

ANALYSIS OF THE USE OF INTRAVENOUS IMMUNOGLOBULINS

BACKGROUND:

The use of intravenous immunoglobulin (Ivlg) may represent a therapeutic option with great economical impact in clinical situations where there might be other alternatives; it is therefore advisable to follow strictly the recommendations of available clinical guidelines.

PURPOSE:

To evaluate the use of Ivlg and its adaptation to the licensed indications in a private hospital.

MATERIAL AND METHODS:

JANUARY 2014-SEPTEMBER 2016

We reviewed:

- ✓ Medical records
- ✓ Drug costs
- ✓ Product information from AEMPS website (Spanish Drug Agency)
- ✓ Immunoglobulin Clinical Guidelines for Use, from British Department of Health

Statistical variables analyzed:

- Prescribing service
- Indication
- Dose
- Age
- Drug cost

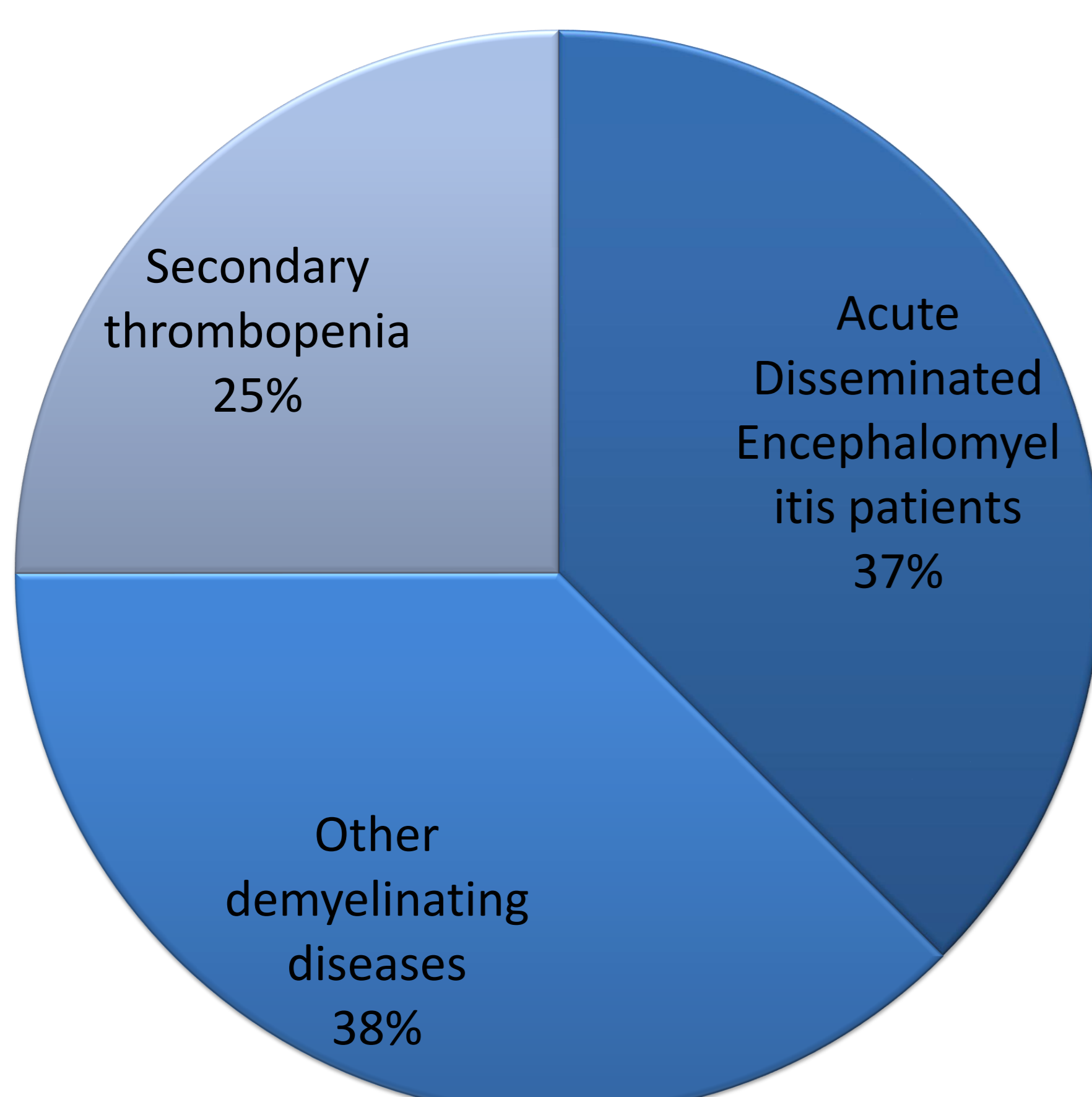
RESULTS:

35 patients

The average age was 44.3 ± 29.47 years

The prescribed doses were calculated based on the patients weight and the associated costs were about 177,814 €.

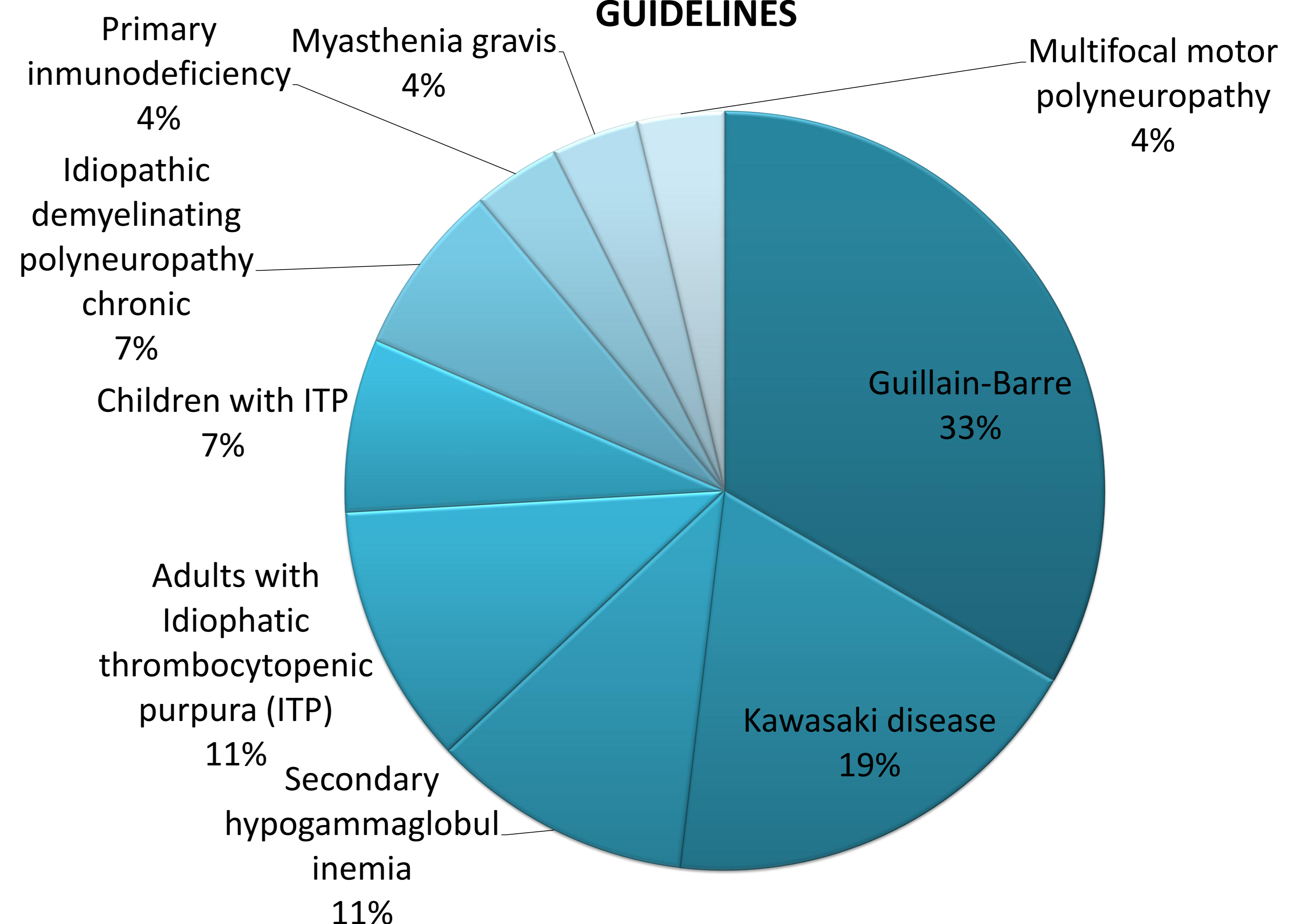
Weak evidence; rare diseases:



CONCLUSIONS:

Based on these results, Ivlg have been prescribed in our hospital according to their license and/or recommended indications, except in some pathologies in which there are not enough evidence and where the prescribing doctor has studied each case for prioritizing their use as the best care available.

APPROVED INDICATIONS AND/OR RECOMMENDED BY THE GUIDELINES



Prescribing services:	Neurology	Hematology	Pediatrics	Intensive care
Patients:	48,6%	20%	25,7%	5,7%

Although there are studies in which IvIG are prescribed on the ideal weight of patients as optimization strategy and based on the drug pharmacokinetics, the latest edition of the British Guidelines shows that this recommendation has limited evidence.