



Use of Human Intravenous Immunoglobulins in dogs with idiopathic immune-mediated anaemia, immune-mediated thrombocytopaenia or both

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Objectives

To review the use of human intravenous immunoglobulin (hIVIG) in the treatment of immune-mediated haemolytic anaemia (IMHA), immune-mediated thrombocytopaenia (IMT) or both in dogs.

Methods

Clinical records were retrospectively reviewed from a referral hospital population for dogs diagnosed with IMHA, IMT or both between April 2016 and September 2021. Signalment, clinical investigations, diagnosis, treatment, and outcome were assessed. Cases with other causes of anaemia or thrombocytopaenia were excluded. Outcome was assessed as survival to discharge, clinical remission, and drug discontinuation.

Results

One hundred dogs were identified 22 (22%) of which received hIVIG (0.21-1.78 g/kg). In dogs that received hIVIG, IMHA was diagnosed in 14 (63%), IMT in 6 (27%) and both in 2 (9%). One minor adverse reaction to hIVIG of facial angioedema was recorded out of 22 administrations (5%).

All cases treated with hIVIG were receiving at least two immunosuppressive medications at the time of administration and 5 (23%) were receiving three. Nineteen (86%) dogs that received hIVIG also received at least one blood product transfusion.

Sixteen (72%) dogs that received hIVIG survived to discharge compared to 60 of 78 (76%) of cases which did not receive hIVIG. Fifteen (68%) dogs that were administered hIVIG achieved clinical remission and 12 (55%) were able to discontinue all immunosuppressive medications.

Statement (conclusions)

Adverse effects to hIVIG were uncommon. Overall, survival was no better compared to those that did not receive hIVIG however case severity may have influenced treatment decisions. Larger, prospective studies are required to better assess the benefit of hIVIG.