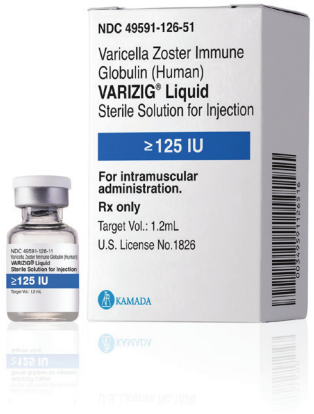
VARIZIG®
VARICELLA ZOSTER
IMMUNE GLOBULIN (HUMAN)

REDUCING VARICELLA SEVERITY COULD MEAN THE WORLD TO HIGH-RISK PATIENTS[1]

Varicella-zoster virus (VZV) infection remains a significant concern for high-risk populations lacking immunity to VZV.

VARIZIG® was proven to reduce varicella disease severity and is recommended as a first-line treatment by leading guidelines for VZV post-exposure prophylaxis in high-risk patients, including immunocompromised patients, pregnant women, and infants.[1-3]



INDICATION AND USAGE[1]

VARIZIG®, Varicella Zoster Immune Globulin (Human), is indicated for post-exposure prophylaxis of varicella in high-risk individuals. High-risk groups include: immunocompromised children and adults, newborns of mothers with varicella shortly before or after delivery, premature infants, neonates, and infants less than one year of age, adults without evidence of immunity, and pregnant women. VARIZIG administration is intended to reduce the severity of varicella.

TIMING OF ADMINISTRATION[1]

Administer as soon as possible after exposure to VZV, ideally within 96 hours (4 days), and up to 10 days post-exposure.

DOSING GUIDELINES

Weight (kg)	Weight (lbs)	Dose (IU)
≤2.0	≤4.4	62.5 IU
2.1-10.0	4.5-22.0	125 IU
10.1-20.0	22.1-44.0	250 IU
20.1-30.0	44.1-66.0	375 IU
30.1-40.0	66.1-88.0	500 IU
≥40.1	≥88.1	625 IU

ORDER VARIZIG[1]

VARIZIG is widely available. To order VARIZIG, please get in touch with your specialty distributor or visit: https://varizig.com/ordering-reimbursement/

IMPORTANT SAFETY INFORMATION:

VARIZIG® contains trace amounts of IgA. Individuals known to have anaphylactic or severe systemic (hypersensitivity) reactions to human immune globulin preparations should not receive VARIZIG®. IgA-deficient patients with antibodies against IgA and a history of hypersensitivity may have an anaphylactoid reaction. Thrombotic events may occur during or following treatment with immune globulin products. Administer VARIZIG® intramuscularly only. In patients who have severe thrombocytopenia or any coagulation disorder that would contraindicate intramuscular injections, only administer VARIZIG® if the expected benefits outweigh the potential risks. Severe hypersensitivity reactions may occur following VARIZIG® administration. In case of hypersensitivity, discontinue the administration of VARIZIG® immediately and provide appropriate treatment. Because VARIZIG® is made from human plasma, it may carry a risk of transmitting infectious agents, e.g., viruses, the variant Creutzfeldt-Jakob disease agent, and, theoretically, the Creutzfeldt-Jakob disease agent. The most serious adverse drug reactions observed in clinical trials for all subjects and patients include pyrexia, nausea, and vomiting. The most common adverse drug reactions observed in clinical trials for all subjects and patients were injection site pain, headache, chills, fatigue, rash, and nausea.

Please see full Prescribing Information for complete prescribing details. To report SUSPECTED ADVERSE REACTIONS, contact Kamada at pharmacovigilance@kamada.com

References:

1. VARIZIG [package insert]. Kamada Inc September 2022.
2. Bialek SR, Perella D, Zhang J, Mascola L, Viner K, Jackson C, et al. Impact of a routine two-dose varicella vaccination program on varicella epidemiology. Pediatrics. 2013;132(5): e1134-e1140.
3. Anne M. Lachiewicz, Megan L. Srinivas, Varicella-zoster virus post-exposure management and prophylaxis: A review, Preventive Medicine Reports, Volume 16,2019,101016, ISSN 2211-3355.

For more information about VARIZIG visit www.VARIZIG.com

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