Patients' views on subcutaneous IgG (SCIG) Home Therapy: results from The UK Subgam Study.

Abstract

Fifty patients with primary antibody deficiency (PAD) received weekly infusions of Subgam, an immunoglobulin G (IgG) recently licensed in the UK for subcutaneous (SC) use in adults and children. All patients had previously received intravenous (IV) = 6% or SC (n = 16) IgG for at least 8 months. They were asked to complete a questionnaire rating comfort and convenience of their prior treatment. After 3 and 6 months on Subgam, they were asked to rate their comfort and convenience, how they felt their symptoms had been and how they liked Subgam overall compared with their previous treatment. For analysis, patients were separated according to the route of previous treatment and age (adult, teenager or child). Results at 6 months are summarised below.

Methods

Study population

- Fifty patients with stable primary antibody deficiency (PAD)
- Receiving IVIG or SCIG for at least 6 months prior to study entry

Design

This assessment formed part of an open single arm study (described by Davis, Cosi and Johnson, this meeting). Patients received 3 infusions of their prior IgG before starting Subgam and were asked to complete a questionnaire rating comfort and convenience of that treatment. After 3 and 6 months of weekly subcutaneous infusions with Subgam, they (or in the case of young children, their carers) were asked to complete questionnaires to rate comfort and convenience of Subgam. How they felt their symptoms had been and how they liked Subgam overall compared with their previous treatment. For analysis, patients were separated according to age (adult = >18 years, teenagers = 12–18 years and children = <12 years). Opinions recorded after 6 months on Subgam compared with those given prior to treatment are presented below.

Results

- Overall, 90% of patients found infusions with Subgam more convenient than their previous IgG therapy. A significant number of patients felt that Subgam infusions were less painful and less inconvenient.
- Only 3 adult patients previously on SC IgG did not find Subgam infusions more convenient. For adults, 95% found Subgam more convenient compared with their prior IgG; for teenagers, 80% versus 40% children 100% vs 42%.
- Comfort ratings of ‘extremely’ plus ‘very’ comfortable were for: adults 93% for Subgam and 60% for prior IgG; teenagers 80% versus 40% children 100% vs 42%.
- Symptoms were regarded as being ‘much better’ plus ‘better’ in 52% of adults, 58% of teenagers and 66% of children. Only 4% of patients regarded symptoms as tiring.

Summary and conclusions

The advent of home therapy programmes has given many patients a better quality of life as it is more convenient than receiving infusions at hospital and allows patients to have a greater feeling of control over their condition. However, a similar number of patients are suited to home therapy with IV IgG. Subgam has good tolerability and is suitable for home therapy even in children and other patients with poor venous access.

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References