IMMUNE GLOBULIN (IgG) FREQUENTLY ASKED QUESTIONS

Why is IgG therapy being prescribed for me?

Immune Globulin (IgG) therapy has been shown to be beneficial in the treatment of several immune regulation disorders as well as many neurological disorders. You have been prescribed Immune Globulin therapy because you have not responded to other disease-specific therapies such as antibiotics, steroids, and immunomodulatory agents (IMAs) or because your physician feels this is the most appropriate treatment choice for you based on your clinical situation.

What is Gamma globulin?

Gamma globulin is an immunoglobulin (a.k.a. antibody) that is produced by B-cells, which are a type of white blood cell. B-cells produce immunoglobulins (antibodies) that kill viruses, bacteria, fungus, and parasite antigens. In patients with immune deficiencies, IgG therapy helps maintain natural levels of immunoglobin that have not been produced in sufficient quantity by the patient's own immune system. Although the mechanism for IgG therapy in neurological disorders is not fully understood, it is thought to inhibit damage to the myelin, thereby decreasing disease activity and progression.

How is IgG therapy given?

Immune Globulin therapy is given both subcutaneously (SQ) and Intravenously (IV) to neurological and Primary Immune Deficiency (PID) patients.

When given intravenously, anurse inserts a small IV catheter into a vein on your hand or arm. The infusion is started slowly and is then increased every 30 minutes until the maximum rate is achieved. During each infusion, the nurse will monitor your vital signs including your blood pressure, pulse and temperature. It is recommended that you receive IVIG therapy for at least six months before deciding if it should be continued. This is a mutual decision made between you and your physician.

IgG therapy can also be given subcutaneously (under the skin) in patients with Primary Immune Deficiency. Subcutaneous therapy results in a better side effect profile, and patients can often be trained to administer their own weekly medication which can be very convenient. The subcutaneous infusions are much quicker to complete than IV therapy, and most patients' total infusion time will be under two hours, once per week.

What are the side effects of Intravenous Immune Globulin (IVIG) therapy?

Side effects occur with Intravenous Immune Globulin (IVIG) therapy and are most often related to the rate of the infusion. They are prevented from recurring with the next infusion by decreasing the rate and/or administering extra IV fluids along with the IVIG. The most common side effects are headache, nausea, vomiting, and abdominal or back pain. Side effects of IVIG therapy can be managed with over-the-counter analgesics such as acetaminophen (Tylenol) and antihistamines (Benadryl). Allergic reactions are rare. Wheezing, chest pain, difficulty breathing, hives, low blood pressure, and rapid heart rate are treated with antihistamines, epinephrine, fluids and steroids.

What are the side effects of Subcutaneous Immune Globulin (SQ IgG) therapy?

The most common reactions are localized injection site reactions, headache, diarrhea, and pack pain.

Am I at risk for getting HIV or Hepatitis from IgG therapy?

There have been no documented cases of HIV or hepatitis since the start of IgG therapy. The FDA has imposed certain manufacturing guidelines, which require companies to take steps that will inactivate viruses such as Hepatitis B, Hepatitis C, and HIV. Products are treated with detergents and solvents that kill organisms. There are also enforced donor-screening requirements. Before people become blood donors, they are screened by medical examination and tested for the presence of these and other viruses.

Can I take other medications with IgG therapy?

Yes. In fact, most patients are on other disease-specific therapies in conjunction with IgG therapy.

Is IgG therapy safe during pregnancy?

IgG therapy is safe to receive during pregnancy and is often administered after delivery to deter relapse events that may occur in the post-partum period.

How do I prepare for my IgG therapy infusion?

Patients need to be well hydrated and are advised to increase fluid intake the day prior to and the day of Immune Globulin therapy treatment. This will help start an IV and also decrease the chance of side effects. Please avoid caffeine, as this is a diuretic and can cause dehydration.