WHO International Standard
Second International Standard for anti-hepatitis B surface antigen (anti-HBs) immunoglobulin, human
NIBSC code: 07/164
Instructions for use
(Version 1.0, Dated 22/10/2008)

1. INTENDED USE

Hepatitis B immunoglobulins are produced in many countries and the minimum potency requirements and potencies of individual batches are expressed in International Units (IU). This material is also used in diagnostic assays to determine the antibody content of sera from naturally infected individuals and vaccinees. The unitage indicative of sero-conversion and sero-protection and the unitage indicative of long-term protection is also given in IU.

The candidate standard was assessed for suitability and calibrated in IU in a collaborative study in which 22 participants from 12 countries participated. The participants assayed the candidate standard and the First IS (W1042) on 19 different assay kits.

Stocks of this material are being shared with the Center for Biologics Evaluation and Research of the United States Food and Drug Administration, Bethesda, MD, USA for distribution as the new CBER/FDA standard for hepatitis B immunoglobulin, Lot 3.

2. CAUTION

This preparation is not for administration to humans or animals in the human food chain.

The preparation contains material of human origin, and either the final product or the source materials, from which it is derived, have been tested and found negative for HBsAg, anti-HIV and HCV RNA. As with all materials of biological origin, this preparation should be regarded as potentially hazardous to health. It should be used and discarded according to your own laboratory’s safety procedures. Such safety procedures should include the wearing of protective gloves and avoiding the generation of aerosols. Care should be exercised in opening ampoules or vials, to avoid cuts.

3. UNITAGE

The unitage assigned to this material is 100 IU/ampoule

4. CONTENTS

Country of origin of biological material: United States.

Each ampoule contains the freeze-dried residue of 1.0 ml human immunoglobulin. The candidate standard has been prepared from a bulk of 5% hepatitis B immunoglobulin. 1ml aliquots of this bulk were filled in DIN ampoules and freeze dried at NIBSC following documented procedures. This fill was 1.0g fill weight with a mean dry weight of 0.0715g. The coefficient of variation (CV) was 0.31%. Residual moisture measured on 10 samples gave a mean of 0.17% with a CV of 19.92% and oxygen measured in the headspace of 12 ampoules, gave a mean of 0.51% with a CV of 12.77%.

5. STORAGE

The ampoules should be stored at -20°C or below until use.

Please note: because of the inherent stability of lyophilized material, NIBSC may ship these materials at ambient temperature.

6. DIRECTIONS FOR OPENING

DIN ampoules have an ‘easy-open’ coloured stress point, where the narrow ampoule stem joins the wider ampoule body. Tap the ampoule gently to collect the material at the bottom (labeled) end. Ensure that the disposable ampoule safety breaker provided is pushed down on the stem of the ampoule and against the shoulder of the ampoule body. Hold the body of the ampoule in one hand and the disposable ampoule breaker covering the ampoule stem between the thumb and first finger of the other hand. Apply a bending force to open the ampoule at the coloured stress point, primarily using the hand holding the plastic collar.

Care should be taken to avoid cuts and projectile glass fragments that might enter the eyes, for example, by the use of suitable gloves and an eye shield. Take care that no material is lost from the ampoule and no glass falls into the ampoule. Within the ampoule is dry nitrogen gas at slightly less than atmospheric pressure. A new disposable ampoule breaker is provided with each DIN ampoule.

7. USE OF MATERIAL

No attempt should be made to weigh out any portion of the freeze-dried material prior to reconstitution

Reconstitute the contents of each ampoule by the addition of 1.0ml distilled water. Shake gently without the formation of foam to ensure that all contents are reconstituted.

8. STABILITY

Reference materials are held at NIBSC within assured, temperature-controlled storage facilities. Reference Materials should be stored on receipt as indicated on the label.

Stability studies on reconstituted material are in progress. In the meantime, users should determine the stability of reconstituted material according to their own method of preparation, storage and use. However, multiple freeze/thaw cycles should be avoided.

NIBSC follows the policy of WHO with respect to its reference materials.

9. REFERENCES

10. ACKNOWLEDGEMENTS

11. FURTHER INFORMATION

Further information can be obtained as follows;

This material: enquiries@nibsc.org
WHO Biological Standards:
http://www.who.int/biologicals/en/
JCTLM Higher order reference materials:
Derivation of International Units:
http://www.nibsc.org/standardisation/international_standards.aspx
Ordering standards from NIBSC:
http://www.nibsc.org/products/ordering.aspx
NIBSC Terms & Conditions:
http://www.nibsc.org/terms_and_conditions.aspx

12. CUSTOMER FEEDBACK

Customers are encouraged to provide feedback on the suitability or use of the material provided or other aspects of our service. Please send any comments to enquiries@nibsc.org

13. CITATION

In all publications, including data sheets, in which this material is referenced, it is important that the preparation’s title, its status, the NIBSC code number, and the name and address of NIBSC are cited and cited correctly.
14. MATERIAL SAFETY SHEET
Classification in accordance with Directive 2000/54/EC, Regulation (EC) No 1272/2008: Not applicable or not classified

**Physical and Chemical properties**

<table>
<thead>
<tr>
<th>Property</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical appearance: Freeze dried</td>
<td>No</td>
</tr>
<tr>
<td>Stable:</td>
<td>Yes</td>
</tr>
<tr>
<td>Hygroscopic:</td>
<td>No</td>
</tr>
<tr>
<td>Flammable:</td>
<td>No</td>
</tr>
<tr>
<td>Other (specify):</td>
<td>Contains human immunoglobulin</td>
</tr>
</tbody>
</table>

**Toxicological properties**

<table>
<thead>
<tr>
<th>Effect</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effects of inhalation:</td>
<td>Not established, avoid inhalation</td>
</tr>
<tr>
<td>Effects of ingestion:</td>
<td>Not established, avoid ingestion</td>
</tr>
<tr>
<td>Effects of skin absorption:</td>
<td>Not established, avoid contact with skin</td>
</tr>
</tbody>
</table>

**Suggested First Aid**

- **Inhalation:** Seek medical advice
- **Ingestion:** Seek medical advice
- **Contact with eyes:** Wash with copious amounts of water. Seek medical advice
- **Contact with skin:** Wash thoroughly with water.

**Action on Spillage and Method of Disposal**

Spillage of ampoule contents should be taken up with absorbent material wetted with an appropriate disinfectant. Rinse area with an appropriate disinfectant followed by water. Absorbent materials used to treat spillage should be treated as biological waste.

15. LIABILITY AND LOSS

In the event that this document is translated into another language, the English language version shall prevail in the event of any inconsistencies between the documents.

Unless expressly stated otherwise by NIBSC, NIBSC’s Standard Terms and Conditions for the Supply of Materials (available at http://www.nibsc.org/About_Us/Terms_and_Conditions.aspx or upon request by the Recipient) (“Conditions”) apply to the exclusion of all other terms and are hereby incorporated into this document by reference. The Recipient’s attention is drawn in particular to the provisions of clause 11 of the Conditions.

16. INFORMATION FOR CUSTOMS USE ONLY

- **Country of origin for customs purposes**: United Kingdom
  - Defined as the country where the goods have been produced and/or sufficiently processed to be classed as originating from the country of supply, for example a change of state such as freeze-drying.
- **Net weight**: 1.0 g
- **Toxicity Statement**: Non-toxic
- **Veterinary certificate or other statement if applicable**: Attached: No

17. CERTIFICATE OF ANALYSIS

NIBSC does not provide a Certificate of Analysis for WHO Biological Reference Materials because they are internationally recognised primary reference materials fully described in the instructions for use. The reference materials are established according to the WHO Recommendations for the preparation, characterization and establishment of international and other biological reference standards http://www.who.int/bloodproducts/publications/TRS932Annex2_Inter_biol_efstandardsrev2004.pdf (revised 2004). They are officially endorsed by the WHO Expert Committee on Biological Standardization (ECBS) based on the report of the international collaborative study which established their suitability for the intended use.