Critical Care Guidelines FOR CRITICAL CARE USE ONLY



Infection indications for IV Immunoglobulin (IVIG)

BRANDS:	Kiovig, Privigen, Gamunex, Octagam
PRESENTATION:	All brands - 10% intravenous infusion of normal human immunoglobulin
	Solution in a vial with a stopper - available as 5g/50ml, 10g/100ml, 20g/200ml
BRAND CHOICE :	Choice determined by brand availability, supply shortages and restrictions on use. Please discuss brand choice with pharmacist.
INDICATION:	Staphylococcal and Streptococcal toxic shock syndrome
	 Necrotising (Panton-Valentine Leukocidin associated) staphylococcal sepsis
	Severe or recurrent clostridium difficile colitis
	Suspect toxic shock syndrome in multi-organ failure with shock, fever, rash, and GI or CNS disturbances (not all are necessary) especially where Staphylococcal or Streptococcal infection is likely. IVIG should be considered for these patients if no clinical response (such as reduction in vasopressor dose) has been observed within the first 6 hours of aggressive therapy.
	Use of IVIG must be agreed by both a microbiology consultant and a critical care consultant.
DOSE:	Use dose calculator for all patients. Dose calculator can be found at https://ivig.transfusionontario.org/dose/ Dose for Staphylococcal and Streptococcal toxic shock syndrome and Necrotising (Panton-Valentine Leukocidin associated) staphylococcal sepsis:
	2g/kg as a single dose. No repeat doses should be given.
	Dose for severe of recurrent CDI colitis: 0.4g/kg as a single dose which can be repeated.
	Total dose should be round down to the nearest dose that can be summated from available vial sizes (5g, 10g, 20g available).
PRESCRIPTION FORM,	Request form available at https://www.nppeag.scot.nhs.uk/guidelines/
ORDERING AND PRESCRIBING :	Select 'Immunoglobulin Request Form'.
	This request form should be completed and signed by a consultant or senior registrar. All doses should be prescribed on ICCA as 'stat' doses. Any grade of doctor and ACCP can prescribe the IVIG on ICCA.
	Please contact clinical pharmacist to confirm dose, review request form and arrange supply. If out of hours, please contact on call pharmacist via switchboard.

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ADMINISTRATION AND	Before the infusion of all brands		
MONITORING:	Ensure resuscitation	equipment is available	
	Ensure patient is adequately hydrated		
	Consider CAUTIONS associated with patient's medical conditions and		
	medicines (see section below)		
	Administration recommendations for all brands		
	Administer via IV route only		
	Administer at room temperature		
	Protect IVIG from direct sunlight		
	Do not shake the product		
	Use the product immediately once prepared.		
	Brand specific standard daily infusion rate regimen		
	Kiovig 100mg/ml		
	30 mins	0.5ml/kg/hr	
	30 mins	1ml/kg/hr	
	30 mins	2 ml/kg/hr	
	30 mins	4 ml/kg/hr	
	The remainder at	6 ml/kg/hr	
	Privigen 100mg/ml		
	30 mins	0.3 ml/kg/hr	
	30 mins		
	30 mins	•	
	30 mins	2.4 ml/kg/hr	
	The remainder at	4.8 ml/kg/hr	
	Gamunex 100mg/ml		
	30 mins	0.6 ml/kg/hr	
	30 mins	1.2 ml/kg/hr	
	30 mins	2.4 ml/kg/hr	
	30 mins	4.8 ml/kg/hr	
	The remainder at	7.2 to 8.4 ml/kg/hr	
	Note the maximum ir failure is 4.8ml/kg/hr.	nfusion rate for Gamunex for patients at risk of renal	
	Octagam 100mg/ml		
	30 mins	0.6ml/kg/hr	
	30 mins	1.2ml/kg/hr	
	30 mins	2.4 ml/kg/hr	
	30 mins	4.8 ml/kg/hr	
	The remainder at	•	
		ced at the prescriber's discretion, depending on the tolerance to IVIG and side effects.	

Do not exceed the above rates.

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	Observations during infusion for all brands
	Days 1 and 2 Hour 1 T(Temperature), P(Pulse), R (Respiratory rate) & BP (Blood pressure) every 15 mins Hour 2 T, P, R & BP every 30 mins Then T, P, R & BP every hour
	All subsequent days T, P, R & BP every hour Observations may be required more frequently depending on patient's condition, tolerance to IVIG and side effects. If the batch number changes, observations should be restarted as per Days 1 and 2.
	All treatment days Monitor urine output and serum creatinine.
CAUTIONS WITH	Concomitant loop diuretics should be avoided.
MEDICAL CONDITIONS AND MEDICINES	Caution in patients over 65 years old, obese, or with a medical history of thromboembolic events (eg. MI, stroke, PE, DVT), hypertension, diabetes mellitus, vascular disease and in patients who are immobile, who take concomitant nephrotoxic medication or have renal impairment.
	For full list of cautions and contraindications, see individual Summary of Product Characteristics, www.medicines.org.uk
CONCENTRATION:	of Product Characteristics. www.medicines.org.uk
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