

Maternity information factsheet

Ferinject during pregnancy and after birth

Ferinject (ferric carboxymaltose) is special type of iron preparation given through a drip into a vein (also known as an 'infusion'). Ferinject is sometimes used instead of iron tablets.

You may need Ferinject if:

- blood tests show you are anaemic and oral iron tablets have not improved your iron levels or have made you feel unwell. Iron deficiency anaemia can occur when your body is not getting enough iron and cannot produce enough red blood cells. It is common for women who are pregnant or who have just given birth to have iron deficiency anaemia.
- you had a significant blood loss after the birth of your baby (causing your number of red blood cells and therefore, iron levels to be low), but otherwise you are feeling well
- you have decided not to have a blood transfusion (for example, if you are a Jehovah's Witness)

Ferinject may be offered to you as an alternative to a blood transfusion. Although blood transfusions are safe, there are some risks associated with them, including a tiny risk of infection. Ferinject is not a blood product, so it does not have the associated risks of a blood transfusion. Your midwife or obstetrician will discuss your options with you.

Safety and side effects

Ferinject is considered safe to use after the first trimester (three months) of pregnancy and after birth. Rarely (in less than 1% of cases) it can cause allergic reactions. You will therefore be monitored closely before, during and after the infusion.

A rare but significant complication of Ferinject is permanent skin staining or discoloration around the injection site or involving a more extensive area over the arm. This can occur if some of the drug leaks outside the vein during the infusion. To reduce the risk, a flush of water or saline (salt solution) is given into your vein before the Ferinject. Please let your midwife know if you experience any pain, burning or a feeling of heaviness in your arm during the infusion.

Other possible side effects (which affect less than 10% of people who receive Ferinject) include:

- headache
- dizziness
- rash
- nausea and vomiting
- abdominal pain
- muscle cramps

- diarrhoea
- constipation
- abnormal liver function
- flushing
- low or high blood pressure
- injection site reactions

Please discuss any concerns you may have with your midwife or obstetrician.

www.uhs.nhs.uk

Breastfeeding

Very little Ferinject crosses into breast milk so you can breastfeed safely.

Receiving Ferinject

Ferinject can be given in the maternity day assessment unit, labour ward or obstetric (Lyndhurst and Burley) wards at the Princess Anne Hospital. Before you are given Ferinject, your midwife will assess your well-being by taking your pulse, blood pressure and temperature. Your midwife or one of the obstetricians will insert a cannula (thin tube) into a vein in your arm and give a saline flush (a solution of salty water). They will then start the Ferinject infusion (drip) which usually takes about 30 minutes. They will give another saline flush over a further 30 minutes before they remove the cannula.

After the infusion is complete, your midwife will check your pulse, blood pressure and temperature again. You can go home straight after the infusion has finished, providing you are well.

Your blood haemoglobin level will be checked 14 to 21 days later. Please arrange this appointment with your midwife or GP. If you are still pregnant, it is possible that you may need one more Ferinject dose. If you have already given birth, you may need to take oral iron tablets. This will be discussed with you.

Oral iron tablets

You must not take oral iron tablets while you are having Ferinject. Please do not restart taking the iron tablets until after the result of your blood haemoglobin test has been discussed with you.

Suitability of Ferinject

You should not have Ferinject if you:

- have anaemia caused by deficiencies other than iron deficiency (for example, B12 deficiency)
- · have ever been told by a doctor that you have 'iron overload'
- have ever had an allergic reaction to iron given to you through a drip
- have ever had a problem with your liver, such as liver cirrhosis or hepatitis

Further information

If you have any questions after reading this factsheet, please let your midwife or obstetrician know. They will be happy to discuss them with you.

For a translation of this document, or a version in another format such as easy read, large print, Braille or audio, please telephone 0800 484 0135 or email patientsupporthub@uhs.nhs.uk

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **www.uhs.nhs.uk/additionalsupport**

Version 3. Updated May 2021. Due for review April 2023. 1084

www.uhs.nhs.uk