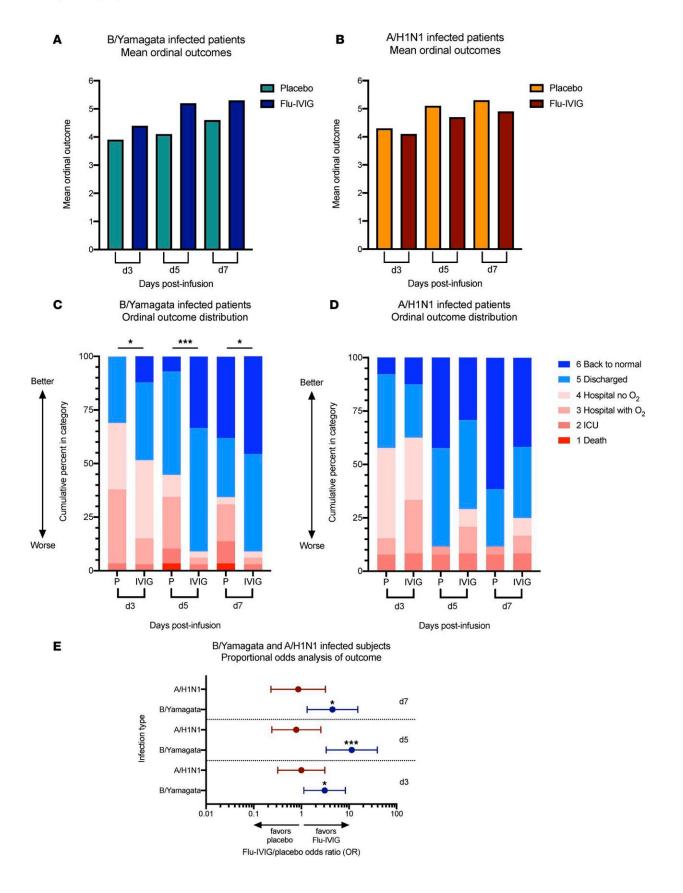


Antibody-based therapies may be effective in fight against influenza B

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Treatment with Flu-IVIG improves the odds of a more favorable clinical outcome in patients hospitalized with severe B/Yamagata influenza but not A/H1N1 influenza. Mean ordinal outcomes (A and B) and ordinal outcome distributions (C and D) on day 3 (d3), d5, and d7 after infusion are shown for the Flu-IVIG— and placebo-infused patients infected with severe B/Yamagata influenza (Flu-IVIG n = 33 and placebo n = 29; A and C) and A/H1N1 influenza (Flu-IVIG n = 24 and placebo n = 26; B and D). The Flu-IVIG/placebo odds ratios (ORs) with 95% confidence intervals for the B/Yamagata- and A/H1N1-infected participants were calculated on d3, d5, and d7 after infusion (E). A proportional odds model with adjustment for the patient's baseline clinical status was used to compare the Flu-IVIG— and placebo-treated groups. *P

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