UK Health Security Agency

Administration of human normal immunoglobulin (HNIG) for measles post-exposure prophylaxis

HNIG use

Human normal immunoglobulin (HNIG) products manufactured for subcutaneous administration are used as post-exposure prophylaxis to attenuate measles in susceptible immunocompetent infants and pregnant women.

These products may be given via intramuscular or subcutaneous routes. Given the urgent clinical need for measles post-exposure prophylaxis, it is reasonable and routine to use available HNIG products intramuscularly as this means they can be given easily in the community or in outpatient settings.

Key points

Subgam® HNIG from Bio Products Laboratory (BPL) is centrally supplied by the UK Health Security Agency (UKHSA) for post-exposure use against measles infection. Other human immunoglobulin products are suitable for measles post-exposure prophylaxis (PEP) as listed in annex 3 of the UKHSA National Measles Guidelines[1].

NHS trusts are encouraged to stock, or ensure they have access to local stock of, HNIG products to support timely administration within recommended PEP windows.

HNIG will attenuate (rather than prevent) measles in susceptible immunocompetent infants and pregnant women exposed to measles. Guidance on identifying immunocompetent vulnerable contacts to inform assessment of eligibility for HNIG is set out in the UKHSA National Measles Guidelines[1].

Timing of HNIG administration

HNIG is most effective if given within 72 hours of exposure but may still have some limited effectiveness if given within 6 days. Where a second exposure occurs more than 3 weeks after a first dose of HNIG, a further dose should be given.

[1] https://www.gov.uk/government/publications/national-measles-guidelines

Intramuscular injection

If HNIG is given intramuscularly, administer it deeply into a large muscle such as the anterolateral thigh. These products must not be injected intravenously.

If more than 2 to 3ml is to be given to young children or infants, or more than 5ml to older children and adults, divide the dose into smaller amounts and give into different sites.

Before injection it is better to allow the solution to reach room temperature rather than inject straight from the fridge.

Further information on adverse reactions to vaccine and immunoglobulin, including how these should be managed and reported, can be found at Immunisation against infectious disease: the Green Book[2].

Dosage

Infants under one year: 0.6ml/kg up to a maximum of 1,000mg.

Pregnant women: approximately 3,000mg. This is a biological product and vial volumes may vary slightly.

Storage

Store in a refrigerator (2°C to 8°C).

Do not freeze.

Further information

Further advice is available from our website:

General product information and how to administer immunoglobulin (issued August 2020)[3]

National Measles Guidelines[1]

Off-label or unlicensed use of medicines: prescribers' responsibilities[4]

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[2] https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book.
[3] https://www.gov.uk/government/publications/immunoglobulin-when-to-use/general-product-information-and-how-to-administer-immunoglobulin-issued-august-2020
[4] https://www.gov.uk/drug-safety-update/off-label-or-unlicensed-use-of-medicines-prescribers-responsibilities.