



National Emergency Blood Management Committee

October 2, 2020

Dear Colleagues:

Re: Immunoglobulin (Ig) Inventory Update and Action for Hospitals

Immunoglobulin (Ig) products (IVIg and SCIg) inventory and utilization, by nature of increasing global demand for a variety of chronic clinical conditions and dependency on strong plasma donor sufficiency have been an area of focus and activity for several years. Product supply is critically linked to the availability of plasma donors and Ig supply stability has become a global concern. Since 2018-2019, there has been a worldwide shortage of adequate Ig supply and the situation has been worsened by the COVID-19 pandemic due to supply chain disruptions and decreased plasma collections.

At this time there is a healthy inventory of Ig products to meet patient needs in the provincial and territorial jurisdictions served by Canadian Blood Services. However, there are early signs of possible supply disruptions with a higher risk of disruption for IVIg than SCIg. Modelling by Canadian Blood Services suggests there is a risk of shortage in the Fall of 2021 if overall supply availability does not improve, or an unexpected event occurs, and demand trends remain the same or increase. Prior to this, a shortage of specific vial sizes and brands in the coming months is anticipated which could require transitioning individual patient treatment to accommodate product availability.

To prepare for the potential shortages of specific vial sizes and brands of Ig products, and to preserve the supplies for clinical conditions with no alternatives, we are requesting that Ig prescribers and transfusion medicine leaders within hospitals take the following actions as soon as possible:

1. Review *The National Plan for Management of Shortages of Immunoglobulin Products (Ig) – Interim Guidance* which was recently approved by the Conference of Deputy Ministers (CDM) and is now available on the [NAC website](#).
2. Work with your provincial and hospital/RHA emergency blood management committees to develop Ig shortage management plans that are congruent and complimentary with the national interim guidance. It is important that all stakeholders understand their role and responsibilities in the event of an Ig shortage prior to the activation of the plan. This will ensure a consistent, coordinated and effective response to any potential Ig shortage.
3. Ensure the utilization of Ig products follows best practices and provincial / territorial guidelines (indications, optimal use guides, modality of administration, and doses). A dose calculator based on adjusted body weight should be used for adult patients. Body weight adjustments for dosing and titration to lowest effective dose are considered best practices.
4. Confirm your laboratory information system (LIS) is configured to accept all Ig brands and vial sizes carried by Canadian Blood Services. To ensure product is available for all patients who require Ig, Canadian Blood Services may issue any Ig product to hospitals regardless of preferred brand. For a complete list of products and codes please refer to the [Immunoglobulin Order Form](#).

*The National Emergency Blood Management Committee is comprised of the National Advisory Committee on Blood and Blood Products, Provincial Territorial Blood Liaison representatives and key Canadian Blood Services personnel. This group develops recommendations and provides advice to the P/T Ministries of Health, hospitals and regional health authorities, and Canadian Blood Services to support a consistent and coordinated response to critical blood shortages in Canada.

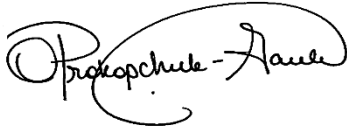
5. Ensure all Ig administration policies and procedures facilitate and provide direction for brand switching. Hospital transfusion services will be notified by Canadian Blood Services prior to product distribution if brand substitutions must occur due to Ig brand supply constraints. The impact to duration of appointments and nursing should be clearly communicated to patients, nursing staff and hospital administrators at that time.
6. Continue supplying no more than 3 months of SCIg at a time to patients on home infusion products. This is to enable continuing supply availability for patients.
7. Explore the increased use of potential alternatives to Ig therapy to maximize supply for conditions without such alternatives.

Your support and collaboration in advance of a potential supply disruption is critical as we focus on ensuring patients requiring treatment with Ig products receive it. The National Emergency Blood Management Committee will continue to convene, as necessary, to provide further guidance as this situation evolves. We recognize the inconvenience and challenges this will cause for hospitals, transfusion services, clinicians, nurses and patients and we will ensure that all are given as much notice as possible should further actions be required.

Please share a copy of this communication with other healthcare professionals and clinicians with interest and experience relevant to the use of Ig products.

Sincerely,

Co-Chairs, National Emergency Blood Management Committee



Dr. Oksana Prokopchuk-Gauk
Chair, National Advisory Committee
on Blood and Blood Products



Dr. Isra Levy
Vice-President, Medical Affairs and Innovation
Canadian Blood Services

The National Plan for Management of Shortages of Immunoglobulin Products (Ig) – Interim Guidance

The National Advisory Committee on Blood and Blood Products (NAC) and Canadian Blood Services Provincial/Territorial Blood Liaison Committee (CBS-P/TBLC) tasked the National Emergency Blood Management Committee (NEBMC) Secretariat with leading the development of the plan over the months of May–July 2020. The plan is the result of the collaborative efforts of stakeholders from across the country who lent their expertise and guidance to this important work. Diverse perspectives were heard and incorporated, including those of patient groups, societies, Ig prescribers and other clinicians, provincial/territorial (P/T) ministries of health, NAC members, Canadian Blood Services and others.

The work to develop a full national Ig shortage management plan is expected to commence this fall and to be completed within 24 months. The interim Ig plan and its learnings will serve as a framework to directly inform the development of the full plan. As detailed in Appendix E of the interim Ig plan, this will include a review and refresh of the ethical framework, an exploration of adjudication options beyond the current framework, and an environmental scan of alternative therapies for clinical conditions for which Ig is used.

*The National Emergency Blood Management Committee is comprised of the National Advisory Committee on Blood and Blood Products, Provincial/Territorial Blood Liaison representatives and key Canadian Blood Services personnel. This group develops recommendations and provides advice to the P/T Ministries of Health, hospitals and regional health authorities, and Canadian Blood Services to support a consistent and coordinated response to critical blood shortages in Canada.