Dear Editor,

We read the publication on “Alloimmunization in thalassemia patients” with a great interest. Davoudi-Kiakalayeh et al. concluded that “blood matching for Rh and K antigens in patients with transfusion-dependent thalassemia could reduce the rate of red blood cell alloimmunization.”[1] We would like to share ideas and experience from our setting in Indochina where the prevalence of transfusion-dependent thalassemia is very high. In our setting, the blood matching for Rh and K antigens is routinely done in big blood bank centers. Nevertheless, the high rate of alloimmunization among the patients is still observed.[2] The problem might be due to the limitation of the availability of minor blood group matching feasibility among small blood banks in remote areas where many thalassemia patients live. According to a recent report by Jansuwan et al., it was found that “splenectomy is associated with increased alloantibody formation.”[2] It might be an additional clue that there is a requirement for special minor blood group matching for the thalassemia patients with postsplenectomy status.

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There are no conflicts of interest.

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Alloimmunization in Thalassemia Patients

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