Public Health England

HPA expert working group interim guidance on the use of tetanus immunoglobulin for the treatment of Tetanus

In January 2013, the Health Protection Agency (HPA) convened an expert working group to review the published evidence on the use of tetanus immunoglobulin (TIG) for the treatment of tetanus, in light of the following issues:

1. Lack of international consensus on the recommended treatment dose of Tetanus Immunoglobulin (TIG)

The clinical management of tetanus includes a range of measures including passive immunisation with tetanus immunoglobulin (TIG). International guidelines for the use of TIG to treat suspected cases vary markedly, ranging from 500IU TIG (intramuscular injection) based on WHO recommendations to between 5,000-10,000 IU (intravenous administration) according to the Green Book (WHO 2010, DH 2009).

2. Limited Supplies of Tetanus Immunoglobulin in England and Wales

Since 2008, supplies of TIG for tetanus prophylaxis and treatment have been limited in England and Wales (E&W). As a result, the use of TIG has been restricted to patients requiring treatment for suspected tetanus. However, due to a lack of availability of the intravenous (IV) product in E&W, the intramuscular preparation of TIG had been recommended for the treatment of suspected tetanus. This requires the administration of large volumes of the intramuscular product via multiple injections which is often unachievable. As a result, in 2011 (updated 2013), the HPA advised the use of IV human normal immunoglobulin (HNIG; Vigam) as a suitable alternative when supplies of IV TIG cannot be sourced, following antibody testing of Vigam products.

Whilst a formal review on the use of tetanus immunoglobulin for the treatment of tetanus is being completed, the HPA expert working group has proposed the following interim guidance which has been passed by the Joint Committee on Vaccination and Immunisations (JCVI) in February 2013.

Public Health England

Interim Guidance

To advise the use of intravenous products only for the treatment of clinically suspected tetanus. It is recommended that when supplies of IV TIG are limited, IV HNIG (Vigam) is used based on weight.

- For individuals less than 50 kg, 5,000 IU or 250mls IV HNIG (Vigam)
- For individuals over 50 kg, 10,000IU or 500mls IV HNIG (Vigam)

References

Department of Health, Immunisation against infectious diseases (2009): *Tetanus Chapter.* [Internet] accessed 15 February 2013.

Health Protection Agency, HPA Tetanus Expert Working Group (2013), Interim Guidance on the use of Tetanus Immunoglobulin for the treatment of Tetanus.

Health Protection Agency (2011) (2013) Recommendations on the treatment and prophylaxis of tetanus [internet] accessed 25 March 2013. http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1210060163478

WHO. Current recommendation s for treatment of tetanus during humanitarian emergencies. WHO technical note .January 2010. http://whqlibdoc.who.int/hq/2010/WHO_HSE_GAR_DCE_2010.2_eng.pdf

Members of HPA Expert Working Group

Dr Susan Alleyne	Dr Gayatri Amirthalingam
Dr Mary Ramsay	Dr Nicholas Beeching
Dr Lucy Cottle	Dr Louise Thwaites
Laura Craig	Matthew Olley
Joanne White	