Intravenous iron therapy for kidney patients

This leaflet explains more about intravenous iron, including the benefits, risks, any alternatives and what you can expect when you have the treatment. If you have any further questions, please speak to the doctor or nurse caring for you.

What is intravenous iron?
Iron is an essential nutrient that your body needs to make red blood cells, which carry oxygen around your body. If you do not have enough iron, you become anaemic. This can cause tiredness, low energy levels (lethargy), low mood, feeling faint and breathlessness. You may also experience taste changes, loss of appetite and feel your heart thumping (palpitations). You may find your sexual function is decreased.

Intravenous iron is an injection containing iron that is given into a vein in your arm. It is given to treat or prevent iron deficiency anaemia. There are two different types of intravenous iron that we use regularly. These are Venofer® (iron sucrose) and Ferinject® (ferric carboxymaltose). The doctors and nurses looking after you will choose the best option for you.

Why should I have intravenous iron?
Your blood results have shown that the amount of iron you have in your blood is low.

People with kidney disease are usually unable to absorb sufficient iron through the gut and so increasing the amount of iron in the diet or taking iron tablets is not effective. We therefore prefer to give iron injections directly into a vein (intravenously) because it tops up the iron level more quickly.

What are the risks?
Similar to all medicines, Venofer® and Ferinject® may cause side effects.

You may develop headaches, nausea, stomach pain or diarrhoea after receiving your iron injection. If this occurs and causes you distress, please phone us at the anaemia clinic for advice. The stomach pain/diarrhoea usually settle on their own within a day or two.

Some people notice a metallic taste. This is harmless and does not last very long.

Very rarely, you may experience an allergic reaction. This may happen immediately or may be delayed. If this happens you may experience some or all of the following symptoms of allergy:
- feeling dizzy
- fast pulse
- feeling light-headed or faint due to a low blood pressure
- swelling in your face
- difficulty in breathing
- chest pain
- itchy skin, a rash or skin redness.
You will be monitored closely during and after the infusion for any signs of allergy and you should let us know immediately if you feel unwell. If you do have an allergic reaction then we will stop administering the iron and treat you immediately with medications to relieve the symptoms.

Very rarely, you may have a delayed allergic reaction when you have left the hospital. If this happens then please contact your doctor straight away. If you have any severe signs of allergy, such as facial swelling, difficulty breathing or feel very unwell, then it is important that you seek immediate medical attention (go to your nearest Emergency Department (A&E) or dial 999 for an ambulance).

**Are there any alternatives?**

If you have a reaction to one type of intravenous iron we will consider giving you another type. If you do not wish to have iron injections please discuss this with your kidney doctor or nurse.

**How can I prepare for having intravenous iron?**

You will be given an appointment to have the iron infusion at one of the following:

- The Kidney Clinic, 4th Floor, Tower Wing, Guy’s Hospital
- The Day Case Unit on Patience Ward, 5th floor, Borough Wing, Guy’s Hospital
- The Tunbridge Wells Kidney Treatment Centre (for patients local to Tunbridge Wells)
- The Sidcup Kidney Treatment Centre (for patients local to Sidcup).

If you are on regular haemodialysis at a dialysis unit, the intravenous iron will be given to you during your scheduled dialysis session.

Please let us know if you have signs of an infection such as a raised temperature or feeling unwell, as we may need to reschedule your infusion.

**If you are taking iron tablets you should stop taking them on the day of the iron infusion and restart them five days later.**

**What happens during the treatment?**

Prior to the iron infusion, we will take and record your blood pressure and pulse. If you are having treatment with Venofer®, this will be given as a slow intravenous injection. If you are having treatment with Ferinject®, this will be given by an injection or infusion depending on the dose required.

If you are having the iron during your haemodialysis session it will be given through the dialysis machine during the last 15 minutes of dialysis.

**Will I feel any pain?**

You may feel a slight sting when we insert the needle to give the infusion. You should feel no pain when we give the iron.

**What happens afterwards?**

Following the infusion we will re-check your blood pressure and pulse. If these readings are within your normal range we will ask you to remain in the clinic, day case unit or dialysis unit for 30 minutes. This is to make sure you do not have a delayed reaction to the iron. You should be aware of the signs and symptoms of an allergic reaction as described above, and look out for them every time you have intravenous iron, and for 30 minutes afterwards. If you are still feeling well after this time you will be able to go home.
What do I need to do after I go home?
Very rarely, you may have a delayed allergic reaction, as described above. If this happens, or if you feel unwell in any way, then please contact your doctor straight away. If you have any severe signs of allergy, such as facial swelling, difficulty breathing or feel very unwell, then you should seek immediate medical attention (go to your nearest Emergency Department (A&E) or dial 999 for an ambulance).

Will I have a follow-up appointment?
If you have attended a kidney clinic or day case unit for your iron infusion, we will either give you a follow-up appointment in four to six weeks for a repeat blood test or you may be followed up at your next routine kidney clinic appointment. Depending on the blood test result you may need further iron infusions.

If you are a regular haemodialysis patient we will recheck your blood tests every three months and continue the infusions according to the results.

Contact us
If you have any questions or concerns about iron, please contact the renal anaemia team, t: 020 7188 5697, Monday to Friday, 9am to 5pm (excluding bank holidays). Out of hours, please leave a message on the answer machine and we will return your call as soon as we can. If you are a dialysis patient please contact your dialysis unit.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline. t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
t: 020 7188 8801 (PALS) e: pals@gstt.nhs.uk
t: 020 7188 3514 (complaints) e: complaints2@gstt.nhs.uk

Language and accessible support services
If you need an interpreter or information about your care in a different language or format, please get in touch. t: 020 7188 8815 e: languagesupport@gstt.nhs.uk

NHS 111
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day. t: 111

NHS Choices
Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health. w: www.nhs.uk