## **Gynaecology patient information factsheet**

# Ferinject (ferric carboxymaltose)

We have given you this factsheet because you have been diagnosed with iron deficiency (ID) or iron deficiency anaemia (IDA), and you have been advised to receive a treatment called Ferinject. It explains what Ferinject is, what the treatment involves and what the possible side effects are. We hope it will help to answer some of the questions you may have. If you have any further questions or concerns, please speak to a member of your healthcare team.

#### What is Ferinject?

Ferinject is a 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 do not improve your iron levels or have made you feel unwell (if you have IDA, we will usually recommend that you try oral iron tablets first)
- 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.

#### Safety and side effects

Rarely (in less than 1% of cases), Ferinject 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) will be given into your vein before the Ferinject. Please let your nurse 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
- diarrhoea
- dizziness
- constipation
- rash
- abnormal liver function

- nausea and vomiting
- flushing
- abdominal pain
- low or high blood pressure
- muscle cramps
- injection site reactions

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Please discuss any concerns you may have with your gynaecologist (a specialist in women's health).

#### **Breastfeeding**

If you are breastfeeding, very little Ferinject will cross into your breast milk, so you can breastfeed safely.

#### **Receiving Ferinject**

Ferinject is usually given on the gynaecology (Bramshaw) ward at the Princess Anne Hospital. Before you are given Ferinject, your nurse will assess your wellbeing by taking your pulse, blood pressure and temperature. Your nurse or one of the ward doctors will insert a cannula (a thin tube) into a vein in your arm and give a saline flush (a solution of salty water) to ensure the line is correctly placed. They will then start the Ferinject infusion (drip) which usually takes about 30 minutes. They will give another saline flush before they remove the cannula to ensure all the drug has been flushed through the line.

After the infusion is complete, your nurse will check your pulse, blood pressure and temperature again. You will then be monitored closely for 30 minutes. If you are well after this time, you will be able to go home.

You should arrange an appointment with your GP to have your blood haemoglobin level checked 10 to 14 days later. It is possible that you may need one more Ferinject dose. If this is the case, your gynaecologist will discuss this 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 check 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
- think you may be less than 12 weeks pregnant

#### **Further information**

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

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