August 2012

Dear Healthcare Professional:

Baxter has made the decision to discontinue manufacturing GAMMAGARD S/D [Immune Globulin Intravenous (Human)] effective December 2012, in response to customer preference and based on a review of the company’s product offerings.

GAMMAGARD S/D has been in very low demand relative to Baxter’s other immune globulin offerings, GAMMAGARD LIQUID [Immune Globulin Infusion (Human)] 10% and GAMMAGARD S/D lots with IgA <1 µg/mL. Baxter can improve our ability to meet customer demands for these products by focusing our manufacturing efforts on GAMMAGARD LIQUID and GAMMAGARD S/D lots with IgA <1 µg/mL.

We will continue to offer GAMMAGARD S/D with IgA <1 µg/mL for patients who may need a low IgA immune globulin. GAMMAGARD S/D with IgA <1 µg/mL has the same formulation as GAMMAGARD S/D, with a lower IgA content, and will continue to be offered to customers through our standard ordering and allocation processes.

We recommend that you begin evaluating appropriate alternative product options as soon as possible to ensure a smooth transition to a product that is suitable for your patients’ needs. For more information, please contact Baxter’s Medical Information group at medinfo@baxter.com or 866-424-6724.

For assistance with placing orders or managing existing orders for any of Baxter’s immune globulin products, please contact Baxter’s Customer Service group at 800-423-2090.

Baxter is committed to meeting customer and patient needs with GAMMAGARD LIQUID and GAMMAGARD S/D with IgA <1 µg/mL. We appreciate your business, and look forward to serving you, and your patients, in the future.

Please see the GAMMAGARD S/D, GAMMAGARD S/D with IgA <1 µg/mL and GAMMAGARD LIQUID Detailed Important Risk Information on pages 2, 4 and 6 and the enclosed Prescribing Information for full prescribing details.

Sincerely,

Blaine Forshage
Vice President, Sales & Marketing, BioTherapeutics USA
Baxter Healthcare Corporation

Baxter, Gammagard, Gammagard S/D, and Gammagard Liquid are trademarks of Baxter International Inc. HYL7573A May 2012
GAMMAGARD S/D
[Immune Globulin Intravenous (Human)]
(IgA ≤ 2.2 µg/mL in a 5% solution)
December 2011 prescribing information

INDICATION
GAMMAGARD S/D is indicated for the treatment of primary immunodeficiency (PI) associated with defects in humoral immunity, in adults and children two years and older. This includes, but is not limited to, congenital agammaglobulinemia, common variable immunodeficiency, Wiskott-Aldrich syndrome, and severe combined immunodeficiencies. GAMMAGARD S/D is also indicated for prevention of recurrent bacterial infections associated with B-cell Chronic Lymphocytic Leukemia (CLL), treatment of adult chronic Idiopathic Thrombocytopenic Purpura (ITP) to increase platelet count and to prevent and/or control bleeding, and prevention of coronary artery aneurysms associated with Kawasaki Syndrome in pediatric patients.

DETAILED IMPORTANT RISK INFORMATION
• Intravenous use of human immune globulin (IGIV) products, particularly those containing sucrose, has been reported to be associated with renal dysfunction, acute renal failure, osmotic nephropathy, and death. Patients at risk of acute renal failure include those with any degree of pre-existing renal insufficiency, diabetes mellitus, advanced age (above 65 years of age), volume depletion, sepsis, paraproteinemia, or those receiving known nephrotoxic drugs. GAMMAGARD S/D does not contain sucrose.

• For patients at risk of renal dysfunction or failure, administer GAMMAGARD S/D at the minimum concentration available and the minimum rate of infusion practicable.

For Intravenous Use Only
Assure that patients are not volume depleted prior to the initiation of the infusion of GAMMAGARD S/D. In patients who are at risk of developing renal dysfunction, because of pre-existing renal insufficiency or predisposition to acute renal failure, administer GAMMAGARD S/D at an infusion rate less than 4 mL/kg/Hr (< 3.3 mg IG/kg/min) for a 5% solution or at a rate less than 2 mL/kg/Hr (< 3.3 mg IG/kg/min) for a 10% solution.

GAMMAGARD S/D is contraindicated in patients who have had a history of anaphylactic or severe systemic hypersensitivity reactions to the administration of human immunoglobulin.

GAMMAGARD S/D is contraindicated in IgA deficient patients with antibodies to IgA and a history of hypersensitivity.

Severe hypersensitivity reactions and anaphylactic reactions with a fall in blood pressure have occurred in patients receiving GAMMAGARD S/D, including patients who tolerated previous treatments with GAMMAGARD S/D, even though it contains low levels of IgA.

GAMMAGARD S/D contains trace amounts of IgA (≤ 2.2 µg/mL in a 5% solution). Patients with IgA deficiency and antibodies to IgA have a greater risk of developing potentially severe hypersensitivity and anaphylactic reactions.
Thromboembolic events, including myocardial infarction, cerebral vascular accident, deep vein thrombosis, and pulmonary embolism, have been reported in association with IGIV therapy, including GAMMAGARD S/D. Patients at risk for thromboembolic events include those with a history of atherosclerosis, multiple cardiovascular risk factors, advanced age, impaired cardiac output, known or suspected hyperviscosity, hypercoagulable disorders, prolonged periods of immobilization, obesity, diabetes mellitus, acquired or inherited thrombophilic disorder, a history of vascular diseases, and a history of a previous thrombotic or thromboembolic event. For patients judged to be at risk of developing thrombotic events, administer GAMMAGARD S/D at the minimum rate of infusion practicable.

Aseptic Meningitis Syndrome (AMS) has been reported to occur in association with IGIV therapy, including GAMMAGARD S/D. Discontinuation of IGIV treatment has resulted in remission of AMS within several days without sequelae. AMS may occur more frequently with high dose (2 g/kg) IGIV treatment.

Hemolytic anemia can develop subsequent to IGIV therapy, including GAMMAGARD S/D. GAMMAGARD S/D contains blood group antibodies which may act as hemolysins and induce *in vivo* coating of red blood cells (RBC) with immunoglobulin, causing a positive direct antiglobulin reaction and, rarely, hemolysis. Acute intravascular hemolysis has been reported, and delayed hemolytic anemia can develop subsequent to IGIV therapy due to enhanced RBC sequestration.

Non-cardiogenic pulmonary edema (TRALI) has been reported in patients following the administration of gammaglobulin products, including GAMMAGARD S/D therapy.

GAMMAGARD S/D is made from human plasma, it may carry a risk of transmitting infectious agents, e.g., viruses, and theoretically, the Creutzfeldt-Jakob disease (CJD) agent. This also applies to unknown or emerging viruses and other pathogens.

Hyperproteinemia and increased serum viscosity may occur in patients receiving GAMMAGARD S/D. The amount of sodium in the product may add materially to the recommended daily allowance of dietary sodium for patients on a low sodium diet. In these patients, calculate the amount of sodium from the product and use it when determining dietary sodium intake.

Certain components used in the packaging of this product contain natural rubber latex. Use GAMMAGARD S/D cautiously in patients with sensitivity to rubber latex.

The most common adverse reactions observed in ≥ 5% of patients during the clinical trials were headache, nausea, chills, fatigue, pyrexia, upper abdominal pain, diarrhea, back pain, infusion site pain, hyperhidrosis and flushing.

Severe adverse reactions reported postmarketing include renal failure, thrombotic events (myocardial infarction, cerebrovascular accidents, and pulmonary embolism), anaphylactic shock, aseptic meningitis and hemolysis.

**Please review the enclosed GAMMAGARD S/D Prescribing Information for full prescribing details.**
GAMMAGARD S/D
[Immune Globulin Intravenous (Human)]
(IgA ≤ 1 µg/mL in a 5% solution)
December 2011 prescribing information

INDICATION
GAMMAGARD S/D is indicated for the treatment of primary immunodeficiency (PI) associated with defects in humoral immunity, in adults and children two years and older. This includes, but is not limited to, congenital agammaglobulinemia, common variable immunodeficiency, Wiskott-Aldrich syndrome, and severe combined immunodeficiencies. GAMMAGARD S/D is also indicated for prevention of recurrent bacterial infections associated with B-cell Chronic Lymphocytic Leukemia (CLL), treatment of adult chronic Idiopathic Thrombocytopenic Purpura (ITP) to increase platelet count and to prevent and/or control bleeding, and prevention of coronary artery aneurysms associated with Kawasaki Syndrome in pediatric patients.

DETAILED IMPORTANT RISK INFORMATION

- Intravenous use of human immune globulin (IGIV) products, particularly those containing sucrose, has been reported to be associated with renal dysfunction, acute renal failure, osmotic nephropathy, and death. Patients at risk of acute renal failure include those with any degree of pre-existing renal insufficiency, diabetes mellitus, advanced age (above 65 years of age), volume depletion, sepsis, paraproteinemia, or those receiving known nephrotoxic drugs. GAMMAGARD S/D does not contain sucrose.

- For patients at risk of renal dysfunction or failure, administer GAMMAGARD S/D at the minimum concentration available and the minimum rate of infusion practicable.

For Intravenous Use Only

Assure that patients are not volume depleted prior to the initiation of the infusion of GAMMAGARD S/D. In patients who are at risk of developing renal dysfunction, because of pre-existing renal insufficiency or predisposition to acute renal failure, administer GAMMAGARD S/D at an infusion rate less than 4 mL/kg/Hr (< 3.3 mg IG/kg/min) for a 5% solution or at a rate less than 2 mL/kg/Hr (< 3.3 mg IG/kg/min) for a 10% solution.

GAMMAGARD S/D is contraindicated in patients who have had a history of anaphylactic or severe systemic hypersensitivity reactions to the administration of GAMMAGARD S/D with <1µg/mL IgA in a 5% solution.

Severe hypersensitivity reactions and anaphylactic reactions with a fall in blood pressure have occurred in patients receiving GAMMAGARD S/D, including patients who tolerated previous treatments with GAMMAGARD S/D, even though it contains low levels of IgA.

The concentration of IgA that will not provoke a reaction is not known, and therefore all IGIV preparations carry the risk of inducing an anaphylactic reaction to IgA. In such instances, a risk of anaphylaxis may exist despite the fact that GAMMAGARD S/D, IgA < 1 µg/mL, contains trace amounts of IgA.
Thromboembolic events, including myocardial infarction, cerebral vascular accident, deep vein thrombosis, and pulmonary embolism, have been reported in association with IGIV therapy, including GAMMAGARD S/D. Patients at risk for thromboembolic events include those with a history of atherosclerosis, multiple cardiovascular risk factors, advanced age, impaired cardiac output, known or suspected hyperviscosity, hypercoagulable disorders, prolonged periods of immobilization, obesity, diabetes mellitus, acquired or inherited thrombophilic disorder, a history of vascular diseases, and a history of a previous thrombotic or thromboembolic event. For patients judged to be at risk of developing thrombotic events, administer GAMMAGARD S/D at the minimum rate of infusion practicable.

Aseptic Meningitis Syndrome (AMS) has been reported to occur in association with IGIV therapy, including GAMMAGARD S/D. Discontinuation of IGIV treatment has resulted in remission of AMS within several days without sequelae. AMS may occur more frequently with high dose (2 g/kg) IGIV treatment.

Hemolytic anemia can develop subsequent to IGIV therapy, including GAMMAGARD S/D. GAMMAGARD S/D contains blood group antibodies which may act as hemolysins and induce in vivo coating of red blood cells (RBC) with immunoglobulin, causing a positive direct antiglobulin reaction and, rarely, hemolysis. Acute intravascular hemolysis has been reported, and delayed hemolytic anemia can develop subsequent to IGIV therapy due to enhanced RBC sequestration.

Non-cardiogenic pulmonary edema (TRALI) has been reported in patients following the administration of gammaglobulin products, including GAMMAGARD S/D therapy.

GAMMAGARD S/D is made from human plasma, it may carry a risk of transmitting infectious agents, e.g., viruses, and theoretically, the Creutzfeldt-Jakob disease (CJD) agent. This also applies to unknown or emerging viruses and other pathogens.

Hyperproteinemia and increased serum viscosity may occur in patients receiving GAMMAGARD S/D. The amount of sodium in the product may add materially to the recommended daily allowance of dietary sodium for patients on a low sodium diet. In these patients, calculate the amount of sodium from the product and use it when determining dietary sodium intake.

Certain components used in the packaging of this product contain natural rubber latex. Use GAMMAGARD S/D cautiously in patients with sensitivity to rubber latex.

The most common adverse reactions observed in ≥ 5% of patients during the clinical trials were headache, nausea, chills, fatigue, pyrexia, upper abdominal pain, diarrhea, back pain, infusion site pain, hyperhidrosis and flushing.

Severe adverse reactions reported postmarketing include renal failure, thrombotic events (myocardial infarction, cerebrovascular accidents, and pulmonary embolism), anaphylactic shock, aseptic meningitis and hemolysis.

Please review the enclosed GAMMAGARD S/D (IgA ≤ 1 µg/mL in a 5% solution) Prescribing Information for full prescribing details.
Indication
GAMMAGARD LIQUID is indicated as replacement therapy for primary humoral immunodeficiency (PI) in adult and pediatric patients two years of age or older. This includes, but is not limited to, common variable immunodeficiency (CVID), X-linked agammaglobulinemia, congenital agammaglobulinemia, Wiskott-Aldrich syndrome, and severe combined immunodeficiencies.

Detailed Important Risk Information for Healthcare Professionals

- Renal dysfunction, acute renal failure, osmotic nephrosis, and death may occur with immune globulin intravenous (IGIV) products in predisposed patients. Patients predisposed to renal dysfunction include those with any degree of pre-existing renal insufficiency, diabetes mellitus, age greater than 65, volume depletion, sepsis, paraproteinemia, or patients receiving known nephrotoxic drugs.

- Renal dysfunction and acute renal failure occur more commonly in patients receiving IGIV products containing sucrose. GAMMAGARD LIQUID does not contain sucrose.

- For patients at risk of renal dysfunction or failure, administer GAMMAGARD LIQUID at the minimum infusion rate practicable.

Ensure that patients with pre-existing renal insufficiency are not volume depleted. For patients over 65 years of age or judged to be at risk for renal dysfunction or thrombotic events, administer GAMMAGARD LIQUID at the minimum infusion rate practicable. In such cases, the maximal rate should be less than 3.3 mg/kg/min (< 2mL/kg/hr), and consider discontinuation of administration if renal function deteriorates.

GAMMAGARD LIQUID is contraindicated in patients who have had a history of anaphylactic or severe systemic hypersensitivity reactions to the administration of human immune globulin.

GAMMAGARD LIQUID is contraindicated in IgA-deficient patients with antibodies to IgA and a history of hypersensitivity. Anaphylaxis has been reported with the intravenous use of GAMMAGARD LIQUID and is theoretically possible following subcutaneous administration.

Severe hypersensitivity reactions may occur, even in patients who had tolerated previous treatment with human normal immune globulin.

Hyperproteinemia, increased serum viscosity, and hyponatremia may occur in patients receiving GAMMAGARD LIQUID.

Thrombotic events, including myocardial infarction, cerebral vascular accident, deep vein thrombosis, and pulmonary embolism have been reported in association with intravenous use of GAMMAGARD LIQUID. Thrombotic events have also been reported with subcutaneous administration of immune globulin. Patients at risk for thrombotic events include those with a history of atherosclerosis, multiple cardiovascular risk factors, advanced age, impaired cardiac output, coagulation disorders, prolonged
periods of immobilization, obesity, diabetes mellitus, acquired or inherited thrombophilic disorder, a history of vascular disease, or a history of a previous thrombotic or thromboembolic event.

Aseptic Meningitis Syndrome may occur with IGIV treatment, and has been reported with intravenous use of GAMMAGARD LIQUID. Discontinuation of IGIV treatment has resulted in remission of AMS within several days without sequelae.

GAMMAGARD LIQUID contains blood group antibodies which may act as hemolysins and induce in vivo coating of red blood cells (RBC) with immune globulin. Acute intravascular hemolysis has been reported, and delayed hemolytic anemia can develop due to enhanced RBC sequestration.

Non-cardiogenic pulmonary edema (TRALI) has been reported in patients following treatment with IGIV products, including GAMMAGARD LIQUID.

GAMMAGARD LIQUID is made from human plasma. It may carry a risk of transmitting infectious agents, e.g., viruses, the variant Creutzfeldt-Jakob disease (vCJD) agent, and theoretically, the classic Creutzfeldt-Jakob disease agent. This also applies to unknown or emerging viruses and other pathogens. No cases of transmission of viral diseases or vCJD have been associated with GAMMAGARD LIQUID.

Intravenous: The most serious adverse reaction seen during intravenous treatment in the clinical trials was two episodes of aseptic meningitis in one subject. The most common adverse reactions (observed in ≥5% of subjects) were headache, pyrexia, fatigue, rigors, nausea, chills, dizziness, vomiting, migraine headache, pain in extremity, urticaria, cough, pruritus, rash, and tachycardia.

Subcutaneous: No serious adverse reactions were observed during the clinical trial of subcutaneous treatment. The most common adverse reactions during subcutaneous treatment (observed in ≥5% of subjects) were local infusion site reactions. The most common systemic reactions were headache, fever, fatigue, increased heart rate, increased systolic blood pressure, and upper abdominal pain.

Please review the accompanying GAMMAGARD LIQUID Prescribing Information for full prescribing details.