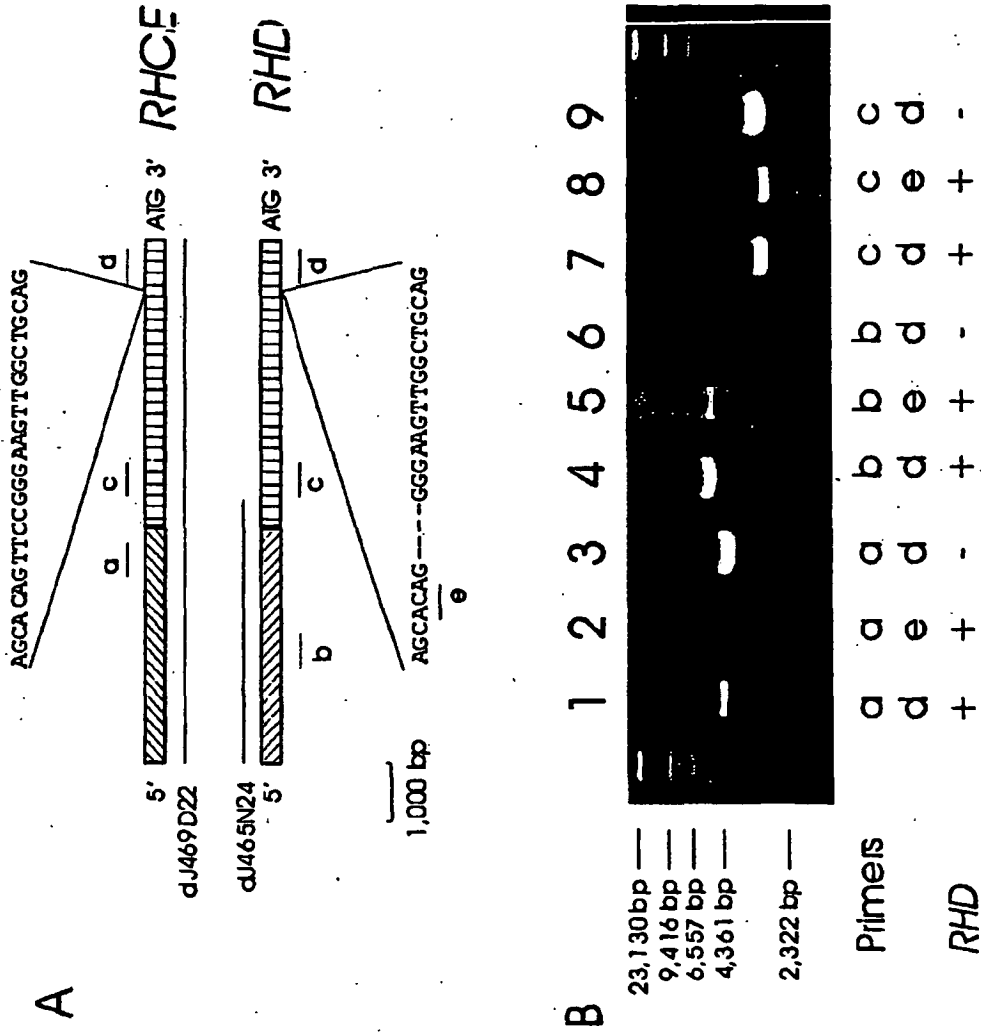


Fig. 3

```

-- Rhesus box ----->
gcatgcgactgagccgggtggtgactgctgcatccgggtgctctg

      <- SMP1 Exon 1 (91 bp, 5'UTR)-----
gaggctgtggccgttttgttcttctggctaaatcgggggagtgagggcggg

-- SMP1 Exon 1 -----><--- Intron ~ 2,000 bp
...actgcacgacgggctggactgacgt.....

Intron ---><--- SMP1 Exon 2 (106 bp, 93 translated)-----
.....,agctgaaaaaaATGCTGGATTCTAGAGGGCTTGAGATGCTCAG...

-- SMP1 Exon 2 -----><--- Intron ~ 2,500 bp
...GCTTCCATTGCTGGTGTACTAGt...

Intron ---><--- SMP1 Exon 3 (113 bp, all translated)-----
.....agTTTTTACAGGCTGGATTATCATAGATGCAGCTGTATT...

-- SMP1 Exon 3 -----><--- Intron ~ 8,000 bp
..TATAGCAACCATAGCCTTCCCTAATgt.....

Intron ---><--- SMP1 Exon 4 (68 bp, all translated)-----
.....agGATTAATGCAGTATCGAATGGACAAGTCCGAGGTGATAGTTA...

-- SMP1 Exon 4 -----><--- Intron ~ 1,400 bp
...TGAAGGTTGCTGGGTCAAAACAGgt.....

```

Fig. 3 cont.

```

Intron -----><---- SMP1 Exon 5 (93 bp, all translated)-----
.....agGTGCTCGCATTGGCTTTTCGGTTGGTTTCATGTTGGCCCTTG...

-- SMP1 Exon 5 -----><---- Intron ~ 4,000 bp
...TTTTGGAGGTTATGTTGCTAAAGgt.....

Intron -----><---- SMP1 Exon 6 (61 bp, all translated)-----
.....agAAAAAGACATAGTATACCCCTGGAATTGCTGTATTT.....

-- SMP1 Exon 6 -----><---- Intron ~ 4,000 bp
...TCCAGAATGCCCTTCATCTTTTTTGgt

Intron -----><---- SMP1 Exon 7 (1,703 bp, 47 translated)----
.....agGAGGGCTGGTTTTTAAGTTGGCCGCACTGAAGACTTATGGCAGT

<----- RHCE Exon 10 -----
-- SMP1 Exon 7 -----
GAaac....agcatcatcctaataatgaaactaaacatttattttaaac

----- RHCE Exon 10 -----
----- SMP1 Exon 7 ---->
ttattaaattgactcttaaaactaagtttttagtcttttaatttttaataatcaa

>---- Homology with RHD -
-- RHCE Exon 10 -----
atctgtctctgacctgtttcattatatacataaggagctttgctgtcatgagcggttc

```

Fig. 3 cont.

```

----- Homology with RHD -----
----- RHCE Exon 10 -----
tcacgtacaaatgcaggcaacacagtgagaggaagtgtcttgtt

--- Homology with RHD ---
--- RHCE Exon 10 ---
tttgaacaggccttgtttttcttggatgcttttgcTTAAAAATCCAACAGCCCAAAATGAGG

```

Fig. 4



Fig. 5

attcactatcacaagaacagcagcggttaa

 --***g*****

-----rez7----->

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ccactgggtccctcccacaacgcatgggaattcaggatgagattt

gggtagggacacaaccaaccctatcattccaccatggcccctcccaa

ttcatgtcctcacattcaaaaccaatcacaccatcccacagtcctc

aaagtcttaaatgatttcagcatttaactcaaaagtcacagtcctaatgtc

Fig. 5 cont.

tcattctgagacaaggcaagtccttccatttatgagcctataaaatccaa

 *****c*****

agcaagttagttacttccttagatatacaaatgggggtacaggcattgggtaaa

 *****a*****

tacagccattccaaatgggataaatgggtcaaaacaagagggtacaggc

ccatgagagtcctcaaaatccagtgaggcagtcataatcttaaaagctccaaaat

gatctcct-ttgactccacatctcacatccagggtcacgcagatggaagg

 *****c*****

ggtgggtcccatgggtcttgggcagctctgcccctgtaccctttgcaggggt

Fig. 5 cont.

acagcctccctctcagctgcttcatgggctggcatgagtgctgcagc

 *****a*
 ^^^^

ttttccaggtacacggtgcaagctgcggtgcatcaccattctggggtc

tgaggacctctctcacagctccactaggtggcccagtaggactg

tgtgtgggtctctgacccacatttccctctgcactgccctggcagag

gatctccatgaggccctgctcctgcagcaacttctgactggcatcca

 *****c
 ^^^^

ggcattccgcacatcctctttaatctagggaagttccaaccccaa

 *****g

Fig. 5 cont.

ctgttactcatgcaaatctctgcagccagcttgaatttctcctcagaaaa

^^^
 ^^

tggaattttcttatcacattgtcaggctgcaaatctccgaactt

ttatgctctgctcccttataaaactgaatgtcttaacagcaccgaag

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aaatgccgccagatcttgctaaaacataacaagagtccttctcc

Fig. 5 cont.

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Fig. 5 cont.

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Fig. 5 cont.

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<-- identity region-->

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ctccattttatctgcaaaagacaacatttaagtcaccaaaaaggtaaa

Fig. 5 cont.

gataaacctcctgagtggtgaagaactgtccatttaaaacaggctatag
*****g*****
*****g*****

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tatcccgccaaaac---aaaaaccctaaa
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*gca*****aac*****a*****
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Fig. 6

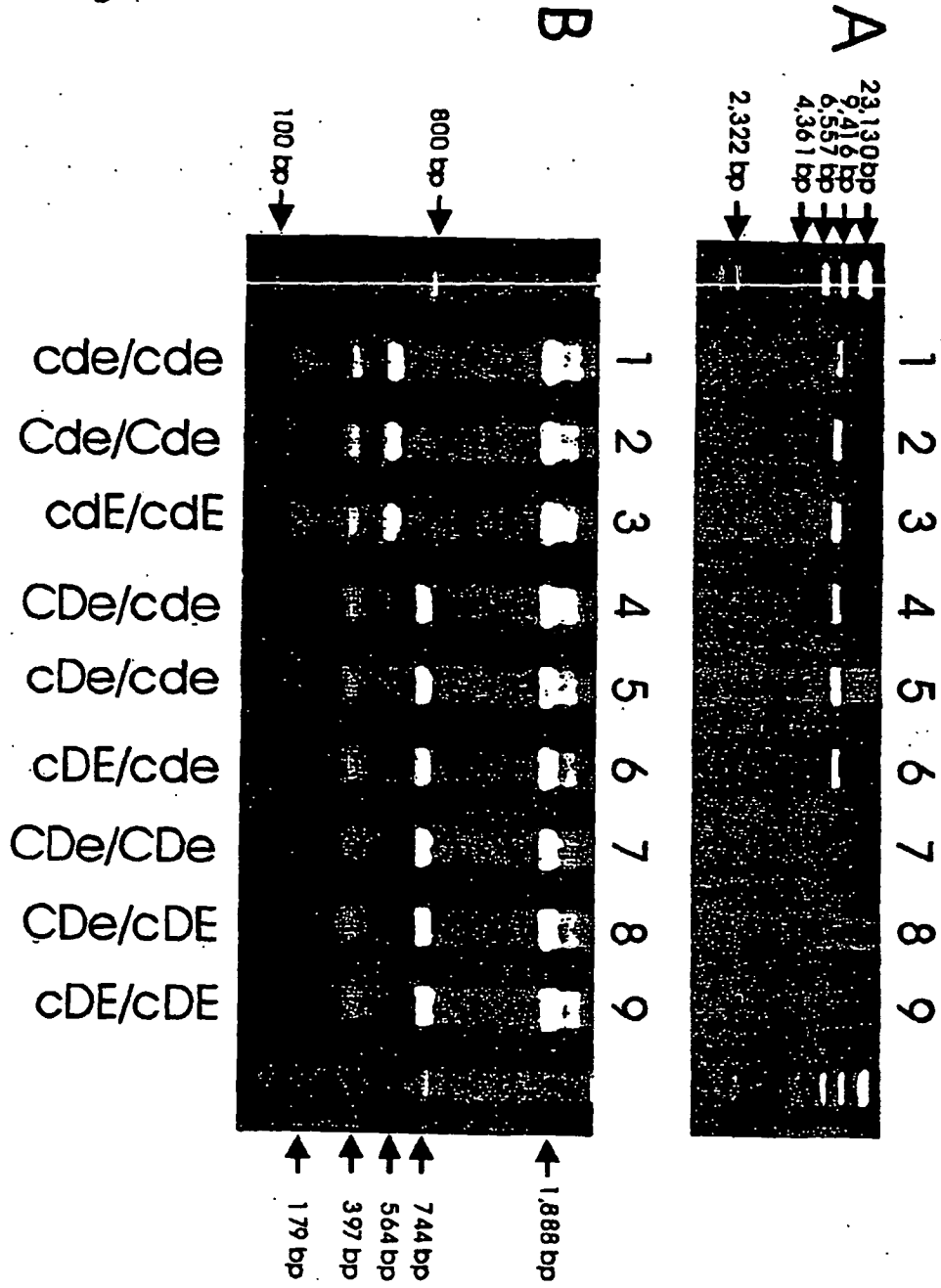


Fig. 7

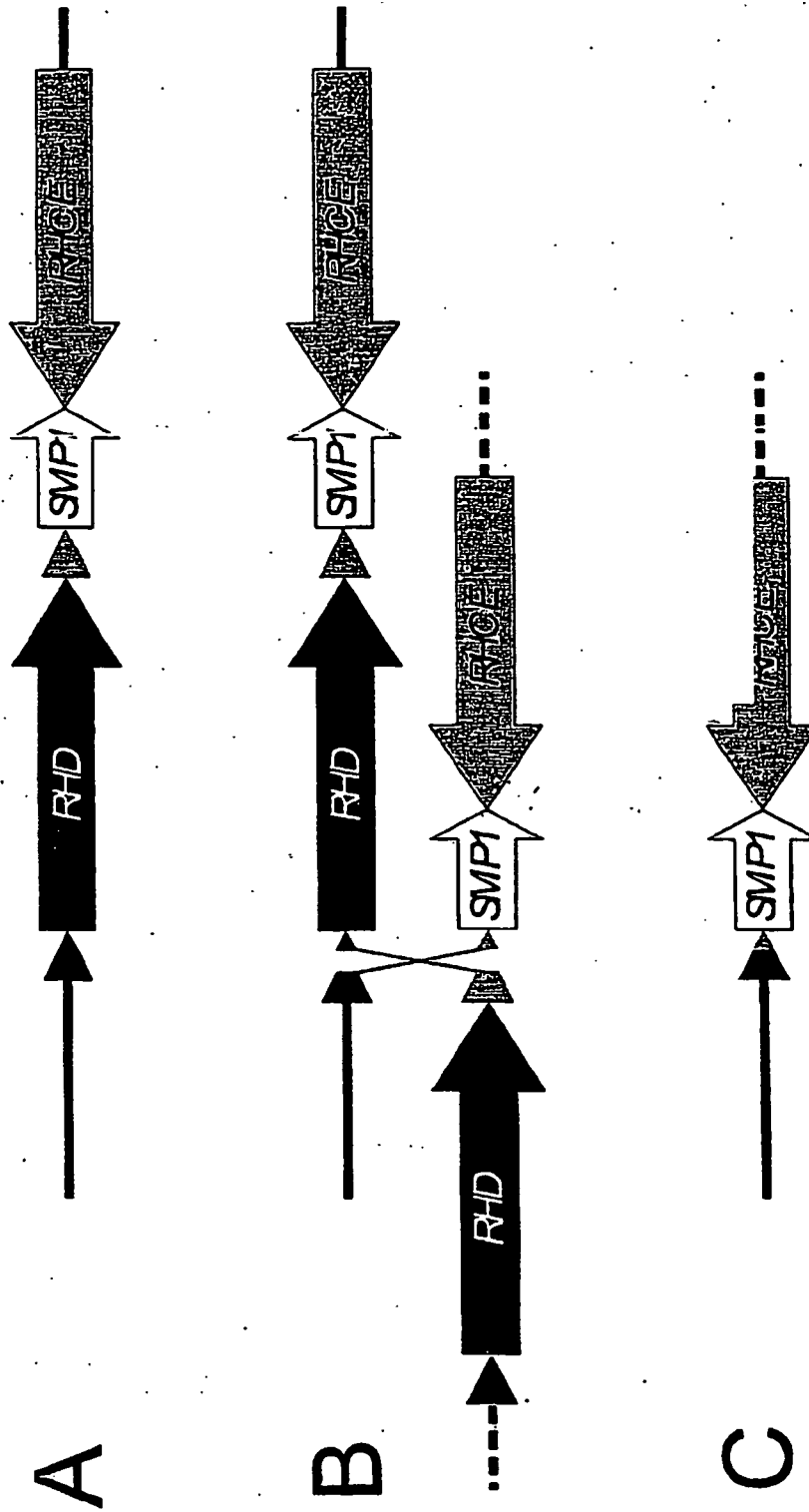


Fig. 8

Hybrid Rhesus box of RHD negatives

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 (start of Rhesus box)
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Fig. 8 cont.**Hybrid Rhesus box of RHD negatives**

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Fig. 8 cont.**Hybrid Rhesus box of RHD negatives**

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 gggagactaaggagacataacaattaactgtaatgtggtattctggaggggatcctggaaca
 gaaaaagacattaggcaaaaaactaaagaaatctgaataaaaatgtggatgtcagttaataat
 aatgtatcatattagtcagtaattgtaacaaatatacccaataatgaaagccattaattat
 agggaaaatggaggggttaatatgggtggctggcttttctatttctagcagctccatttta
 tctacaaaagacaaacattcattaagtcccaaaaaggtaaagaatgacaaattaagcatgta
 tcttattagtaagagtaataaaaagatgctcactcatatttataaatatttgacaatgatgt
 taaggccagaaaaagagaaaaaagggtaggggcaaaaaacgcaaagagaaaggagtagtatac
 ttttctcccgcactcattagctattaaaagaggatgtttgtttaaagctgctcagagctgg
 aaactaatgttaagtcactaacgggaatttaaaaggtttcattaagaactgcctgcactaga
 ttccctccaccctgagacattaacaatcacgataaacctcctgagtggttaagaacgtgtcca
 ttaaaaaacaggctatagattgtcatgcagttttatctactaatcggctaatagcaccgcaa
 aaacaaacaaaaaaacccaaaggatgaaagtttcatccatcaaaggaaacaacagtcacct
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 cagctaccggacagggaccaaggagggtaccgagcacctcccggaccggcggtgcaggat
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 gcaaggagacctcgacctgctccctctccggggctggatctgactccttgacgggtgattcc
 agacgcgagacccaaactgacggcttctagaagagggggcgagcccggccgaagtctttcac

Fig. 8 cont.

Hybrid Rhesus box of RHD negatives

gtagctaagtcacgcttgcttccggcttcttaccgttctccccttgtaaacgggttacctcc
 cgaaaaccaggctctcctccaacagtggttctcaagcgaggcgatcttccccgggagggga
 tatttgcaaagtctgggggcatttttggttcaactggggctgctacttgcacccactgggta
 gaggcgggggatgcagctacacaacctgogaagcagggacagcaccctcccaaccagac
 agaattagccggcccaaacctcagtagtgccaggctgagaaaccctgccttaaacaaca
 acaaagaaaggccaagtccataagtgggtcaccgcgcccagactgggggtccacgggacacc
 ccagccacgccaagccgggaagtccccgcctcctggagctgaaccgcccctctcccagagg
 tggagctgccccgggggagcaggcaccggagaaatcccccaagactaaaaagtccctgacta
 gcgctgtgtggccgcaaacctgaaccaccttttgaccacgcgggaccggaactcttct
 gccaccacccctgagagggctgcgcggccgacccagtagtaaaaactcgtcacctca
 ctcaagacgggtacgaaggccaacggacgccttctttagaacgctcagcacacagagcaac
 ttctcagcctactctcaaatggcgtactccaaactagcactcccgacgtccagctgtgaac
 ccagagcggcggaaagcccctgaaccagcgcggggcatgagcagacgcgttgtgtggtg
 ggcgtggctccctccggaccggcgcggccctccgcccgtgtccgcatgagcagactgag
 ccgggtggatggtactgctgcatccgggtgtctg
 (end of Rhesus box)
 gaggctgtggccgttttggtttcttggtataaatcgggggagtgaggcgggcccggcggc
 3'

Fig. 9

Upstream Rhesus box of D-positives

5' ctagaaaacactttgtcatttttagaggtgtta
 (start of Rhesus box)
 tccaatgttcgcgccaggcactggagtcagagaaaatggagttgaatcctttctctgccactc
 ttgaggagaatctcaccatttattatgcactgtagaatacaacaataaaatacagccatgt
 accacataacaacatcttggtaaacaacagactgcatatgatgggtggatccagtaagc
 taaggtaatttattattattccctttttttttcttttttttgagatgtagtcttactctg
 tcaaccaggctagagtgcaatggcaccatcttggtcactgcaacctctgacctcctgggtc
 aagcqaatctcctgcctcagctcggagtagctgggaattapagycacccaccacatctgg
 ctaattttttgtatttttagtaaagatggggttcaccatgttggccaggctgatctcaaac
 tctgacctcaagtgatctgacctgcctcggcctcccaaagtgctgggaccataggcctgagc
 cactgtgccggccttggttgctttttaacagttaacagtgctcatagaaactgctttg
 acatgactgcaatcatgtgcttcatagaaacttaattagattataccactagagcttccaga
 tttttataactttttttttgaaacggagtctcactctgtcaccaggctggagtgagtgccg
 caatctcagctcggcgcaacctccgctccagggtcaagtgattctcctgcctcagcctcc
 cgagtagctgggattacaagtgacactaccacgcccagctaatttttgattttactaga
 cagggttcaccatgttggctaggatagttcaccaggatctctggcctcatgatcagcct
 gcctcggcctcccaaagtgctgggattacaggtgtgagccaccgtgccagcctatacttcc
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 gattcaggcttccactgagaccaaggggagaacctgggtgcaggacaaacagacggacagcg
 tgtggcagtggttaaatgctcttctgaaggctgatacgacagctctctgtgactgattgca
 taagcatcccaagattatattattgttttctattgctatgtgtcacactttgccaacagga
 tgtggaaaatgaataagcgggttttcttaggcacttcttaacagacaattgggtcaaaatgaac
 tccattgcttaagaaacacataaacaccatttagtcaactgaatatagctatatgtatgggtg
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 aagcactatttgacgaaagagaaccaatctatcaattacaactcacataattttacagat
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 aaggtgccggcaaggctggtttctgggtgagacctctctccctgtcttgagatggctgcctc
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 tactatcacaagaactttgctctgagaaaaatgtgatttctttctttttttttttttttga
 gacagagctcactctgtcaccaggctggagtgagtgcaatctcggctcactgcaat
 ctccgctccagggttcacgccattctctgacctcagctctcccgagtagctgggcctacagg

Fig. 9 cont.**Upstream Rhesus box of D-positives**

cgccccccaccctgccagctaattttttgtattttagtagagacggggttccaccatggt
 agccaggatgggtctcaatctcctgacctcgtgatccacctgcctcagcctcccaaagtgctg
 ggattacaggcatgagccaccgcgccagcagattttttttttttttttttttttttttgagat
 ggagtcttgcgtgttgcccagcctggagtgacagtggtatgatgttggtcactgcaacctc
 tgtctaccatgttcaagcgattctcccacctcgtcctcccgtgtagctgggatcacaggcac
 acgccaccacacctagctactttttgtattttagtagaaaatggggttccaccatgttggcc
 aggatgggtcccgaactcctgacctcaagtgatcctcctgcctcggcctcccaaagtgtggg
 attacaggtgtgagccactgtcctgcccacaaaatgtgatttttttttttttttttttttt
 ttccatttcaattaactataatagctatgtctattgagcactcaagtgtattctagaaaactg
 ttccctgattctggggatataatccatgaatcaactatagtcctgttattaagtaactctgtag
 tctgactaaaccattagaaaatttaaaaaatggctactttcaagacatcttggagttcagga
 gtcccacactgccaacctattacctaataatccaacctgcttgaattcacttatttaacc
 aatatttattgagtgccaactttgagcctaagatacagcagtaaacaaatggataaagtccc
 tgcctcatgaaacttgtattctaattggaagaaacagaaaacacagatataggatgtaat
 atcaggtaggataaaactttgaattcaaacaaaagtatacgtagtcagggttcgccaag
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 caagagagtaagaccaatttgctttcttccgtttttggtttcaagccacctgcacattgagg
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 gacacactaacaataatgcctttccagttctctaggtattctttaatccagtcgaagctgac
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 tgcaagacagtggtgaaggaagggtctctgaagaggttaatatctgagcagagacttgaa
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 gtgggtgtgatcagggtcagcaaaagaagccatgtgacagagaagggtgggcccagggagagac
 ggataagtgatctaactcctgaggaggtggcctggccaggagctagagcatgaagatctcgt
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 caatttacaaaagaaagagaggtttaatggacttacagttccacatggctggggaggcctca
 caatcatggcgaaaggcaatgaggagcaagtcacgtcttacgtggatggcaggcaaaagaca
 agacagcttgtgcagagaaaactcccccttatagagccatcagatcctgttagacttattcac
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 gtcaaaaacaaagaggctacaggccatgagagtcacaaaatccagtgggcagtcacaaatctta
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 cgggtggatctaccattctggggtctggaggacctctctcacagctccactaggtgggtgcc
 cagtagggactgtgtgtggggtctctgacccacatttcccttctgactgcctggcagag
 gatctccatgagggccctgctcctgcagcaaaacttctgactgggcatccaggcatttccgca

Fig. 9 cont.**Upstream Rhesus box of D-positives**

catcctctttaatctaggcgaaggtttccaaaccccaattcttgacttctgtgactcgag
tctcaacaccacatggaagctgtcaaggcttggggcttgactccccgaagctacagccaa
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cattgtcttgggaattagcatttggctcctgttactcatgcaaatttctgcagccagctga
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gcaaaagacaaaacattcattaagtccaaaaaggtaaagaatgacaaattaagcatgtatct
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ggccacaaaagagaaaaaagggtaggggcaaaaaacgcaaagagaaaggagtagtatcttt
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cccatctcactcatatactgccgccgtacatgtcaatcagatgaacctgtgcgtatctctta
atgacaattgaccacatttttactgaagtgaaaggggttctgctccgagaccacttct
ggatctccccctccacctctgtgtcttctcggtgcaccatcgggtcaaagccgagcaac
gccgtctctgtgtgatcgcattgtgccttctgcacacgacctcccccgagagtgaccagct
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gagacctcgacctgctccctctccggggctggatctgactccttgacgggtgattccagacg
cgagacccaaactgacggcttctagaagagggcgagcccggccgcaagtctttcacgtagc

Fig. 9 cont.**Upstream Rhesus box of D-positives**

taagtcacggtgcttccggttcttaccggttctccccttgtaaacggttacctccgaaa
 acccaggctctctccaacagtggttctcaagcgaggcgatcttccccgggaggggatattt
 ggcaaagtctggggcatttttgggttactggggctgctacttgcatccactgggtagaggc
 ggggatgcagctacacaacctgcgaagcacgggacagcacctccccaacccagacagaat
 tagccggcccaaacctcagtagtgccaggctgagaaacctgccttaaacaacaacaaa
 gaaaagccaagtcccataagtgggtcaccgcgccgagactggggtccacgggacaccccagc
 cacgccaagccgggaagtccccgctcctggagctgaàcccgcccctctcccagaggtggag
 ctgccccggcggaacaggcacggagaaaataaacaagactaaaaagtcctgagtagcgct
 gtgtggccgcaaacctgaaccacctttgcaccacgcccgggacccggcacgcttctgccac
 ccaccctgagagggctgcgcccggaccccagtagaaaacactcgtcacctcaatcaa
 gacgggtacgaaggccaacggacgccttctttagaacgctcagcacacagagcaacttctc
 acgcctactctcaaatggcgtactccaaactagcactcccagcgtccagctgtgaaccaga
 gcggcggaagcccctgaaccagcggccggcatgcgcagacgcgttgttgtggtggcgct
 ggctccctccggacccggcggcccgccctccgcccgtgtccgcatgcgcgactgagccgcg
 ggggtggtactgctgcatccgggtgtctg
 (end of Rhesus box)
 aagatccgatgaaataacatatgcaaaatgattgggtccgtgattggcattccagaaatgg
 3'

Fig. 10

Upstream Rhesus box of D-positives

5' ctagaaaacactttgtcatttttagaggtgta
 (start of Rhesus box)
 tccaatgttcgcgacagcactggagtcagagaaaatggagttgaatcctttctctgccactc
 ttgaggagaatctcaccatttattatgactgtagaatacaacaataaaatacagccatgt
 accacataacaacatcttggtaaacaacagactgcatatgatgggtggcatccagtaagc
 taaggttaatttattattattcccttttttttcttttttttgagatgtagtcttactctg
 tcacccaggctagagtgcaatggcaccatcttggctcactgcaacctctgcctcctgggttc
 aagcgaatctcctgcctcagcctccgaagttagctgggaattacaggcaccaccacatctgg
 ctaattttttgtatttttagtaaagatggggtttcaccatggtggccaggctgatctcaaac
 tcctgacctcaagtgatctgcctgcctcggcctcccaaagtgctgggaccataggcctgagc
 cactgtgcccggccttgtttgctttttaacagttaacagtgctcatagaaactgctttg
 acatgactgcaatcatgtgcttcatagaaacttaattagattataccactagagctcttcaga
 tttttatactttttttttgaaacggagtctcactctgtcaccaggctggagtgcaagtgccg
 caatctcagctcggcgcaacctccgctcccagggtcaagtgatctcctgcctcagcctcc
 cgagtagctgggattacaagtgcacactaccacgccagctaatttttgcattttactaga
 caggggttcacatggttggttaggatagtttcaccaggatctcttggcctcatgatcagcct
 gcctcggcctcccaaagtgctgggattacagggtgtgagccaccgtgccagcctatacttcc
 ctttttgaaataccatttggcgttttgaagaattaacagctttgtgaacgtggcagtgcttgt
 gattcaggcttccactgagaccaaggggagaacctggttgacaggacaaacagacggacagcg
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 tacgcatcccaagattatattattgttttctattgctatgtgtcacactttgccaacagga
 tgtggaaaatgaataagcggttttcttaggcacttctaacagacaattgggtcaaaatgaac
 tccattgcttaagaaacacataaacaccatttagtcactgaatatagctatatgtatgggtg
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 tgaaatccttaagtgttatttagtcggcttgggctaccataacagcagcttaaactgtgt
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 aagggtgccggcaaggctggtttctggtgagacctctctccctgtcttgagatggctgcctc
 ctccctgtgtcctcatagagcctgtcctctgcttttacacttctgggtgcatcttccctttt
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 gacagagtctcactctgtcaccaggctggagtgcaagtgggtgcaatctcggctcactgcaat
 ctccgcctcccagggtcacgccattctcttgcctcagctctcccagtagctgggcctacagg

Fig. 10 cont.

Upstream Rhesus box of D-positives

cgcccgccaccctgccagctaattttttagtagagacggggttcaccatggt
 agccaggatggtctcaatctcctgacctcgtgatccacctgcctcagcctcccaaagtgtg
 ggattacaggcatgagccaccgccccagcagatttttttttttttttttttttttgagat
 ggagtcttgctgtgttgcccagcctggagtgcagtgttatgatittggctcactgcaacctc
 tgtctaccatgttcaagcattctcccacctctgcctcccgtgtagctgggatcacaggcac
 acgccacca'cacctagctactttttgtatttttagtagaaatggggttcaccatgttggcc
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 attacagggtgtgagccactgtgacctggccaaaatgtgatttcttattcccacattgcca
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 gtcccacactgcaaacatattacctaataatccaacctgcttgaattcactatttaacc
 aatatttattgagtgccaactttgagcctaagatacagcagtaaaacaaatggataaagtccc
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 atcaggtagggataaataactttgaattcaaacaaaagtatacgtagtcagggttcgccaag
 agacacagccaatcggatacatagatatataaaagagggttatgagttagaaagggtcac
 atgattacagaggctgagaagtcccacagcagattgtctgcaagctggagaccagggtac
 tggtagcatggctcagtccaagtcccaaagcctcagaatcaggaaagctgatgataatc
 ttagcccaaaggccttagaacccccagcggtagcggaaaggctgatgtaggctcctggagtc
 gagcccaacagcctgggatcctgaaatccaagggcaggaatggaagcgtgtattccagtc
 caagagagtaagaccaatttgccttcttccgtttttgtttcaagccacctgcacattgagg
 gcggtggttccctcttagtccattcagtcataatcaatctctctggaaataccctcaca
 gacacactaacaataatgccttccagttctctaggtattctttaatccagtcagctgac
 acctaaaat taacctcacaaaagttaaggagaaagaagacaactttagggggaggctgcta
 tgcaagacagtggtggaaggaagggtctctgaaagaggttaatatctgagcagagacttgaa
 tgaagtgaagaagtgagccatgtgggtatggggaatacaactccaggtagagaagacaagt
 gtggtgtgatcagggtcagcaagaagccatgtgacagagaagggtgggcccaggagagac
 ggataagtgatctaactcctgaggaggtggcctggccaggagctagagcatgaagatctcgt
 aggactttattctgcaaggtgaaaagccattgtattagctgttcacaaaccgagactagg
 caatttacaaaagaagagaggtttaatggacttacagttccacatggctggggaggcctca
 caatcatggcgaaaggcaatgaggagcaagtacgtcttacgtggatggcaggcaagacaa
 agacagcttgtgagagaaactcccccttatagagccatcagatcctgttagacttattcac
 tatcacaagaacagcagggtaagacctgtccccatgattcagttacctcccactgggtccc
 tcccacaacgcatgggaattcaggatgagatttgggtggggacacaaccaaccctatcatt
 ccacccatggcccctcccaaattcatgtcctcacatttcaaaaccaatcacaccatccaa
 cagtccctcaaagtcttaaatgatttcagcattaactcaaaagtccacagtctaattgtctca
 tctgagacaaggcaagtcctttccatttatgagcctataaaatccaaagcaagttagttact
 tctagatacaatgggggtacaggcatgggtaataacagccattccaaatgggataaattg
 gtcaaaacaaagaggctacaggccatgagagtccaaaatccagtggggagtcacaaatctta
 aagctccaaaatgatctcctttgactccacatctcacatccaggtcacgcagatggaagggg
 tgggttcccattggtcttgggcagctctgcccctgtacctttgcagggtacagcctccctctc
 agctgctttcatgggctggcattgagtgctgcagctttccaggtacaggtgcaagctgt
 cgggtggatctaccattctggggctctggaggacctctctcacagctccactagggtgggcc
 cagtagggactgtgtgtgggtctctgacccccacatttcccttctgactgccctggcagag

Fig. 10 cont.

Upstream Rhesus box of D-positives

gatctccatgagggccctgctcctgcagcaaacttctgactgggcatccaggcatttccgca
catcctctttaatctaggcgaaggttccaaacccaattcttgacttctgtgactcgcag
tctcaacaccacatggaagctgtcaaggcttggggcttgactccccgaagctacagccaa
gctctaccttgccctcccgtcagtcagtggttgggagtggtgggatgcagggcaccaagtccc
taggctgcacacagcatgaggaccccggcctggccaacaaaaccatttttcttgatacct
ctggacctgtgatgggaggggttgccataaagacctctgacatgccctggagacattttccc
cattgtcttgggaattagcatttggctcctgttactcatgcaaatttctgcagccagcttga
atttctcctcagaaaatgggaatttttcttttctatcacattgtcaggctgcaaatttccg
aacttttatgctctgcttcccttataaaaactgaatgtctttaacagcacccaagtcacctct
tgaatgctttgctgcttagaaatttctcctgccagatactctaaatcatctctctgaagttc
aaagtctacaaatctcgtgcaggggcaaaatgccgccagtatctttgctaaaacataac
aagagtcccctttgctccagttcccaacaagttcctcatttccgtctgagaccacctcagcc
tatggactttattgtccacagtgtatcagcatttgggcaaagccattcaacaagtctcta
ggaagtccaaacttccacatttgctgtcttctctgagccctccaaactgttccaaac
cctgctgttaccagttccaaagtcacataccatttttgagtatctacggcagcacccca
ctctactggtaccaatttagccactgaagtgttgagaaacagaagtaatagactctggttt
acattgtaaaagcttctctgtggctgctgtgtgaagaaaatataatgagaatgaagcccaag
atgaagcagggacacagttgcagtggttagagtaagaaatgctgctggctggcactgaagtg
atagcctggaggttgtgtgtgcacatgcagtggtatgtgttttacgatagtaggccaaca
gatactgtaatccacacttgttttttttttgagacagagttcacctgttgcctagacta
gaatgcagtggcacaatcttggctcactacaacctccacctcccaggttcaacaatccttg
tgctcagcctcccagtagttgggatttacaggtgtgtgccaccgtgccagctatattttt
tgtatttttagcagagatgggatttgccacattggccaggctggtcttgaactcctggcct
caagcaatcctcccaccttagcctcccaagtgctgagccaccacacctggccgcaactgat
ttttaatcatgaaatgacacatacatttaaaaaacccaatacctataatattcctggctagt
actcttcacatctatatcatcaaaaacaaagaaagtaatgtgaaactgacacagccaagggga
gactaaggagacataacaattaactgtaatgtggtattctggaggggatcctggaacagaaa
aagacattaggcaaaaaactaaagaaatctgaataaaaatgtggatgtcagttaataaatg
tatcatattagtccagtaattgtaacaaatataccacaataatgaaagccattaattatagg
gaaaatggaggggttaatatgggtggctggcttttgctatttctagcagctccattttatct
gcaaaagacaaacattcattaagtcacaaaaaggtaaagaatgacaaattaagcatgtatct
tattagtaagagtaataataaagatgctcactcctatttataaatatttgacaatcatgttaa
ggccacaaaagagaaaaaagggtaggggcaaaaaacgcaaagagaaaggagttagtatcttt
tctcccgcactcattagctattaaaagaggatgtttgtttaaagctgctcagagctggtaaa
ctaattgttaagtcactaacgggaatttaaaaggttccattaagaactgcctgcactagattc
ctccacctgagacattaacaatcacgataaacctcctgagtggtagaacttgtccattt
aaaaacaggctatagattgtatcatgcagttttatctactaatcggctaataatcccgcaaaa
aacaacaaaccccaagggtgaaagttcatccatcaaaggaaacaacagtcaccttggtt
cccatctcactcatatactgccgctgacatgtcaatcagatgaacctgtgcgtatctctta
atgacaattgaccacatttttgactgaagtgaagggggttctgctccgcgaccacttctt
ggatctccccctccacctctgtgttctttcggtgaccatcgggtcaaagccgagcaac
gccgtctctgtgtgatcgcatgtgccctctgcacacgacctccccgagagtgaccagct
accggacaggcaccaaggagggtaccgagcacctcccggaccggcggtgcaggatcgcga
gcgctccgctagggagactgcacgttgcgctgtgcttctgcggtggcgcttctgcaag

Fig. 10 cont.**Upstream Rhesus box of D-positives**

gagacctcgacctgctccctctccggggctggatctgactccttgacgggtgattccagacg
cgagacccaaactgacggcttctagaagaggggagcccgccgcaagtctttcacgtagc
taagtcatcgttgcttccggcttcttacggttctcccctttgtaaaccggttacctcccgaaa
accaggtctcctccaacagtggttctcaagcgaggcgatcttccccgggaggggatattt
ggcaaagtctgggggcatTTTTGGTTCactggggctgctacttgcatccactgggtagaggc
gggggatgcagctacacaacctgcaagcacgggacagcaccctccccaaaccagacagaat
tagccggccccaaaacctcagtagtgcccaggctgagaaaaccclyccttaacaaacaacaaa
gaaaagccaagtcccataagtgggtcacccgcccagactgggggtccacgggacaccccagc
cacgccaagccgggaagtccccgcctcctggagctgaacccgcccctctcccagaggtggag
ctgccccggggcgggaacaggcacggagaaaataaacaagactaaaaagtcctgagtagcgct
gtgtggccgcaaacctgaacccaccttttgaccacgcgggacccggcacgcttctgccac
ccacccctgagagggctgcgcgccgaccccagtagaaaacactcgtcacctcaatcaa
gacgggtacgaaggccaacggacgccttctttagaacgctcagcacacagagcaacttctc
acgcctactctcaaatggcgtactccaaactagcactcccagcgtccagctgtgaaccaga
gccccggaaagcccctgaacccagcgcggggcatgcgacagcgcgttgttgggtggcggt
ggctccctccggacccggcgccccgcctccgccccgtgtccgcatgcgcgactgagccgcg
gggggtgtactgctgcatccgggtgtctg
(end of Rhesus box)
aagatccgatgaaataacatatgcaaatgattgggtccgtgattggcattccagaaatgg
3'

Fig. 11

ctgatctaca taggaattgt tttcaagaca tttctgcatt cctctagtga cagggtgctc 60
 actacctcat gagtatttca gtggacaact gtaatggtca ataaagtatc cactttccac 120
 ctccctgcag ctccctggccc tggctttatt ctctggggct ccacacattc agtttacact 180
 cagtggccag tggctgggac cattgtagaa aataaggaaa ctccaattcc ttccttcttt 240
 tcttctctt tcattctctc ctccctctct acatccctct ctctcttctt tcttctctcg 300
 acacttacca tgtaccagac ctctgccag gcacatggat gggagcacag ggaagtgtgg 360
 ctgcagggtt agaactaagt cccaagcccc ctaaagctca tgccagggga ctggactgtc 420
 cagtactgag ggatgggat gctgaggctg gtggccttcc tcaaatgcac tgtagtgccc 480
 caggcagagt cctgggctgc cctgtgagga ggtgaccaga ggtagagcaa cttcacccca 540
 aggctggatc aggatcccc ctaggthttt actagagcca aaccacatc tcttctctct 600
 tctgcccacc ccccttaaaa tgcttagaaa cacatagatt taaatacaaa tcaaatgta 660
 agtaatttca actgtgtaac tatgaggagt cagttctacg tgggtcctat ctgtatcctc 720
 ccagggctc agctccattc ttgtcttca ttcattctca tcaatacat tgttgttaag 780
 agctcactgg gtgccctctc tgtcatgtag taaggthtta aaaagaaagc ctcttctgag 840
 cttcagtttc ctatcata aaataggagt attgatccgt tcttgcttt tcttacaagg 900
 atatgctgaa gatgactgaa gtacagagta aagaaggatt atgtttgggt gtcaaaaggaa 960
 tagaatgccc tctttcaaac tgagcacagc agaacctgt aacaggaaca cagcaacttg 1020
 ttgaatgaat gacaatattg gaaaacatac atttctctccc ctccccatca tagtccctct 1080
 gcttccgtgt taactccata gagaggccag cacaccagc cttgcagcct gagataaggc 1140
 ctttggcggg tgtctcccc ctatgctccc caagccctca agtaggtgtt ggagagaggg 1200
 gtgatgcctg gtgctgggtg aaccctgca cagagacgga cacaggatg 1249

Fig. 12

2938 CTAGAGAGGAGTTTTTGAAATTAACACACTGCTCTAATTTCTGCAAGTTTTTATTTCATGAATTAAGAGTATTTCCCTAGTCCATTAATCCCAAGGC RHCE
 CTAGAGAGGAGTTTTTGAAATTAACACACTGCTCTAATTTCTGCAAGTTTTTATTTCATGAATTAAGAGTATTTCCCTTTGTCATTAATCCCAAGGC Cde°
 CTAGAGAGGAGTTTTTGAAATTAACACACTGCTCTAATTTCTGCAAGTTTTTATTTCATGAATTAAGAGTATTTCCCTTTGTCATTAATCCCAAGGC RHD

3038 AAATATGGAAGTTTGATCATATGCTRAATCAATGTAAGCTGGATTCCTTTAAGAGATTGAGAAATTAAGGCAAAAGCTGATATAATCATGTTTAGTTA RHCE
 AAATATGGAATTTGATCATGTAATCAATGTAAGCTGGATTCCTTTAAGAGATTGAGAAATTAAGGCAAAAGCTGATATAATCATGTTTAGTTA Cde°
 AAATATGGAATTTGATCATGTAATCAATGTAAGCTGGATTCCTTTAAGAGATTGAGAAATTAAGGCAAAAGCTGATATAATCATGTTTAGTTA RHD

3138 TACTGTGAGCTTATAAGAAAGCTGGAGGCAACCCCATTAACCTACCAGAAATACAGAACTCAGTCTCACAACTTAATATAATTTCCCTCAAACTTTTC RHCE
 TATTGTGAGCTTATAAGAAAGCTGGAGGCAACCCCATTAACCTACCAGAAATACAGAACTCAGTCTCACAACTTAATATAATTTCCCTCAAACTTTTC Cde°
 TATTGTGAGCTTATAAGAAAGCTGGAGGCAACCCCATTAACCTACCAGAAATACAGAACTCAGTCTCACAACTTAATATAATTTCCCTCAAACTTTTC RHD

3238 CTCAAAGTTTAAATTTCTGAAATAATCTTGGATTAAGAGAAAGGCTGTCCAGCAATGGACTTATCTGTTATTTCTTCTTATTGTGAGCTTAATGGC RHCE
 CTCAAAGTTTAAATTTCTGAAATAATCTTGGATTAAGAGAAAGGCTGTCCAGCAATGGACTTATCTGTTATTTCTTCTTATTGTGAGCTTAATGGC Cde°
 CTCAAAGTTTAAATTTCTGAAATAATCTTGGATTAAGAGAAAGGCTGTCCAGCAATGGACTTATCTGTTATTTCTTCTTATTGTGAGCTTAATGGC RHD

3337 ATGACAAAGCAGAGGCAAGAGGCATACATCAATCTTCAAAGTAGGAAGTCAAAGAGGTCAGAGCTTCCACAGCATGGCAACAGCTTTGCAGATGCCCA RHCE
 ATGACAAAGCAGAGGCAAGAGGCATACATCAATCTTCAAAGTAGGAAGTCAAAGAGGTCAGAGCTTCCACAGCATGGCAACAGCTTTGCAGATGCCCA Cde°
 ATGACAAAGCAGAGGCAAGAGGCATACATCAATCTTCAAAGTAGGAAGTCAAAGAGGTCAGAGCTTCCACAGCATGGCAACAGCTTTGCAGATGCCCA RHD

3437 CATCGTATAGTTGAAATAGCAAAGCCCAGCAAAGGTTAAAGCTGAAAATGCCAAAAGCCCCTGCCCTTGGCAGCTTCTGCGAGGCATCCCCATGAACATA RHCE
 CATCGTATAGTTGAAATAGCAAAGCCCAGCAAAGGTTAAAGCTGAAAATGCCAAAAGCCCCTGCCCTTGGCAGCTTCTGCGAGGCATCCCCATGAACATA Cde°
 CATCGTATAGTTGAAATAGCAAAGCCCAGCAAAGGTTAAAGCTGAAAATGCCAAAAGCCCCTGCCCTTGGCAGCTTCTGCGAGGCATCCCCATGAACATA RHD

3537 GTCAGTAACTTTGTCAGGCCCCAGTGACCATGAAGAGTGAGGGCTGCAGCCAGGGAATAGTCCGTCGAGAGCAAGGATTCAAATTAAGCAGCCCGGA RHCE
 GTCAGTAACTTTGTCAGGCCCCAGTGACCATGAAGAGTGAGGGCTGCAGCCAGGGAATAGTCCGTCGAGAGCAAGGATTCAAATTAAGCAGCCCGGA Cde°
 ATCAGTAACTTTGTCAGGCCCCAGTGACCATGAAGAGTGAGGGCTGCAGCCAGGGAATAGTCCGTCGAGAGCAAGGATTCAAATTAAGCAGCCCGGA RHD

Fig. 13 cont.

***** breakpoint region *****
 3320 GATGAATCTTCTGATATCCCCACATAACCAACACACCCAGAACCTCTTCTGTCTCATCCAGGATAACCACCTAACCTGACTTCTAACAGCATCAGTCAGTT RHCE
 GATGAATCTTCTGATATCCCCACATAACCAACACACCCAGAACCTCTTCTGTCTCATCCAGGATAACCACCTAACCTGACTTCTAACAGCATCAGTCAGTT Cde^o
 GATGAATCTTCTGATATCCCCACATAACCAACACACCCAGAACCTCTTCTGTCTCATCCAGGATAACCACCTAACCTGACTTCTAACAGCATCAGTCAGTT RHD
 ***** breakpoint region *****
 3420 TTGTCGTGTTTTGTACATTATATATGATGGTTTGAATGTGTCCTCCCAAAATTCATGTCTAGAACTTAATCCTTCAATTCATAATGTGATGTTTTTT RHCE
 TTGTCGTGTTTTGTACATTATATATGATGGTTTGAATGTGTCCTCCCAAAATTCATGTCTGAACTTAATCCTTCAATTCATAATGTGATGTTTTTT Cde^o
 TTGTCGTGTTTTGTACATTATATATGATGGTTTGAATGTGTCCTCCCAAAATTCATGTCTGAACTTAATCCTTCAATTCATAATGTGATGTTTTTT RHD
 ***** breakpoint region *****
 3520 GGAGGAAGGCCCTTTGGGAAGTAATTAGGATAGATAAGGTCAATGGGTGAGGTATGATGGCCTGGTACTTATAGAGAGAGAAAGAGAAATCTGAGCT RHCE
 GGAGGAAGGCCCTTTGGGAAGTAATTAGGATAGATAAGGTCAATGGGTGAGGTATGATGGCCTGGTACTTATAGAGAGAGAAAGAGAAATCTGAGCT Cde^o
 GGAGGAAGGCCCTTTGGGAAGTAATTAGGATAGATAAGGTCAATGGGTGAGGTATGATGGCCTGGTACTTATAGAGAGAGAAAGAGAAATCTGAGCT RHD
 * breakpoint region *
 3620 GGCATGCTCTTGCCCTCTCACCGTGTGATGACTTCTCCATGTATGCAAGCAAGAGGCCCTCACAGATGGTGGCACCATGCTTTGGACTTCCCAG RHCE
 GGCATGCTCTTGCCCTCTCACCGTGTGATGACTTCTCCATGTATGCAAGCAAGAGGCCCTCACAGATGGTGGCACCATGCTTTGGACTTCCCAG Cde^o
 GGCATGCTCTTGCCCTCTCACCGTGTGATGACTTCTCCATGTATGCAAGCAAGAGGCCCTCACAGATGGTGGCACCATGCTTTGGACTTCCCAG RHD

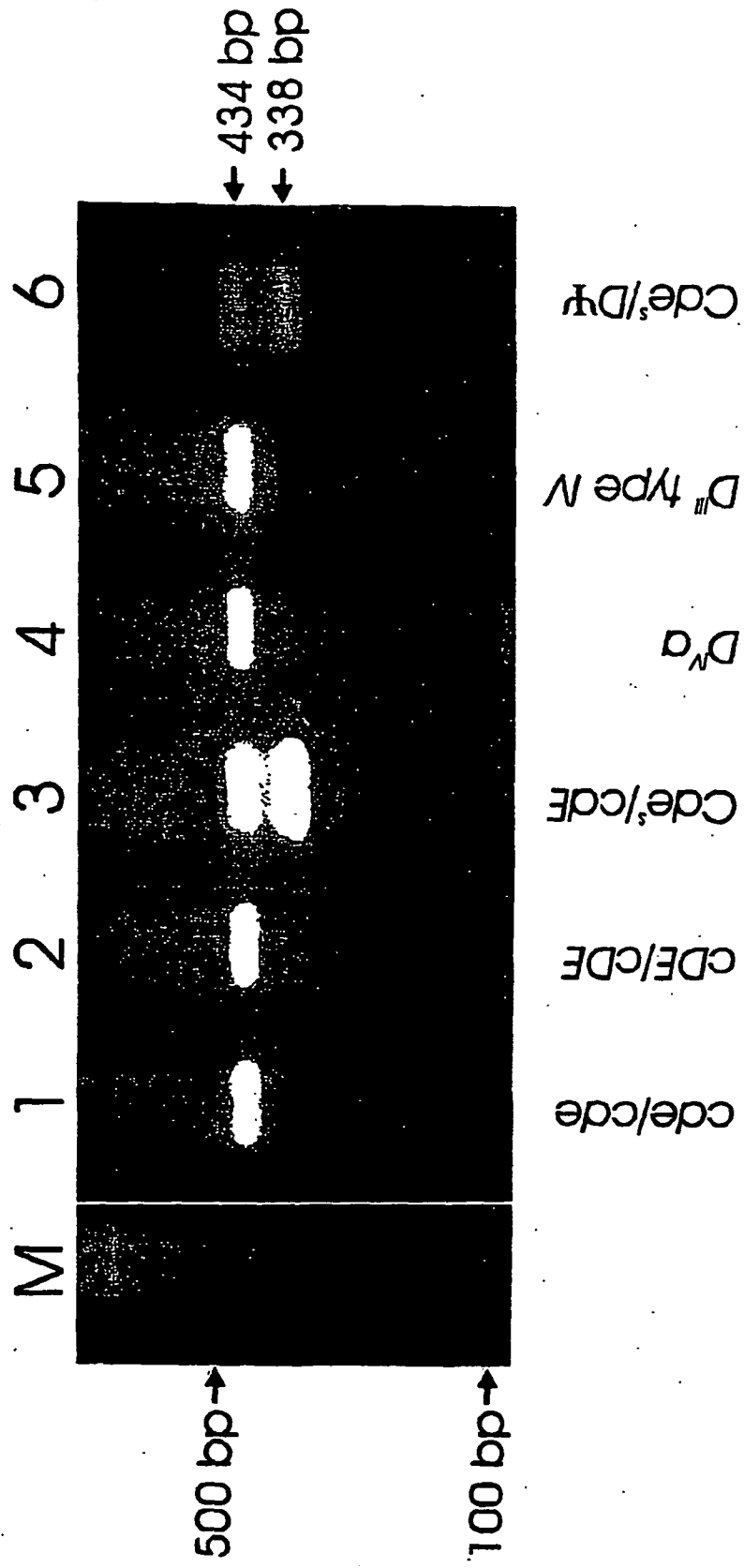
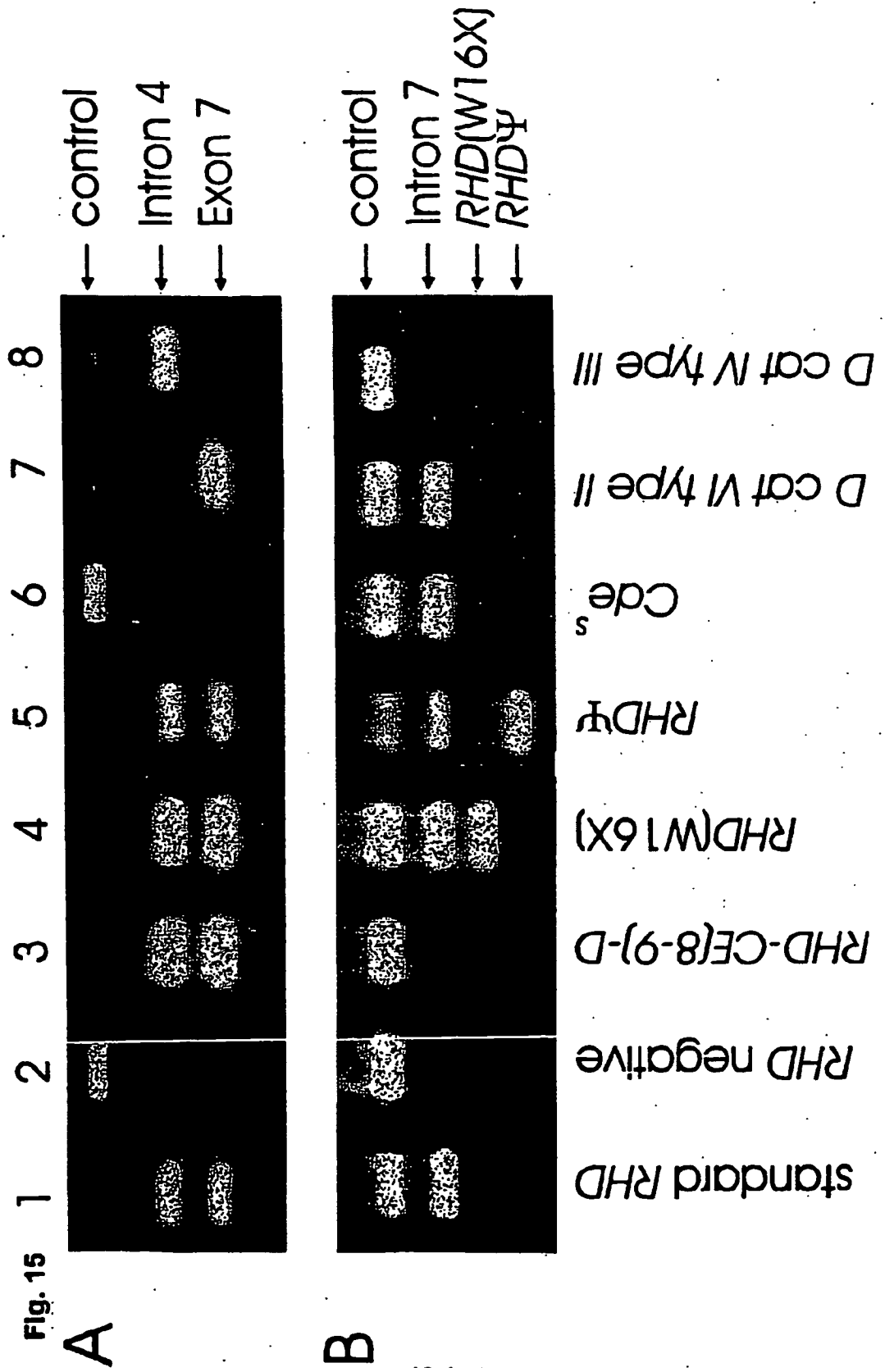


Fig. 14



REFERENCES CITED IN THE DESCRIPTION

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专利名称(译)	RHD阴性基因座的分子结构		
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[标]申请(专利权)人(译)	DRK BLUTSPENDEDIENST巴符州HESSEN GEMEINNUTZIGE		
申请(专利权)人(译)	DRK-BLUTSPENDEDIENST巴登 - 符腾堡州, HESSENGEMEINNÜTZIGEGMBH		
当前申请(专利权)人(译)	DRK-BLUTSPENDEDIENST巴登 - 符腾堡州, HESSENGEMEINNÜTZIGEGMBH		
[标]发明人	FLEGEL WILLY A WAGNER FRANZ F		
发明人	FLEGEL, WILLY A. WAGNER, FRANZ F.		
IPC分类号	C07K14/47 C12N15/12 C12Q1/68 G01N33/53 A61K39/395 A61P15/00 C07K14/705 C07K16/18 C12N5/10 C12N7/00 C12N15/09 C12P21/02 C12P21/08 C12Q1/02 G01N33/566		
CPC分类号	A61P15/00 C07K14/705 C12Q1/6883 C12Q2600/156 C12Q2600/16 C12Q2600/172 C12N15/52		
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摘要(译)

本发明涉及代表Rhesus基因座的核酸分子结构, 其包含RHD, SMP1和RHCE基因和/或恒河猴盒, 优选混合恒河猴盒, 上游恒河猴盒和/或下游恒河猴盒。此外, 本发明涉及特异性检测常见RHD阴性单倍型的方法。本发明还涉及D阴性个体中RHD阳性降低型的检测。已经鉴定了RHD基因中的各种突变, 其允许开发诊断工具。本发明还涉及寡核苷酸, 其特异性杂交杂交盒, 优选断裂点或断裂点区域或上游和下游恒河猴盒。另外, 本发明涉及包含或使用上述本发明化合物的试剂盒。

Fig. 10

Upstream Rhesus box of D-positives

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5' ctgaaacactttgtcatttagaggtttaa
(start of Rhesus box)
tccaaagttagggcaggcactggagtcagagaaatggagttgaaatcctttctctgccaactc
tttagaggaatctccaccatttattatgcactgtagaacacaacaataaaaacacagccatgt
accacatacaacacatcttggtaaacacacagactgcataatgtaggggtgcatccagtaggc
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ctaattttttgatttttagtaagatggggttccaccatgtggccaggtgatctcaaac
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ttttttccctacacagacataaaaacagaaggaattggaagccacctccaaacacagggg
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