# **Anti-D**

# Rh(D) immunoglobulin-VF General Info Sheet – for GPs

### What is it?

Rh(D) Immunoglobulin-VF (Anti-D) is a human immunoglobulin preparation for intramuscular administration.

#### **Indications**

If a pregnant woman has a Rh(D) negative blood group and her baby is Rh(D) positive, the baby's blood is incompatible with the mother's and this could cause Haemolytic Disease of the Newborn (HDN). HDN may lead to serious complications such as severe anaemia, brain damage and even death of the baby in rare cases. Anti-D can prevent HDN from developing.

Anti-D is sometimes given on other occasions when a woman of child-bearing age with a Rh(D) negative blood group is exposed to Rh(D) positive blood: for example,

- · after blood transfusion,
- amniocentesis (taking a sample of the fluid surrounding the unborn baby),
- miscarriage or stillbirth.

Further specific information is available from the:

- Guidelines on the prophylactic use of Rh D immunoglobulin (anti-D) in obstetrics https://www.blood.gov.au/system/files/documents/glines-anti-d.pdf
- ARCBS website <a href="http://www.transfusion.com.au/blood\_products/fractionated\_plasma/immunoglobulins">http://www.transfusion.com.au/blood\_products/fractionated\_plasma/immunoglobulins</a>
- Product information sheet <a href="http://www.csl.com.au/docs/713/52/Rh(D)%20Immunoglobulin-VF%20AU%20PI%2012.00.pdf">http://www.csl.com.au/docs/713/52/Rh(D)%20Immunoglobulin-VF%20AU%20PI%2012.00.pdf</a>
- ARCBS Fact Sheet for patients <a href="http://resources.transfusion.com.au/cdm/ref/collection/p16691coll1/id/232">http://resources.transfusion.com.au/cdm/ref/collection/p16691coll1/id/232</a>

### **Contraindications**

Anti-D should not be given to:

- A Rh(D) positive woman
- Individuals who have severe thrombocytopenia or any coagulation disorder that would contraindicate intramuscular injections.

If product is turbid or cloudy, or contains any sediment or particles, the bottle should be returned unopened to the provider with an explanation. Do not administer.

### **Precautions**

- Anti-D MUST NOT be administered intravenously because of the potential for anaphylactic reactions.
- Injections must be given IM, and care should be taken to draw back on the plunger of the syringe before injection in order to be certain that the needle is not in a blood vessel.

## **Administration**

Anti-D should be brought to room temperature before use, and given slowly by deep intramuscular injection using an appropriate sized needle.

The product does not contain an antimicrobial preservative. It must, therefore, be used immediately after opening the vial.

Any unused solution must be discarded appropriately.



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### Dosage:

## Routine antenatal prophylaxis

- 625 IU around 28 weeks and
- 625 IU around 34 weeks

### Following antenatal 'sensitising' events

• The dose should be given as soon as possible and within 72 hours of the event.

Sensitising events include normal delivery, miscarriage, termination of pregnancy, ectopic pregnancy, chorionic villus sampling, amniocentesis, cordocentesis, abdominal trauma considered sufficient to cause foeto-maternal haemorrhage, antepartum haemorrhage and external cephalic version.

- 250 IU after sensitising events in the first trimester of pregnancy
- 625 IU after sensitising events beyond the first trimester.
  - If the gestational age is not known with certainty and the possibility exists that the gestational age is 13 weeks or more, 625 IU should be given.
- In twin and multiple pregnancies in the first trimester, 625 IU should be given.

## Following the birth of a Rh (D) positive infant

625 IU

Ordered by the Medical Officer.

#### **Blood Tests**

Need to be taken prior to the 28 week dose.

## **Observations**

IM injections are given under constant visual supervision

### **Adverse effects**

Reactions are very uncommon after injection with Anti-D.

However, some pain, redness and stiffness may be apparent at the injection site. This may occur after any large injection into a muscle.

Occasionally mild fever, chills, drowsiness or discomfort may be felt and an itchy rash may develop. True allergic responses are rare.

References:
ARCBS website
CSL product information
Flippin' Blood – Blood Safe, Dept of Health S.A.
FAQ's – EH intranet > Clinical Services > Blood Matters
National Blood Authority website