Summary of recommendations – National Clinical Guidelines for Immunoglobulin Use (Second Edition), May 2008

Condition	Recommend?		Recommendation/ Evidence grade
	Short-term	Long-term	
Immunology			
Impaired specific antibody production	NO	SELECTED	C, III
Kawasaki disease	YES	NO	A, Ia
Primary immunodeficiencies	SELECTED	YES	B, IIb
Secondary antibody deficiencies			
Haematology			
Acquired red cell aplasia due to parvovirus B19	SELECTED	NO	C, III
Adult HIV-associated thrombocytopenia	SELECTED	NO	A, Ib
Alloimmune thrombocytopenia – fetal therapy (treatment to the mother)	YES	NO	C, III
Alloimmune thrombocytopenia – neonatal therapy	SELECTED	NO	C, III
Autoimmune (acquired) haemophilia	SELECTED	NO	C, III
Autoimmune haemolytic anaemia	SELECTED	NO	C, III
Autoimmune thrombocytopenia	SELECTED	NO	A, Ia
Evans' syndrome	SELECTED	NO	C, III
Haemolytic disease of the fetus and newborn (isoimmune haemolytic jaundice in neonates)	SELECTED	NO	C, III
Haemophagocytic lymphohistiocytosis/ haemophagocytic syndrome	SELECTED	NO	C, III
Idiopathic thrombocytopenic purpura – paediatric (<16 years)	SELECTED	NO	A, Ib
Idiopathic thrombocytopenic purpura – adult	SELECTED	NO	A, Ia
Post transfusion purpura	SELECTED	NO	C, III
Acquired red cell aplasia NOT due to parvovirus B19			
Acquired von Willebrand disease			
Aplastic anaemia/pancytopenia			
Autoimmune neutropenia			
Haemolytic uraemic syndrome			
Post-exposure prophylaxis for viral infection if intramuscular injection is contraindicated, or treatment when hyperimmune immunoglobulins are unavailable			
Post-transfusion hyperhaemolysis (usually in patients with sickle cell disease)			
Systemic lupus erythematosus with secondary immunocytopenias			
Haemato-oncology			
Chronic lymphocytic leukaemia	NO	SELECTED	A, Ib
Haemophagocytic lymphohistiocytosis/ haemophagocytic syndrome	SELECTED	NO	C, III
Low serum IgG levels following HSCT for malignancy	YES	SELECTED	B, IIb
Multiple myeloma	NO	SELECTED	A, Ib
Graft versus host disease following allogeneic BMT or HSCT			
Infection following allogeneic BMT or HSCT			
POEMS (polyneuropathy, organomegaly, endocrinopathy, monoclonal gammopathy, skin changes)			
Neurology			
Chronic inflammatory demyelinating polyradiculoneuropathy	SELECTED	SELECTED	A, Ia
Dermatomyositis	SELECTED	SELECTED	B, IIa
Guillain-Barré syndrome	SELECTED	NO	A, Ia
Lambert Eaton myasthenic syndrome	SELECTED	SELECTED	A, Ib
Multifocal motor neuropathy	SELECTED	SELECTED	A, Ia
Myasthenia gravis	SELECTED	SELECTED	B, Ia
Paraprotein-associated demyelinating neuropathy (IgG or IgA)	SELECTED	SELECTED	A, Ia
Paraprotein-associated demyelinating neuropathy (IgM)	NO	SELECTED	A, Ib
Rasmussen syndrome	NO	SELECTED	B, IIb
Stiff person syndrome	NO	SELECTED	A, Ib
Acute disseminated encephalomyelitis			
Acute idiopathic dysautonomia			
Autoimmune diabetic proximal neuropathy			
Bickerstaff's brain stem encephalitis			
Cerebral infarction with antiphospholipid antibodies			
CNS vasculitis			
Intractable childhood epilepsy			
Neuromyotonia			
PANDAS (paediatric autoimmune neuropsychiatric disorders associated with streptococcal infection)			
Paraneoplastic disorders			
POEMS (polyneuropathy, organomegaly, endocrinopathy, monoclonal gammopathy, skin changes)			
Polymyositis			
Potassium channel antibody-associated, non-limbic encephalitis			
Vasculitic neuropathy			
Dermatology			
Dermatomyositis	SELECTED	SELECTED	B, IIa
Immunobullous diseases	SELECTED	SELECTED	C, III
Toxic epidermal necrolysis, Steven's Johnson syndrome	YES	SELECTED	B, IIa
Atopic dermatitis/eczema			
Pyoderma gangrenosum			
Urticaria			
Paediatrics			
Alloimmune thrombocytopenia – neonatal therapy	SELECTED	NO	C, III
Fetal hydrops	SELECTED	NO	D, IV
Haemolytic disease of the fetus and newborn (isoimmune haemolytic jaundice in neonates)	SELECTED	NO	C, III
Idiopathic thrombocytopenic purpura (< 16 years)	SELECTED	NO	A, Ia
Toxin-related infection in paediatric intensive care	SELECTED	NO	C, III
Intractable childhood epilepsy			
PANDAS (paediatric autoimmune neuropsychiatric disorders associated with streptococcal infection)			
Paediatric rheumatology			
Juvenile dermatomyositis	SELECTED	SELECTED	B, IIa
Kawasaki disease	YES	NO	A, Ia
Juvenile systemic lupus erythematosus			
Other systemic vasculitides			
Systemic juvenile idiopathic arthritis			
Adult rheumatology			
Dermatomyositis	SELECTED	SELECTED	B, IIa
Catastrophic antiphospholipid syndrome			
Polymyositis			
Systemic lupus erythematosus			
Systemic lupus erythematosus with secondary immunocytopenias			
Systemic vasculitides and ANCA disorders			
Infectious diseases			
Necrotising (PVL-associated) staphylococcal sepsis	SELECTED	NO	C, III
Severe invasive group A streptococcal disease	SELECTED	NO	B, Ib
Severe or recurrent *Clostridium difficile* colitis	SELECTED	NO	C, III
Staphylococcal toxic shock syndrome	SELECTED	NO	C, III
Post-exposure prophylaxis for viral infection if intramuscular injection is contraindicated, or treatment when hyperimmune immunoglobulins are unavailable			
Transplantation			
CMV-induced pneumonitis following transplantation	YES	NO	A, Ib
Antibody incompatible transplantation			
Treatment of acute antibody-mediated rejection following solid organ transplantation			

Red signifies a disease for which treatment is considered the highest priority because of a risk to life without treatment. Blue indicates a disease for which there is a reasonable evidence base but where other treatment options are available; the use of immunoglobulin in these indications should be modified in times of shortage.

Grey indications are those for which the evidence base is weak, in many cases because the disease is rare; treatment should be considered on a case-by-case basis, prioritised against other competing demands for immunoglobulin, especially in times of shortage. Rare diseases not listed will be considered as grey indications.