### Other Names
HyperHEP B SD

### Pre-Transfusion Sample
Not Required

### Consent Required
Yes

### Approval Requirements
NA

### Product Description
Sterile solution of hepatitis B hyperimmune globulin for intramuscular administration. It is prepared from human plasma selected for high titres of antibody to hepatitis B surface antigen (Anti-HBs). Solvent-detergent and heat treated for viral inactivation. Contains no preservatives. Supplied in 0.5 mL and 1.0 mL single dose disposable syringe with attached needle and 5.0 mL single dose vial.

### Clinical Indications
This product provides passive immunization for individuals exposed to hepatitis B virus (HBV). It is indicated for post-exposure prophylaxis in the following situations, unless the individual has pre-existing antibodies to hepatitis B virus surface antigen at greater than or equal to 10 IU/L.

- **Acute exposure to blood containing HBsAg**: after parenteral exposure (e.g. needlestick injury), direct mucous membrane contact or oral ingestion.
- **Perinatal exposure of infants born to HBsAg-positive mothers**.
- **Sexual exposure to an HBsAg-positive person**.
- **Household exposure to persons with Acute HBV infection**: prophylaxis of infants less than 12 months of age is indicated if the mother or primary care-giver has acute HBV infection.

### Contraindications
- Should not be given to patients who are hypersensitive to this drug or any ingredient in the formulation or component of the container.
- Patients with severe thrombocytopenia or any coagulation disorder (intramuscular injection contraindicated). Hepatitis B Immune Globulin should be given only if the expected benefits outweigh the risks.

### Risks
Localized pain and tenderness at the injection site, allergic/anaphylactic reactions, and transmission of infection. Should be given to a pregnant woman only if clearly needed.

### Dosage
The Canadian Immunization Guide and the BC Centre for Disease Control recommend that Hepatitis B Immune Globulin be given along with a regimen of hepatitis B vaccine.

<table>
<thead>
<tr>
<th>Exposure</th>
<th>Dosage</th>
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<tbody>
<tr>
<td><strong>Acute exposure to blood containing HBsAg</strong></td>
<td>See product insert for dosing chart.</td>
</tr>
<tr>
<td><strong>Infants born to HBsAg positive mothers</strong></td>
<td>0.5 mL given immediately after birth and preferably within 12 hr of birth.</td>
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<tr>
<td><strong>Sexual exposure to an HBsAg-positive person</strong></td>
<td>0.06 mL/kg single dose to be given within 14 days of last sexual contact.</td>
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<tr>
<td><strong>Household exposure to persons with acute HBV infection</strong></td>
<td>0.5 mL dose for infants under the age of 12 months who have been exposed to a primary care-giver who has acute HBV infection. Prophylaxis for other household contacts is not indicated unless they have had identifiable blood</td>
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</table>
exposure to the infected person, such as by sharing toothbrushes or razors. Such exposures should be treated like sexual exposures.

**Administration**

| Administer pre medications as ordered. |
| Refer to Intramuscular Injection procedure. |
| Administer Hepatitis B Immune Globulin by intramuscular injection. |
| See product insert for administration directions for single dose syringe and vial. |

⚠️ **NEVER ADMINISTER INTRAVENOUSLY.**

**Compatible Solution**

| NA |

**Infusion Rates**

| 1 mL per 10 seconds as per IM injection procedure. |

**Monitoring**

| Monitor patient for allergic/anaphylactic adverse effects. Mild systemic and local reactions are treated symptomatically. |

**Storage Conditions**

| Stored in a monitored blood product storage refrigerator at 1 – 6 ºC. Return hepatitis B immune globulin and Transfusion Record to Transfusion Medicine within 20 minutes from time of issue if there are any delays in administration. Do NOT refrigerate on nursing unit. |

**References**

- **Product monograph**: HyperHEP B SD, Grifols Canada Ltd, February 2012.
- [BC Centre for Disease Control Communicable Disease Control](https://www.bccdc.ca) – Hepatitis B.