

IMMUNOGLOBULIN (human) This drug must be guardrailed

Trade Name	Intragam P (CSL) or Privigen (CSL)
Class	Blood product
Mechanism of Action	<p>Immunoglobulin G replacement therapy</p> <p>Intragam P contains, 61% IgG1, 36% IgG2, 3% IgG3 and 1% IgG4. Intragam P contains only trace amounts of IgA (nominally <0.025mg /mL).</p> <p>Privigen contains 67.8% IgG1, 28.7% IgG2, 2.3% IgG3, 1.2% IgG4</p>
Indications	<p>Fulminant sepsis</p> <p>Hypogammaglobulinaemia</p> <p>Immune thrombocytopenia</p> <p>Hyperbilirubinaemia due to rhesus isoimmunisation or ABO incompatibility</p>
Contraindications	<p>Patients with hypersensitivity/anaphylaxis to a human immunoglobulin preparation.</p> <p>Patients with IgA deficiency.</p> <p>Lack of blood products consent.</p>
Supplied As See comments section below for details about ordering immunoglobulin from Blood Bank	<p>Intragam P is a sterile, preservative free solution containing 6 g of human protein and 10 g of maltose in each 100 mL.</p> <p>Vials: 3g/50mL or 12g/200mL Labelled as 6% (60g/litre) which equals 60mg/mL</p> <p>Privigen is a sterile, clear or slightly opalescent colourless or pale yellow solution of human normal immunoglobulin.</p> <p>Vials: 5g/50mL or 10g/100mL or 20g/200mL or 40g/400mL Labelled as 10% (100g/litre) which equals 100mg/mL</p>
Dilution	None
Dosage *Must chart guardrail and use Alaris pump*	1g/kg
Guardrails	<p>Concentration: Min 60mg/mL Max 100mg/mL</p> <p>Soft Alert Min: 80mg/kg/hr Hard Alert Max: 400mg/kg/hr</p> <p>Soft Alert Max: 250mg/kg/hr Default Setting: 166mg/kg/hr</p>
Interval	<p>Fulminant sepsis - can repeat dose at 48 hours</p> <p>Rhesus/ABO incompatibility – can repeat the dose at 12 hrs</p>
Administration	IV infusion over 3-4 hours
Compatible With	Dextrose 5%, Dextrose 10%

Incompatible With	No data available.
Monitoring	Monitor BP, HR. Monitor IV site for phlebitis
Stability	Manufacturers expiry, Discard once opened.
Storage	Intragam P: Store between 2-8°C in the fridge, Protect from light. Once removed from the fridge, store below 25°C and use within 3 months. Privigen: Store below 25 °C (do not freeze)
Adverse Reactions	Rare cases of hypoglycaemia, transient tachycardia, and hypotension that resolved after stopping the infusion have been reported.
Metabolism	Half life = 30 – 40days
Comments	<p>There is a national process to request immunoglobulin (IVIG) to streamline requests and to ensure appropriate clinical use in line with national guidelines. Please refer to the Neonatal Handbook for further instructions on the steps below. For any queries regarding the process contact Blood Bank on extension 80310.</p> <ol style="list-style-type: none"> 1. The prescriber needs to be registered as an approved clinician 2. When approved a request for IVIG needs to be completed from the IgO site. 3. Once this is approved the product can be charted on a fluid chart and requested from blood bank by completing the QMR022B Blood Components/ Blood products form. <p>Immunoglobulin does not need to be filtered.</p> <p>Caution: Immunoglobulin may reduce efficacy of live attenuated vaccines. Plan to vaccinate 2 weeks before or 1-3 months after immunoglobulin.</p>
References	<ol style="list-style-type: none"> 1. Neofax 2001 2. www.medsafe.govt.nz 3. AAP Clinical Practice Guideline for hyperbilirbinaemia. <i>Pediatrics</i> 2004;114:297-361 4. Gottstein R, Cooke R. Systematic review of iv immunoglobulin in haemolytic disease of the newborn. <i>Arch Dis Child Fetal Neonatal Ed</i> 2003;88:F6-10.
Updated	<p>Dr B Dixon July 2001</p> <p>A Lynn, N Austin November 2007</p> <p>A Lynn, B Robertshawe September 2009</p> <p>A Lynn, B Robertshawe Nov 2012 (re-order profile), Dec 2013 clarify dose and infusion time</p> <p>A Lynn Aug 2015 (increase hard max after audit)</p> <p>A Lynn, H Harris, B Robertshawe May 2016 (Privigen added)</p> <p>N Austin, M Wallenstein, B Robertshawe July 2019 (update of order process)</p> <p>A Lynn Aug 2020 (update order process)</p> <p>A Lynn B Robertshawe May 2021 (checked with Blood Bank no changes)</p>