Our high-quality venom passes a minimum of 12 separate quality checks before we release it to you.

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<td>2 mL Diagnostic Vials</td>
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<tr>
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<td>Venomil® Maintenance Sets Multidose Hymenoptera Venom Products</td>
<td>2 mL Maintenance Vials 5-Dose 12-Dose Multidose Vials</td>
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Our manufacturing process for standardized venom adheres to strict quality controls.¹ Fully self-contained Venomil® Diagnosis Sets let you test one patient at a time, yet include enough product to test several patients in the same setting. Unlike other providers, we let you order diagnostic sets by individual species: order exactly what you need, exactly when you need it. Venomil® Maintenance Sets are packaged for effortless and effective treatment of individual patients.

Venom and Venomil® are available in honey bee, white-faced hornet, yellow hornet, wasp, yellow jacket and mixed vespid. See our product catalog for a full list of available presentations.

Uncompromising, Unsurpassed Standards

- Venom Immunotherapy (VIT) reduces the risk of systemic reaction for patients allergic to stinging insects — with an efficacy rating of 90-97%.
- HollisterStier Allergy is one of only two licensed manufacturers in the United States.
- One lot of yellow jacket finished product takes approximately 300 hours to complete, from raw material processing to the final container. We quality check it all, every step of the way.
- We created the BeeAware program (beeawareallergy.com) to inform the public and physicians about life-saving venom immunotherapy, demonstrating our commitment to both patients and allergists.

¹ HollisterStier Allergy’s manufacturing plant is regulated by both CBER and CDER.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 800-FDA-1088.
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859747-H03 • Rev 12/17
Hymenoptera Venom Products are sterile freeze-dried products that can be reconstituted with sterile Solvent or Sterile Albumin Saline with Phenol (which contains 0.9% NaCl, 0.4% phenol and 0.03% Human Albumin). Maintenance sterile freeze-dried products can be reconstituted in Sterile Albumin Saline with Phenol (which contains 0.9% NaCl, 0.4% phenol and 0.03% Human Albumin). The mixture must be gently mixed by gentle swirling or rolling. Do not use a vortex mixer. Neither the Solvent nor the Sterile Albumin Saline with Phenol (which contains 0.9% NaCl, 0.4% phenol and 0.03% Human Albumin) is also available.

Each package contains a separate sterile syringe. The drug should be reconstituted with the appropriate solvent. Refer to the directions for use and for further discussion.

CLINICAL PHARMACOLOGY

Dissolution of stinging insect venom injected intradermally will produce wheal and erythema reactions in patients who have significant IgE-mediated, Type I immediate hypersensitivity to stings of these insects. Repeated injections of increasing doses of insect venom extracts have been shown to ameliorate the intensity of allergic symptoms upon subsequent insect stings. The mechanism of which hypogammaglobulinemia has on allergic rhinitis has not been identified. The mechanism by which hypogammaglobulinemia has beneficial effects on the clinical manifestations of asthma, however, has not been identified.

Some patients experience more allergic symptoms upon subsequent insect stings. The mechanism of which hypogammaglobulinemia has an effect on the clinical manifestations of asthma, however, has not been identified. The mechanism by which hypogammaglobulinemia has beneficial effects on the clinical manifestations of asthma, however, has not been identified.

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The flexor surface of the forearm is the usual location for skin testing. It is important that a separate sterile syringe and needle be used for each extract and each patient.

NOTE: Mixed Vespid venom protein concentrations will be three times that shown above.

0.2 mL of 0.001 µg/mL + 1.8 mL = 0.0001 µg/mL

Extract  Diluent  Dilution

As an example of the preceding dilution table:

Venom completely. DO NOT SHAKE, since shaking can cause foaming. Reconstitute the freeze-dried venoms by adding 1.2 mL Sterile Albumin Saline with Phenol (0.4%) to the vial using a sterile syringe. Swirl or rock the container to dissolve the venom.

The reactions from immunotherapy can be expected to be the same in elderly patients as in younger ones. Elderly patients may be more likely to be on medication that could block the affect of epinephrine which could be used to treat serious reactions, or they could be more sensitive to the cardiovascular side effect of epinephrine because of pre-existing cardiovascular disease.

ADVERSE REACTIONS

Prick tests are performed at a site distant from the skin test injection site. The skin should be washed prior to performing a prick test and each extract should be tested on a different site on the skin. Intradermal tests are administered in the same way as skin testing except the needle is inserted to a deeper level. See CLINICAL PHARMACOLOGY and DOSAGE AND ADMINISTRATION Sections.

The dose for the pediatric population is the same as for adults. (See PRECAUTIONS).

PROPRIETORSHIP

Intradermal Tests: Patients showing a positive reaction to the prick test at the 1 µg/mL concentration should begin intradermal tests at concentrations of not more than 0.0001 µg/mL. A 1 mL syringe with a 23 gauge needle should be used to deliver a volume of 0.05 mL for intradermal testing. Introduce the needle into the superficial skin layer, leaving, but do not pierce the skin, dilate the needle using sterile instruments in the concentration until a reaction of 5-mm redness and 11-mm erythema is obtained, or on a concentration of 0.1 µg/mL or less, (providing this reaction is greater than the control dilution).

(3) Immunotherapy

For proper method and route of injection, see WARNINGS, PRECAUTIONS and ADVERSE REACTIONS.

The most common site of injection is the lateral aspect of the upper arm. Patients who have multiple venom sensitivities should be given each specific venom injection in a separate site. (Except if the patient has sensitivities to Yellow Jacket, Yellow Jacket Wasp, Black and Yellow Wasp concordant, she can be injected with Mixed Vespid venom protein; an equal mixture of these vespid venom, note venom preparation in injection a specific site; so that dosage of venom protein preparation can be adjusted for each local reaction site. In patients receiving more than one venom protein, notes the dilution in a separate site 0.001 µg/mL of each of the above 11 lines with the 100 µg/mL or 0.1 µg/mL to determine the initial dose.

CAUTION: Sensitivity to venom varies from patient to patient. Thus, it is not possible to provide a dosage schedule suitable for all patients. The Suggested Dose Schedule represented in the chart under DESCRIPTION of the label Allergy Product Price List for vial size and content. Reconstituting Abbott Sterile Empty Vials (with the 1 µg/mL dilution, see the chart under DESCRIPTION or the latest Allergy Product Price List for vial sizes and content. Reconstituting Abbott Sterile Empty Vials (with the 1 µg/mL dilution, see the chart under DESCRIPTION or the latest Allergy Product Price List for vial sizes and content.

LIMITED WARRANTY

A number of factors beyond our control could reduce the efficacy of this product or prevent its use in an effective form following its use. These include storage and handling of the product after its removal from the shipping carton, the temperature at which the product is stored, the skill of the person administering it and the use of the product for conditions other than those stated above. If the product is returned to the company by the customer, the company will not accept the product and will not issue a credit.

REFERENCE


