How to use

Lubion[®] Pre Filled Syringe

Progesterone 25mg solution for injection

An aqueous progesterone for luteal support of your IVF cycle

Illustrated guide for the correct preparation and administration of Lubion



Please read the patient information leaflet that comes in the pack before administering your first injection

How to use **Lubion**

Lubion is a subcutaneous injection (given under your skin).

BEFORE INJECTING LUBION YOURSELF, READ THE FOLLOWING INSTRUCTIONS CAREFULLY:

- Check the expiry date on the pack and do not use the product if it has expired.
- Before use, Lubion must be stored below 25°C but should not be refrigerated.

These syringes are intended for **SINGLE USE ONLY** and should be disposed of, in a sharps disposal container, after each administration.

1. Preparing the injection



Remove the protective needle cover from the pre-filled syringe.



Hold the syringe with the needle pointing upwards and lightly flick the syringe until all the bubbles collect at the top.



Gently push the plunger of the syringe until all the bubbles have been expelled and a droplet of liquid appears at the end of the needle.

2. Injecting the solution

Lubion is injected by subcutaneous injection, either into the abdomen or the upper part of the thigh.



When injecting into the abdominal site, it is recommended to do so somewhere in the area of an arc beneath the navel.

As the product is given every day, it is recommended to rotate the site of injection so as not to repeatedly inject in the same place.



Pinch the skin together firmly and insert the needle at an angle of between 45° to 90°.



As you release the pinched skin, inject all the medication by pushing slowly and steadily on the plunger.



Discard your syringe into a sharps container

Do not close the lid of the sharps bin until you have completed your whole course of treatment, at which time you should dispose of the sharps bin as you have been advised by your clinic.

Lubion®

Why have I been prescribed progesterone?

During the first half of a normal menstrual cycle, eggs mature in structures called follicles, made up of layers of hormone-producing cells surrounding the egg and a lake of hormone-rich fluid. Follicles produce a hormone called oestrogen that causes proliferation (building up) of the endometrium or lining of the uterus. Women usually have one dominant follicle, which ruptures around mid-cycle, releasing an egg. This is called ovulation.

After ovulation, the empty follicle changes to become a structure called the **corpus luteum**, which produces progesterone.

Progesterone changes the endometrium to make it favourable for accepting and nourishing the embryo. Progesterone maintains the endometrium and ensures the secretion of certain substances that prevent it from breaking down. Progesterone affects the immune system and is therefore vital for the establishment of early and continued pregnancy.^{1,2}

If you have had treatment through Assisted Reproductive Technology (ART) such as invitro fertilisation (IVF), Intra Cytoplasmic Sperm Injection (ICSI) or following egg donation, it is routine practice to provide additional progesterone for 'luteal support'. This support usually starts soon after egg collection and continues until the body is producing enough progesterone independently and no longer requires additional support.

We also recommend watching the helpful step-by-step video demonstration before your first use of Lubion Pre-filled syringe



If you get any side-effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet.

You can also report side-effects directly via the Yellow Card Scheme at https://yellowcard.mhra.gov.uk/.

By reporting side-effects, you can help provide more information on the safety of this medicine.

To report a side effect or product complaint to IBSA Pharma please contact IBSA Pharma Ltd on 01923233466 and medicalinformation.uk@ibsagroup.com

References:

- Shah NM, Lai PF, Imami N, Johnson MR. Progesterone-Related Immune Modulation of Pregnancy and Labor. Front Endocrinol (Lausanne). 2019;10:198. Published 2019 Mar 29. doi:10.3389/fendo.2019.00198
- 2. Schumacher A, Costa SD, Zenclussen AC. Endocrine factors modulating immune responses in pregnancy. Front Immunol. 2014 May;5:196.

