Association for the Advancement of Blood & Biotherapies

Implementation of the Updated AABB DHQ v4.0 Medication Deferral List

B Cell-Depleting Monoclonal Antibody Therapies

September 16, 2026

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I. Background:

AABB Association Bulletin #26-05, *B Cell-depleting Monoclonal Antibody Therapy and Blood Safety*, describes new information reviewed by the AABB Transfusion-Transmitted Diseases (TTD) Committee, the Donor History Task Force (DHTF), and subject matter experts regarding blood donors receiving B cell-depleting monoclonal antibody therapies targeting CD19, CD20 and CD52. The bulletin was developed following information shared by CDC concerning prolonged viral infections, including prolonged West Nile virus viremia, in individuals receiving these therapies and the potential implications for blood safety. The bulletin also announces an update to the AABB DHQ/aDHQ v4.0 Medication Deferral List (MDL) and outlines implementation expectations for AABB-accredited facilities. Readers are encouraged to review Association Bulletin #26-05 for a detailed discussion of the scientific rationale, risk assessment, and supporting data.

B cell-depleting monoclonal antibodies are increasingly used to treat autoimmune and neurologic conditions that may not otherwise affect donor eligibility. Because these therapies can result in prolonged B-cell depletion and immune suppression, concerns were raised regarding the potential for prolonged asymptomatic infections, as well as the presence of clinically significant levels of therapeutic monoclonal antibodies in donated blood components. Although no confirmed transfusion-transmitted infections associated with these therapies have been reported, the TTD Committee and DHTF concluded that additional donor screening measures were appropriate.

The AABB MDL v4.0 was updated effective September 2026 to add CD19-, CD20- and CD52-targeted B-cell-depleting monoclonal antibody therapies under the Immunosuppressants category. Donors who have received these medications are deferred for 6 months following their most recent dose. The updated MDL v4.0 is available in both PDF and Word formats on the AABB Blood Donor History Questionnaires webpage.

AABB Accredited facilities should implement the updated MDL v4.0 by March 31, 2027. Because this change is limited to the MDL, a new version of the DHQ/aDHQ v4.0 is not required.

II. AABB DHQ v4.0 Medication Deferral List

As described above, the DHTF has updated the DHQ v4.0 MDL to add CD19-, CD20- and CD52-targeted B-cell-depleting monoclonal antibody therapies to the list of medications requiring donor deferral as shown below, Figure 1.

PLEASE TELL US IF YOU ARE BEING TREATED WITH ANY OF THE FOLLOWING TYPES OF MEDICATIONS:	OR HAVE TAKEN:		WHICH IS ALSO CALLED:	ANYTIME IN THE LAST:
Immunosuppressants	CD19/CD20 /CD52 B-cell depleting monoclonal antibody therapy	Briumvi Gazyva Kesimpta Lemtrada Ocrevus/Ocrevus Zunovo Rituxan/Riabni/Ruxience Truxima Uplizna	ublituximab obinutuzumab ofatumumab alemtuzumab ocrelizumab rituximab rituximab inebilizumab	6 months

Figure 1. B Cell-Depleting Monoclonal Antibody Therapies Added to AABB Medication Deferral List (MDL) v4.0.

The downloadable PDF and Word versions of the updated MDL v4.0 can be found on the AABB Blood Donor History Questionnaires page and at these links copied here for your convenience:

- AABB Blood DHQ/aDHQ v4.0 Medication Deferral List - updated September 2026 – Immunosuppressants - PDF
- AABB Blood DHQ/aDHQ v4.0 Medication Deferral List – updated September 2026 - Immunosuppressants - Word

III. Implementation and FDA Reporting

The AABB DHQ v4.0 User Brochure provides the following information on implementation and FDA reporting:

> *"As updates are required, the DHTF will make changes to the MDL that will be announced in AABB publications prior to posting of the new version on the AABB website. Blood collection establishments may either replace their current MDL with the AABB update or modify their own materials. As stated by FDA at the time of acceptance, under 21 CFR 601.12(d),* ***licensed blood establishments are required to report this minor change and its implementation date in their next annual report. Updates to the MDL should be implemented as defined in blood collection establishment SOPs and soon as reasonably possible****."*

Questions? Email Regulatory@aabb.org