

For life's uncertain moments...

We are dedicated to the prevention and treatment of hepatitis B

Learn how HyperHEP B[®] provides effective PEP



HyperHEP B[®] (hepatitis B immune globulin [human]) is manufactured and distributed by Grifols, a global provider of plasma-derived therapies since the company's founding in **1909**.

It is estimated that between **850,000** and **2.2 million** people in the **United States** are currently infected with **hepatitis B**.¹

Available in a formulation produced using
a caprylate chromatography process

Trusted Dependability

- Established history—more than 45 years of consistent supply and product support
- Not made with Mercury (thimerosal) or natural rubber latex
- Unique multi-step caprylate chromatography purification process
- US Food and Drug Administration (FDA) labeling for capacity to remove pathogenic prions
- Only hepatitis B immune globulin product in a convenient prefilled syringe specifically for neonatal administration²



HyperHEP B[®] is made from human plasma. Products made from human plasma may contain infectious agents, such as viruses, and, theoretically, the Creutzfeldt-Jakob disease (CJD) agent that can cause disease. There is also the possibility that unknown infectious agents may be present in such products.

HyperHEP B is available through all major distributors.

Please see Important Safety Information below for HyperHEP B[®] (hepatitis B immune globulin [human]).

Important Safety Information

HyperHEP B[®] (hepatitis B immune globulin [human]) is indicated for postexposure prophylaxis in the following situations: acute exposure to blood containing HBsAg, perinatal exposure of infants born to HBsAg-positive mothers, sexual exposure to an HBsAg-positive person, and household exposure to persons with acute HBV infection.

HyperHEP B should be given with caution to patients with a history of prior systemic allergic reactions following the administration of human immunoglobulin preparations. Epinephrine should be available.

In patients who have severe thrombocytopenia or any coagulation disorder that would contraindicate intramuscular injections, hepatitis B immune globulin (human) should be given only if the expected benefits outweigh the risks.

Local pain and tenderness at the injection site, urticaria, and angioedema may occur; anaphylactic reactions, although rare, have been reported following the injection of human immunoglobulin preparations. Administration of live virus vaccines (eg, MMR) should be deferred for approximately 3 months after hepatitis B immune globulin (human) administration.

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Please see full [Prescribing Information](#) for HyperHEP B.

References: **References:** 1. Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases. Hall E., Wodi A.P., Hamborsky J., et al., eds. 14th ed. Washington, D.C. Public Health Foundation, 2021. 2. CDC Viral Hepatitis. Sources for IG and HBIG https://www.cdc.gov/hepatitis/ig-hbig_sources.htm. Reviewed September 13, 2021. Accessed June 6, 2023.

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