

### **Immunoglobulins and me: Catherine's story**

The condition I have is Common Variable Immune Deficiency and I was diagnosed 8 years ago when in my late 30s. It's an inability of the body to make enough antibodies so you don't have protection from an illness. I had a sustain cough after a lung infection and I was referred to a respiratory physician who ordered a blood test and it was found that way.

When I was first diagnosed I was put on intravenous immunoglobulin straight away and I have done that as my preferred treatment since that time. So there are two ways of giving immunoglobulin and the first one that I'll talk about is intravenous infusion. For an intravenous infusion of immunoglobulin you must visit hospital.

Usually just for the day in either an infusion centre or a day unit. In order to give the infusion we have to give it straight into the vein and so we put a tube like a canula into your vein or perhaps you have a long-term canula such as a port or long line there already. You're monitored closely throughout the infusion by nursing staff and we give a large volume all at once and then usually repeat that 3 or 4 weeks later. There are a couple of reasons that I prefer to go to the hospital. The first is that it's once every 3 weeks.

So, one day out of every 21 days I go to the hospital and the other 20 days I can forget about it. I prefer intravenous immunoglobulin therapy but when covid started my doctor recommended transferring across to subcutaneous so I could just do it at home and I chose to do that. At home with subcutaneous it's once a week plus I have the equipment in my home and it's a constant reminder that I need to do it and that I do need to do this to stay alive. It's sobering.

I will 100% post Covid go back to intravenous yes. I've been on quite a consistent dose since we found the right dose but it's always being assessed and monitored they're always checking my levels and my health to look at whether that needs to be brought down bearing in mind that it's a very precious resource and many people need that therapy to stay alive. I'm aware that there are very strict criteria for eligibility to utilize immunoglobulin therapy. I think it's very important for them to have those criteria in place to ensure that the product is distributed to the people who need it the most and it's not wasted.

When I was first told I needed to go on immunoglobulin therapy I found it very confronting and very frightening. I didn't even like needles and now I'm cool with them So eventually you get used to it. It is worth doing and even if it is confronting and scary. I am a mother of three sons. I work full-time. I'm feeling great at the moment. I have got the energy levels back up again and I do have the resistance against infection as well so I look forward to watching my children grow up and enjoying a full and healthy life.