

# Choosing Wisely®

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## IgG replacement therapy

When you need it—and when you don't

**S**ome people suffer from repeated and severe infections because their immune system can't make enough germ-fighting antibodies. A treatment known as immunoglobulin replacement (IgG) therapy can be a lifesaver for them. But other people receive the treatment even though they don't need it. That's not a good idea. Here's why.

### **The treatment doesn't help most people with frequent infections.**

About one in 1,200 people in the U.S. have a disorder known as PIDD, or primary immunodeficiency disease. They often have multiple, hard-to-cure attacks of pneumonia, sinusitis, and other infections, because they lack IgG antibodies—the body's chief weapon against bacterial infection—as well as other types of antibodies. IgG therapy can eliminate most of their infections. But it doesn't help people whose immune system already makes enough antibodies. In fact, it isn't even helpful for every form of PIDD. For example, people who lack only immunoglobulin A (IgA) antibodies don't benefit because they still have adequate levels of IgG. And it's



usually not necessary for people who are short on just a type of IgG antibody, because they often make enough to ward off infections or control them with antibiotics.

### **It can pose risks.**

The treatment involves injections of IgG antibodies into a vein or under the skin. Though side effects are more common with vein injections, both

can cause a serious allergic reaction, kidney failure, or headache and flu-like symptoms. In rare cases, patients with severe headaches can have irritation of the lining around the brain. Swelling, bruising, or infection can occur at the injection site. Finally, treatment is made from blood of human donors, so it carries a remote risk of transmitting viruses.

### **It can be expensive.**

The cost of treatment depends on the dose, your body weight, and where you have the injections. But either procedure can cost more than \$30,000 a year. Because the treatment provides only temporary protection, it must be repeated regularly and usually for the patient's whole life.

### **So when is the treatment warranted?**

People with severe, frequent, unusual, or persistent infections should have a blood test to measure their antibody levels, and may be given the pneumonia vaccine and a booster shot for tetanus and diphtheria. If they don't make antibodies in response to the shots, treatment might be a good idea. It's also justified for people who have very low blood levels of IgG, and for those diagnosed with certain immune disorders.

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## **Consumer Reports' Advice**

# **How can you protect against infection?**

The following steps boost your body's defenses and reduce your risk of illness.

- **Eat right.** That means a diet rich in fruits and vegetables, whole grains, and low-fat dairy products, along with modest amounts of fish, lean meat, nuts and vegetable oils.
- **Be active.** Exhausting workouts weaken the immune system, but moderate exercise does the opposite. Aim for 30 to 60 minutes of brisk walking, cycling, or swimming at least five days a week, and muscle-strengthening activities at least two days a week.
- **Reduce stress.** Stress-relievers include tai chi, meditation, relaxation training, and social support.
- **Get enough sleep.** Uneven or inadequate sleep lowers immunity and raises stress levels. So set a bedtime and wake-up time, limit caffeine and alcohol, curb afternoon naps, and avoid the television and computer before sleep.
- **Quit smoking.** It damages protective cells in the mouth and airways, increasing the likelihood of infection. Consider a smoking cessation program or nicotine replacement product.
- **Get your shots.** Ask your doctor if you need any vaccines or boosters, especially against tetanus, diphtheria, and whooping cough; pneumonia; hepatitis A or B; and shingles. Get an annual flu vaccine.

