



University
Hospitals Sussex
NHS Foundation Trust

Immunoglobulin Shortage

Patient information

Who is this leaflet for?

You are being given this leaflet if you receive immunoglobulin therapy, either to support an immune system that is under producing antibodies (primary or secondary antibody deficiency) or to help treat a condition resulting from an overactive immune system.

What is in this leaflet?

This leaflet explains:

- Why immunoglobulins are currently in short supply.
- What this shortage means for you.
- What you should do if you experience any problems after a change in your immunoglobulin treatment.

Why is there a shortage of immunoglobulin?

In the UK immunoglobulins are prepared from human blood donations, from the USA and mainland Europe. Following the global spread of the Covid-19 infection and lockdown restrictions, blood donations stopped for many months and then restarted at a much lower rate due to social distancing measures.

As well as this shortfall, there has been a sharp rise in demand for immunoglobulin therapy during the pandemic. Some conditions which may have been treated with powerful immune suppressive medicines before the pandemic have been treated with immunoglobulins instead, as doctors were reluctant to suppress patient's immune systems, in case this made people more susceptible to Covid-19.

This means that the UK does not have enough of its normal immunoglobulin preparations to meet current demand.

How long will this shortage last?

It takes around 8-10 months from blood being donated until it is ready to be used as a medicine because of the complex manufacturing processes required to produce immunoglobulin. Even as blood donation centres return to normal, the shortages of immunoglobulin will continue for a number of months. These shortages are international and the UK is not alone in experiencing a decline in supply. All manufacturers are affected and hospitals have little choice as to which types of immunoglobulin they are allowed to purchase. We expect the current limitation in supply to last into 2022.

What is University Hospitals Sussex NHS Foundation Trust doing to manage this shortage?

University Hospitals Sussex NHS Foundation Trust has been working together with NHS England and the regional immunoglobulin panel to manage this shortage. At present, supply is reviewed and allocated to patients on a month to month basis.

The panel is working with doctors to make sure immunoglobulins are used appropriately, so that patients who need therapy can continue to be treated.

What does this mean for me?

It is likely that you may experience a change to your current therapy. These could include:

- a change in the brand of immunoglobulin used.
- a switch to an alternative treatment where appropriate (replacing immunoglobulin).
- a temporary break in therapy (e.g. saving immunoglobulin for the winter months).
- a lower dose or a longer gap between doses.

All decisions about your immunoglobulin treatment will be made in consultation with the team caring for you. Wherever possible, we will use alternatives to immunoglobulin therapy, monitoring your condition and immunoglobulin blood levels closely.

Who can I contact for further information and advice?

The day unit nurses will monitor you closely during each infusion and will be able to answer any questions you have during the infusion. If you feel unwell after a change to your medication, please report this to your doctor or to the nurses at your next appointment.

Contact details for the day units at Brighton and Princess Royal Hospitals are:

**Haematology Day Case Unit,
Royal Sussex County Hospital,
01273 696955 Ext 63805**

**Clayton Day Case Unit, Princess Royal Hospital,
01444 441881 Ext 68444 / 68429**

This leaflet is intended for patients receiving care in Princess Royal hospital and the Royal Sussex County Hospital

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Author: Alison Danahay, Dr John Laurie
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Royal Sussex
County Hospital
Eastern Road
Brighton
East Sussex
BN2 5BE

Princess Royal
Hospital
Lewes Rd
Haywards Heath
RH16 4EX