

Rabies Immune Globulin Update

Update to York Region Health Care Providers as of August 29, 2019

Rabies Immune Globulin Sparing Guidelines for Ontario – Dilution Clarification

The Ministry of Health has provided clarification on the dilution of Rabies Immune Globulin (Rablg) in an updated Rabies Immune Globulin-Sparing Guidelines for Ontario (see attached). This current communication does not replace the previous “Rabies Immune Globulin Provincial Shortage and Formulation Change” memo dated August 19th, but rather provides an update that helps clarify information regarding Rablg dilution.

What do you need to know about Rablg Dilution?

- When more than one wound exists, each wound should be locally infiltrated with a portion of the Rablg using a separate needle and syringe. **In such instances, the Rablg can be diluted in a diluent permitted by the specific product labelling in order to provide the full amount of Rablg required for thorough infiltration of all wounds.**
- Different products may have different dilution instructions. It is important to review the appropriate product monograph prior to dilution of the calculated dose if any such dilution is required.
- IMOGAM Rabies Pasteurized may be diluted 2-fold to 3-fold in a solution of 0.9% sodium chloride in order to provide the full amount of human rabies immunoglobulin required for appropriate infiltration of wounds and surrounding area.
- HYPERRAB may be diluted with an equal volume of dextrose, 5% (D5W), if additional volume is needed to infiltrate the entire wound. Do not dilute with normal saline.

How to contact York Region Public Health:

To discuss a potential animal exposure or rabies risk assessment, or if you have questions or requests for Rabies Post-Exposure Prophylaxis (rPEP) including Rablg administration or dilution, call Health Connection at 1-800-361-5653 on weekdays between 8:30 am and 4:30 pm or at 1-888-335-0111 after hours and on weekends or holidays.

For more information related to rabies and rPEP:

Ontario Ministry of Health, Management of Potential Rabies Exposures Guideline, 2019

Ontario Ministry of Health, Rabies Immune Globulin–Sparing Guidelines for Ontario – August 22, 2019

Health Protection

17250 Young Street
Newmarket, Ontario L3Y 6Z1
1-800-361-5653
york.ca/rabies



Rabies Immune Globulin Provincial Shortage and Formulation Change Update, August 19, 2019:

<https://www.york.ca/wps/wcm/connect/yorkpublic/193bfd73-7624-4fc0-8e4a-311fd7bc0413/ENS+Rabies+Immune+Globulin+Provincial+Shortage+and+Formulation+Change.pdf?MOD=AJPERES>

IMOGAM Rabies Pasteurized Monograph:

<http://products.sanofi.ca/en/imogam-rabies-pasteurized.pdf>

HYPERRAB Rabies Immune Globulin [Human] Monograph:

<https://www.grifols.com/documents/10192/89815/ft-hyper-rab-us-en/09f14ece-e450-48f8-9137-3ce7e0aaa8c6>

August 22, 2019

Rabies Immune Globulin–Sparing Guidelines for Ontario:

For cases where rabies post-exposure prophylaxis has been recommended

Due to a recent human case of rabies in Canada resulting from a bat exposure, there has been a significant increase in the use of rabies immune globulin (Rablg) both in Ontario and across Canada. As a result, the available supply of Rablg is currently limited.

The World Health Organization (WHO) no longer recommends injecting the remainder of the calculated Rablg (WHO uses the term RIG in their guidelines) dose IM at a site distant from the site of exposure.¹ Based on this newer WHO position and the current limited supply of Rablg, please follow the Rablg-sparing steps below when administering rabies post-exposure prophylaxis.

Rablg-Sparing Protocol

This protocol relates to the use of Rablg. Treatment of any wounds (thorough cleaning, flushing, antibiotics, analgesics, tetanus vaccination etc.) and the administration of rabies vaccines should follow normal protocols.²

1. Calculate the dose of Rablg (20 IU/kg body weight) and the number of vials required for this dose.
2. Draw up one vial at a time in order to save any unopened vials that you don't use.
3. Infiltrate as much of the calculated dose as possible around the wound(s) or site of exposure (if a bite or scratch is not evident).

Note: Infiltration of wounds with Rablg in some anatomical sites (finger tips) must be carried out with care in order to avoid increased pressure in the tissue compartment. When more than one wound exists, each wound should be locally infiltrated with a portion of the Rablg using a separate needle and syringe. **In such instances, the Rablg can be diluted in a diluent permitted by the specific product labelling in order to provide the full amount of Rablg required for thorough infiltration of all wounds.**²

4. If the entire calculated dose of Rablg cannot anatomically be infiltrated around the wound(s) or site of exposure, **do NOT give the remainder of the dose IM**. Save any unopened vials for use in another case.
5. For situations that are not clear, the attending healthcare provider makes the final decision regarding the administration of Rablg, along with input from the Medical Officer of Health.

¹Weekly Epidemiological Record, 20 April 2018, vol. 93, 16 (pp. 201–220) Rabies vaccines: WHO position paper – April 2018. WHO Strategic Advisory Group of Experts (SAGE) on immunization. Available from: <https://www.who.int/wer/2018/wer9316/en/>.

²Canadian Immunization Guide: Part 5 - Passive Immunization, *January 2019*. Available at: <https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-5-passive-immunization.html#p5a4e>.