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Instructions for Human Immunoglobulin (pH4) for Intravenous Injection

Please read the instructions carefully and use the product under the guidance of a physician

Warning: Since the source plasma comes from human blood, although the source plasma has been screened for relevant pathogens and measures to remove and inactivate viruses have been taken in the manufacturing process, theoretically, there is still a potential risk of transmitting certain known and unknown pathogens, and the pros and cons shall be weighed when used clinically.

[Drug Name]

Generic Name: Human Immunoglobulin (pH4) for Intravenous Injection

English name: Human Immunoglobulin (PH4) for Intravenous Injection

Pinyin: Jingzhu Ren Mianyiqiudanbai (pH4)

[Ingredients]

Main Ingredient: Human Immunoglobulin.

Excipient: This product contains 90-110g/L of maltose.

[Appearance]

The product is a colorless or light yellow clear liquid, which may appear slightly opalescent but shall not be turbid.

[Indications]

1. Primary immunoglobulin G deficiency, such as X-linked immunoglobulin G hypoxemia, common variability immunodeficiency disease, immunoglobulin G subclass deficiency, etc.
2. Secondary immunoglobulin G deficiency, such as severe infections, septicemia of newborn, etc.
3. Autoimmune diseases, such as primary immune thrombocytopenia, kawasaki disease, etc.

[Strength]

2.5 g/vial (5%, 50ml).

[Usage and Dosage]

Usage: Intravenous infusion or dilute 1-2 times with 5% dextrose solution for intravenous infusion shall be carried out. The initial infusion rate is 1.0 ml/min (about 20 drops/min). If there are no adverse reactions after 15 min, the infusion rate can be gradually increased. The fastest infusion rate shall not exceed 3.0 ml/min (about 60 drops/min).

Dosage: as directed by a physician.

Recommended Dosage:

1. Primary immunoglobulin G deficiency or hypogonadism: first dose: 400 mg/kg body weight, maintenance dose: 200-400 mg/kg body weight, at dosing interval depending on the patient's serum IgG level and patient's condition, usually once a month.
2. Primary immune thrombocytopenia: 400 mg/kg body weight per day for 5 consecutive days. Maintenance dose: 400 mg/kg body weight per dose at intervals depending on platelet count and patient's condition, usually once a week.
3. Serious infection: 200-300 mg/kg body weight per day for 2-3 consecutive days.
4. Kawasaki disease: The product shall be used within 10 days of onset. The therapeutic dose is 2.0 g/kg body weight for children, administered as a single infusion.

[Adverse Reactions]

Adverse reactions such as transient headache, palpitation and nausea may occur during the infusion of human immunoglobulin, which may be related to rapid infusion rate or individual difference. These reactions usually occur within 1 hour after the infusion. It is recommended to regularly observe the general condition and vital signs of the patient throughout the infusion, and slow down the rate or suspend if necessary. Patients generally do not require special treatment and can recover on their own. These reactions may occur in individual patients after the end of the infusion. These patients usually can recover within 24 hours.

1. Foreign clinical trials

The following common adverse reactions have been observed in more than 5% of subjects in clinical trials with similar products marketing in foreign countries: headache, chills, fever, pain, malaise, backache, nausea, vomiting, abdominal pain, diarrhea, infusion site reactions, rash, pruritus, urticaria, hypertension, hypotension, tachycardia, etc.

2. Monitoring after marketing in China

The following adverse reactions/events have also been monitored for the same type of products marketing in China, but the incidence rate of those adverse reactions/events cannot be accurately estimated because they were spontaneously reported in an undetermined total population:

- (1) Systemic impairment: intolerance of cold, hyperpyrexia, chest pain, discomfort, pallor, malaise, periorbital edema, edema, muscular stiffness, etc.
- (2) Damage to the skin and its appendages: maculopapule, erythematous rash, limited

skin reaction, epidermolysis, erythema multiforme, dermatitis (e.g., dermatitis bullosa), increased sweating, etc.

(3) Immune dysfunction and infection: allergic reactions, allergy-like reactions, infusion reactions, allergic shock, etc.

(4) Cardiovascular system damage: cyanosis, palpitations, hypertension, arrhythmia, etc.

(5) Nervous system damage: dizziness, coma, loss of consciousness, tremor, involuntary muscle contraction, hyperalgesia, etc.

(6) Respiratory system injury: dyspnea, polypnea, apnea, gasping, laryngeal edema, respiratory insufficiency, transfusion-related acute lung injury, hypoxemia, etc.

(7) Vascular lesion and bleeding and coagulation disorders: lushing, phlebitis, etc.

(8) Mental disorders: agitation, dysphrenia, drowsiness, etc.

(9) Metabolic and nutritional disorders: hyperglycemia. (Note: This item shall be indicated if the medicine contains sugar)

(10) Hematological damage: leukopenia, neutropenia, agranulocytosis, etc.

3. Monitoring after marketing in foreign countries

The following adverse reactions/events have also been monitored for the same type of products marketing in foreign countries, but the incidence rate of those adverse reactions/events cannot be accurately estimated because they were spontaneously reported in an undetermined total population:

(1) Damage to the skin and its appendages: Stevens-Johnson syndrome, etc.

(2) Nervous system damage: seizures, aseptic meningitis, etc.

(3) Respiratory system injury: acute respiratory distress syndrome, pneumonedema, bronchospasm, etc.

(4) Vascular lesion and bleeding and coagulation disorders: thrombogenesis, etc.

(5) Hematological damage: increased plasma viscosity, hemolytic reaction, etc.

(6) Urinary system damage: renal function damage, etc.

[Contraindications]

1. People who are allergic to human immunoglobulin or have other serious allergy histories.

2. People with IgA antibodies who are selectively deficient in IgA.

[Precautions]

1. This product is exclusively for intravenous infusion.

2. If necessary, this product can be diluted with 5% dextrose solution, while the diluted product shall be used with caution in diabetics.

3. This product shall not be used in case of turbidity, precipitate, foreign matter, vial cracks, expiration, etc.

4. After opening, this product shall be infused for one time and shall not be used several times or infused to another person.
5. It shall be used with caution for patients with serious acid-base metabolic disorders.
6. Renal functions of patients with acute renal failure shall be monitored, including blood urea nitrogen, serum creatinine and urine volume. Patients with renal insufficiency or failure shall be infused at the minimum rate or infused slowly at the minimum dose. This product may lead to abnormal renal function for susceptible patients.
7. Adverse thrombotic events may occur. Patients with known risk factors for thrombotic events shall be monitored; baseline assessment shall be carried out for blood viscosity of patients at risk for hyperviscosity. Patients at risk for thrombosis shall be infused slowly at the minimum dose.
8. Aseptic meningitis syndrome may occur, particularly under the condition of high dose or rapid infusion.
9. Hemolytic anemia may occur. Clinical signs and symptoms of patients with hemolysis and hemolytic anemia shall be monitored.

[Use in Pregnant and Lactating Women]

There are no clinical studies on the safety of this product in pregnant and lactating women, so it shall be used with caution for them.

[Pediatric Use]

There are no clinical studies on this product specifically for children.

[Geriatric Use]

No experimental studies have been conducted and no systematic and reliable references are available. 65-year patients or older shall be infused slowly generally without exceeding the recommended dose.

[Drug Interactions]

There is no clinical research data on the interaction between this product and other drugs. Therefore, this product must be infused alone and shall not be used in combination with any other medicines.

To avoid passively accepting interference of the specific antibodies in this product, certain attenuated live vaccines, such as poliomyelitis, measles, rubella, mumps, and varicella virus vaccines, shall be vaccinated 3 months after injection of this product. For the same reason, in non-emergency situations, patients who have already been vaccinated for the above vaccines shall not be infused with this product at least 3-4 weeks later. If anyone has been infused with the product within 3-4 weeks after vaccination, they shall receive the above vaccines again 3 months after the last infusion of this product.

[Overdose]

There are no clinical studies on the excessive recommended dose of this product. Overdose may result in increased cardiac load due to circulating blood volume

overload and increased blood viscosity, which is more common in elderly patients and patients with renal impairment.

[Toxicology]

This product contains IgG antibodies against broad-spectrum viruses, bacteria or other pathogens. After intravenous infusion, it can rapidly increase the IgG level in the recipient's blood, enhance the body's anti-infection ability and perform an immune-modulating function.

[Pharmacokinetics]

There are no clinical studies on the half-life of this product in vivo. According to the references, the biological half-life of human immunoglobulin is about 3-4 weeks.

[Storage]

Store and transport away from light at 2-8 °C.

[Packaging]

Medium borosilicate glass-molded injection vials with halogenated butyl rubber stopper (brominated) for injection. 1 vial/box.

[Shelf Life]

36 months

[Executive Standards]

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[Marketing Authorization Holder]

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