

Patient information factsheet

Peripheral plasma exchange

We have written this factsheet as a guide to having plasma exchange treatment. We hope it will help to answer some of the questions you may have. This factsheet is not intended to replace discussion with your consultant.

Please do not hesitate to contact a member of the team caring for you if you have any questions. They will be happy to answer them for you.

What is plasma?

Plasma is the straw-coloured liquid part of the blood. It consists mainly of water, and also contains minerals, proteins, clotting factors (agents which help the blood to clot) and antibodies (disease-fighting cells). In an average adult, the volume of plasma in the body is about three litres.

What is plasma exchange treatment?

Plasma exchange involves separating and removing the plasma from the rest of the blood by spinning it through a centrifugal machine. The plasma is then replaced with a solution (Human Albumin Solution) made from donated human blood.

Plasma exchange takes place through two peripheral venous cannulas. This involves the insertion of a needle or flexible tube into a vein in each arm, which is then connected to the plasma exchange machine by tubing.

The treatment takes about two to three hours each day, based on your height and weight.

Why do I need to have plasma exchange treatment?

Some diseases, including a number of neurological conditions (diseases that affect the nervous system), can also cause the production of antibodies. These antibodies are produced by a fault in the body's immune system and can cause damage to the nerves and muscles. Plasma exchange works by removing these damaging antibodies.

What alternative treatments are available?

Alternative treatments will depend on the type of condition being treated. In most cases, plasma exchange is offered when there is no alternative treatment. Your consultant will discuss all your treatment options, as well as their risks and benefits with you.

What are the possible risks and side effects of plasma exchange?

All treatments and procedures have risks and we will explain the risks and benefits of plasma exchange to you.

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The most common risks include:

- **Infection:** There is a very small risk of infection from the peripheral intravenous line. The risk of infection is less than 1% (one in 100).
- **Bleeding:** There is a small risk of bleeding from the line after removal. For this reason, when you have plasma exchange treatment, we will ask you to stay resting in bed for at least ten minutes with the pressure dressings on after the cannulas have been removed. The risk of bleeding after line removal is 5% (five in 100).
- **Damage to the blood vessel:** In a very small number of cases, insertion of the line can cause damage to the blood vessel. The risk of damage to a blood vessel is 2% (two in 100).

During plasma exchange treatment, you may experience:

- dizziness due to low blood pressure
- feeling cold
- nausea (feeling sick)
- tingling in your face, hands and feet

If you experience any of these problems, please tell your nurse immediately. They will slow the rate of the exchange and increase the rate of your calcium infusion (prophylactic infusion to prevent hypocalcemic toxicity) which will usually resolve this. It is very common to feel tired during plasma exchange and for a few days after.

Asking for your consent

We want to involve you in all decisions about your care and treatment. If you decide to go ahead with this procedure, by law we must ask for your consent and we will ask you to sign a consent form. This confirms that you agree to have the procedure and understand what it involves. We will explain all the risks, benefits and alternatives before we ask you to sign a consent form. If you are unsure about any aspect of your proposed treatment, please do not hesitate to speak to a senior member of staff again.

How should I prepare for the treatment?

You will receive a letter telling you which ward you will be admitted to, and the date and time you will need to arrive. The letter will also tell you when and where to have your COVID-19 swab test.

You will be able to eat and drink normally before your treatment. We advise you not to take your blood pressure tablets on the day of the procedure, as your blood pressure may go down during the procedure.

Where is the treatment carried out?

Plasma exchange will be carried out on the neurology day case unit, E level, Wessex Neurological Centre. Only nurses who have had training in plasma exchange will perform this procedure. You will usually be asked to come to the day case unit first thing in the morning, and then when the treatment is completed, you will be able to return home later the same day.

What happens during the plasma exchange?

On arrival to the neurology day case unit, the nurse performing the plasma exchange will take your blood pressure, temperature and pulse, and then carefully insert a cannula (needle) into a vein in each arm. Your nurse will then connect the tubing from the plasma exchange machine to the peripheral cannulas. During the procedure, your nurse will monitor you closely and take regular blood pressure recordings. You will need to remain in bed while the plasma exchange is in progress. You will be able to eat and drink normally while you are having the procedure.

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Will I need to have more plasma exchange treatments?

Some neurological conditions only improve after a number of courses of plasma exchange. Your neurologist will discuss this with you when they talk about plasma exchange as a treatment for your condition.

What should I expect after plasma exchange treatment?

It is very common for people to feel very tired after having plasma exchange treatment. It is therefore important that you rest and pace your activity once you have returned home. We advise you not to drive.

If you notice any redness, pain at the wound site, bleeding or oozing, please contact your GP or call NHS 111, or if necessary, go to your local emergency department.

How to contact us

The plasma exchange service in this hospital is supervised by Dr Ashwin Pinto, neurological consultant and lead clinician, Wessex Neurological Centre.

If you have any questions about plasma exchange or after your procedure, please contact Dinah Labay, infusion and plasmapheresis specialist nurse on **023 8120 6807** or **07920 591 618**.

If you have a question about the date for your day case admission, please contact the neurology care coordinator on **023 8120 2303/6784** or via the main hospital switchboard on **023 8077 7222**.

Space for notes and questions

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