

Infection Sciences – Immunisation (passive)

Hepatitis B Immune Globulin (HBIG)

Hepatitis B immune globulin (HBIG) is issued by UK Health Security Agency (UKHSA). Very limited stock is kept in the **Pharmacy** of Musgrove Park Hospital. **This immune globulin is only issued by direct authorisation of a Consultant Microbiologist.** When requesting HBIG, please ensure that you know the date, time and exact nature of the incident or exposure.

The laboratory provides an "urgent" service to detect the presence of HbsAg in the potential donor. Tests are generally done only during the day.

HBIG is indicated for non-immune persons who have been inoculated, or have mucosal contamination, with HBsAg positive blood (also for "vaccine non-responders" following significant exposure to blood from an unknown source).

HBIG is also given to prevent infection in the newborn from a HBsAg carrier mother.

Sexual contacts of HBsAg positive partners may get vaccine or HBIG, depending on the circumstances.

HBIG is best given within 48 hours, preferably within 12 hr, of exposure (certainly no later than one week).

Vaccination should be commenced at the same time, given at a different site.

Varicella Zoster Immune Globulin (VZIG)

Varicella Zoster immune globulin (VZIG) is issued by UK Health Security Agency (UKHSA). Limited stock is kept in the **Pharmacy** of Musgrove Park Hospital. **This immune globulin is only issued by direct authorisation of a Consultant Microbiologist.** Discuss each case with the Consultant Microbiologists.

The infectious period for chickenpox is generally considered as being from 48 hours before, to five days after, onset of rash. The infectious period for localised and disseminated shingles is considered as being from onset of rash until all of the lesions have crusted over.

Please ensure that you know the date, time and exact nature of the exposure(s) - (?face-to-face, location, duration etc). Significant contacts include living/staying in same household, face-to-face contact such as conversation, being in same "small" room for ≥ 15 min.

For shingles – where on body? Is person immunosuppressed?

Has the contact had chickenpox in the past? (Tip: ask the contact's mother)

All contacts of chickenpox or shingles who may require VZIG should have their blood checked for antibodies; VZIG is not indicated for any person with demonstrable antibodies.

VZIG may be indicated for antibody negative pregnant women of any gestation - within 10 days of exposure.

VZIG is also indicated for many immunosuppressed patients – best given within 7 days of contact but can be given up to 14 days from contact.

VZIG may be issued to neonates whose mothers develop chickenpox 7 days before to 7 days after delivery, and neonates in contact with chickenpox or exposed shingles during the first 7 days of life, whose mothers are antibody negative. It may also be considered in infants < 1yr who have remained in hospital since birth because of prematurity or congenital conditions.

Note: VZIG may not prevent infection even if given within 3 days of exposure, but it may attenuate the disease if given within 10 (-14) days.

Rabies

In the very rare event that rabies immunisation is required, contact the UKHSA **Health Protection Unit** (tel: 0300 303 8162, or if "out-of-hours" via the hospital switchboard) who will arrange for supplies from elsewhere.

Clinical information required to assess the need includes:

- Incident: date; country and town where occurred
- Bite/injury: site and nature
- Animal: species involved; date animal last seen alive; name & address of owner if known

Tetanus Immune Globulin

Limited stock of tetanus immune globulin is kept in the **Blood Transfusion department** of Musgrove Park Hospital. Tetanus immune globulin is indicated for tetanus prone wounds.

Tetanus-prone wounds include:

- wounds or burns that require surgical intervention that is delayed for more than six hours
- wounds or burns that show a significant degree of devitalised tissue or a puncture-type injury, particularly where there has been contact with soil or manure
- wounds containing foreign bodies
- compound fractures
- wounds or burns in patients who have systemic sepsis.

Further Information

For further information see:-

- the UKHSA immunoglobulin website
- <https://www.gov.uk/government/publications/immunoglobulin-when-to-use>
- or the Dept of Health immunisation guidance
- <https://www.gov.uk/government/collections/immunisation-against-infectious-disease-the-green-book>

Antibiotic Guidance

For guidance on antibiotic prophylaxis and treatment of bites & trauma wounds, see Skin & Soft Tissue section of our Antimicrobial Prescribing Guidelines