





# Not all patients are alike; and not all IVIGs are alike either

Generally, IG infusions are well tolerated<sup>1</sup>; however, there are **risk factors** known to be **associated with the major complications or adverse effects of IVIG**<sup>2</sup>.

### **Risk factors**



- Advanced age
- Hypertension
- » Coronary artery disease
- Diabetes mellitus
- Metabolic syndrome
- > Hormone replacement therapy
- History of stroke
- Hemolysis
- > History of transient ischemic attack
- Immobility
- > History of deep vein thrombosis
- History of bypass surgery

#### **IVIG** infusion considerations

- > Low concentration product
- Slow infusion rate
- » Reduced sodium content
- > Ensure the patient is well hydrated prior to infusion
- > Spread the dose over more sessions
- Sucrose-free preparation
- > Low anti-A/B preparation



- > Pre-existing renal insufficiency
- Concomitant nephrotoxic drugs
- > Volume depletion
- Paraproteinaemia
- Advanced age (>65)
- » Diabetes mellitus
- Sepsis

- Low concentration product
- Sucrose-free preparation
- » Reduced rate of infusion
- Total IVIG dose should be reduced and spread over several days

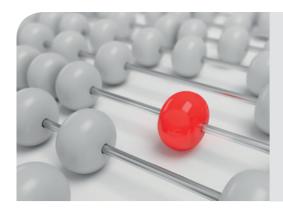


- History of frequent headaches, migraine, aseptic meningitis
- Low concentration product
- Slow infusion rate
- Administer IVIG with a space of 1 or 2 days between each infusion
- Consider anti-migraine medications before and during IVIG infusion

Slow infusion rate of low IVIG concentration products and hydration, especially in highrisk patients, may reduce the risk of renal failure, thromboembolic events, and aseptic meningitis<sup>3</sup>



### IVIG preparations are not all equally well tolerated:4



Not all IVIGs are the same<sup>1</sup>
IVIGs must be considered individual therapies, not generic drugs.<sup>5</sup>



▶ IVIG products are not interchangeable<sup>5</sup> Different manufacturing processes make nonequivalent plasma-derived products and the final composition of IVIG products has resulted in varying tolerability profiles.<sup>1</sup>



Product changes may improve adverse event profiles

As the manufacture of the individual products is different, individual patients may experience adverse events in response to some, but not other products.

# Flebogamma® DIF may be the appropriate choice

According to a **recent prospective study**, including immunodeficiency, autoimmune disease and bone marrow transplant (BMT) patients, both **Flebogamma® DIF 5% and 10% were well tolerated**<sup>6</sup>

	Flebogamma® DIF 5%	Flebogamma® DIF 10%
Patients	34	32
Patients with ADRs* (potentially treatment-related AEs)	3 (8.82%)	9 (28.13%)
Infusions	135	130
Infusions with ADRs (potentially treatment-related AEs)	3 (2.22%)	24 (18.46%)

<sup>\*</sup>ADRs: potential related adverse events. All ADRs were defined as non-severe

- In Flebogamma® DIF 5%, frequency of infusions with potentially treatment-related AEs was low (2.2%) and no headaches were reported<sup>6</sup>
- In Flebogamma® DIF 10%, percentage and type of AEs reported in this study were consistent with other 10% IVIGs<sup>6</sup>
- Flebogamma® DIF 5% may be an appropriate choice for many of your patients including those who cannot tolerate a 10% IVIG



## What makes Flebogamma® DIF different?

- Uses **sorbitol** as **stabilizer** that does not elevate blood glucose or insulin levels<sup>7</sup> (no sucrose, no maltose and no glucose)
- Undergoes pasteurization, a safety step with the capacity to inactivate clotting factors, which helps limit the risk of thromboembolic events<sup>8</sup>
- Contains trace amounts of sodium (<3.2 mmol/l)9
- Contains trace amounts of IgA\*10, being one of the IVIGs with the lowest concentrations of IgA9
- Somolality is within the physiological range (240-370 m0sm/kg)<sup>11,12</sup>

\*Mean values (mg/ml): Flebogamma® DIF 5%: 0.0031±0.0001, n=253. Flebogamma® DIF 10%: 0.0031±0.0006, n=127.

## **IVIG** products are not interchangeable<sup>5</sup>





















Flebogamma® DIF is well tolerated and shows a low frequency of AEs<sup>6</sup>





Flebogamma® DIF **Human Normal** Immunoglobulin (IVIg)

50 mg/ml 100 mg/ml

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