Treating pregnant women with high dose immunoglobulin (IVIG) in a single skilled Center reduce side effects

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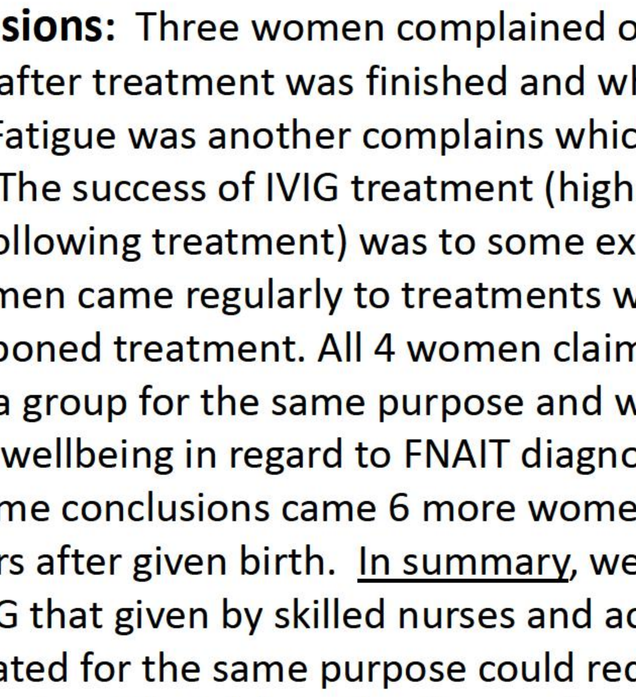
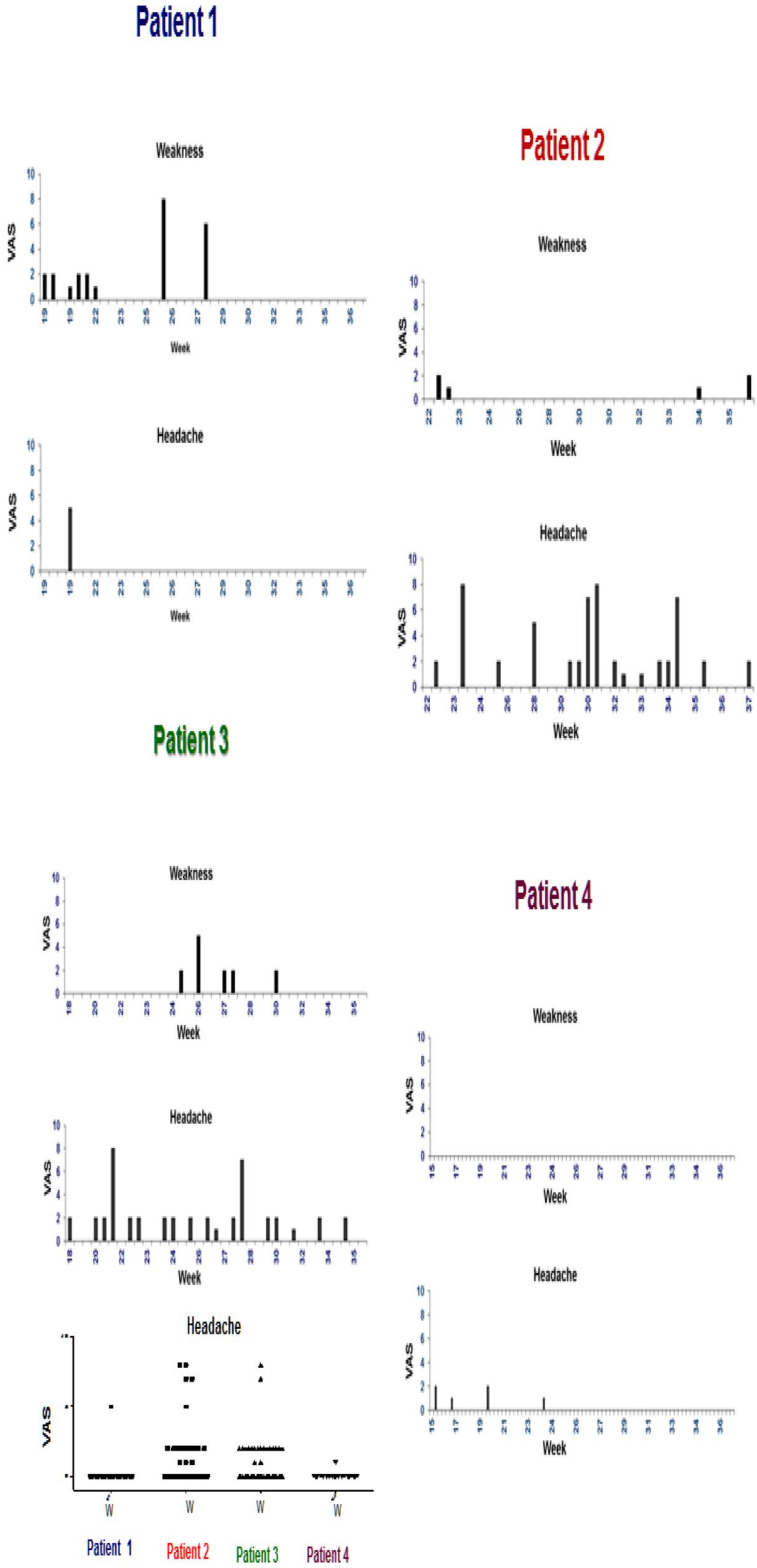
Introduction and Objectives: Fetal neonatal alloimmune thrombocytopenia (FNAIT) is a life threatening bleeding disorder in the fetus/ neonate caused by maternal alloantibodies directed against fetal human platelet antigen (HPA) inherited from the father. In 85% of NAIT cases the immuno dominant is HPA 1a. In Caucasians the allele frequencies of HPA-1a and HPA1b are 85 and 15% respectively. In order to prevent the delivery of a newborn with intracranial hemorrhage, one of the serious complication of FNAIT, treatment with intravenous immunoglobulin G (IVIG) with or without steroids is currently the standard treatment. We assessed whether high dose IVIG administered by skilled center will reduce side effects related to the treatment.

Methods: During the last 4 years, our Center treated 24 women with high dose IVIG because of FNAIT. For studding that , we followed prospectively in the last year 4 pregnant women treated with IVIG for approximately 21 weeks , 3 of those were treated with IVIG at standard dose of 1g/kg /week and the remaining one at dose of 1.5gr/kg/week and steroids at dose of 0.5mg/kg/d initiated at 31 weeks until term . Two of the women received IVIG (Gammagard , Baxter U.S) and the other 2 women were treated initially with Gammagard and then switched to IVIG (Gamunex) because of Gammagard shortage.

Results and conclusions: Three women complained of mild headache 4-5 hours after treatment was finished and which relieved by acetaminophen. Fatigue was another complains which last for at least 24 hours after. The success of IVIG treatment (higher platelet counts in newborn following treatment) was to some extent related to the fact that the women came regularly to treatments without any rescheduled or postponed treatment. All 4 women claimed that being treated with IVIG in a group for the same purpose and with the same drug improved their wellbeing in regard to FNAIT diagnosis and treatment. To the same conclusions came 6 more women that came to our clinic two years after given birth. In summary, we do believe that high dose of IVIG that given by skilled nurses and accompanied by group of women treated for the same purpose could reduce dramatically side effects attributable to the drug and augment success to IVIG treatment.





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