

When AIP attacks recur...

Be ready with

PANHEMATIN[®]
(HEMIN FOR INJECTION)



Indication:¹

PANHEMATIN[®] (hemin for injection) is indicated for the amelioration of recurrent attacks of acute intermittent porphyria (AIP) temporally related to the menstrual cycle in susceptible women, after initial carbohydrate therapy is known or suspected to be inadequate.

Limitations of use:

- ➔ Before administering PANHEMATIN, consider an appropriate period of carbohydrate loading (i.e., 400 g glucose/day for 1 to 2 days).
- ➔ Attacks of porphyria may progress to a point where irreversible neuronal damage has occurred. PANHEMATIN therapy is intended to prevent an attack from reaching the critical stage of neuronal degeneration. PANHEMATIN is not effective in repairing neuronal damage.

OVER 30 YEARS of U.S. clinical experience

For more information about PANHEMATIN or to download additional materials, visit www.panhematin.ca and enter the password AIP.

Treating recurrent AIP attacks in diagnosed patients: **Important considerations**

Before PANHEMATIN therapy is begun, the presence of acute porphyria must be diagnosed using the following criteria:¹

1. Presence of clinical symptoms suggestive of acute porphyric attack.
2. Quantitative measurement of porphobilinogen (PBG) in urine. The single-void urine sample should be refrigerated or frozen without additives and shielded from light for subsequent quantitative δ -aminolevulinic acid (ALA), PBG, and total porphyrin determinations. (Note: the classical Watson-Schwartz or Hoesch tests are considered to be less reliable).

Recurrent attacks in a patient with proven acute porphyria

Recurrent attacks in a patient with proven acute porphyria are often similar over time and are diagnosed largely on clinical grounds. Biochemical reconfirmation is not required, and treatment should be initiated immediately, after exclusion of other causes of symptoms (for example, pancreatitis and appendicitis). However, the laboratory results that were the basis for the initial diagnosis must be reviewed to assure that the diagnosis was accurate.²

Clinical benefit from PANHEMATIN depends on prompt administration¹

- For mild porphyric attacks (mild pain, no vomiting, no paralysis, no hyponatremia,

no seizures), a trial of glucose therapy is recommended while awaiting hemin treatment or if hemin is unavailable.

- For moderate to severe attacks, immediate hemin treatment is recommended.
 - Symptoms of severe attacks are severe or prolonged pain, persistent vomiting, hyponatremia, convulsion, psychosis, and neuropathy.
 - In addition to treatment with PANHEMATIN, consider other necessary measures such as the elimination of triggering factors.
- Monitor urinary concentrations of the following compounds during PANHEMATIN therapy.
 - Effectiveness is demonstrated by a decrease in one or more of the following compounds: ALA, PBG, uroporphyrin, and coproporphyrin.



BE READY

Order through Canadian Blood Services and Héma-Québec



Ensure patients have an AIP attack plan

Provide your diagnosed AIP patients with Medical Emergency instructions that can be shared with healthcare providers should they experience a recurrent AIP attack.

Determine the correct dose of PANHEMATIN

Recommended dose and dosage adjustment¹

- The dose of PANHEMATIN is 0.8 to 3.1 mg/kg/day of hematin.
- The standard dose in clinical practice is 2.3 to 3.1 mg/kg/day.
- In more severe cases this dose may be repeated no earlier than every 12 hours.
- Do not exceed 4.6 mg/kg of hematin in any 24-hour period.

To calculate the amount of hematin and dosage of PANHEMATIN quickly and easily, use the **Dosing Calculator**

Treat for the right length of time

- The recommended treatment duration for PANHEMATIN is 3 to 14 days based on the clinical signs.¹

Be ready with **PANHEMATIN**

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- Order through Canadian Blood Services and Héma-Québec.
- Ensure patients have an AIP attack plan.
- Determine the correct dose of PANHEMATIN.
- Treat for the right length of time.

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For more information:

Please consult the Product Monograph at www.recordatirarediseases.com/files/inline-files/panhematin-product-monograph-ENG.pdf for contraindications, warnings, precautions, adverse reactions, interactions, dosing, and conditions of clinical use. The Product Monograph is also available by calling McKesson Specialized Distribution at **1-877-827-1306** or email msd@customer-support.ca.

References:

1. Recordati Rare Diseases Canada Inc. PANHEMATIN® Product Monograph. July 13, 2018.
2. Anderson KE, Bloomer JR, Bonkovsky HL, et al. Recommendations for the diagnosis and treatment of the acute porphyrias. *Ann Intern Med.* 2005 Mar 15;142(6):439-50.

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