

## Will I need more blood tests?

You should have a "Full Blood Count" test at either your GP surgery or the hospital 3-4 weeks after this iron infusion to check if your haemoglobin level is improving.

## Are you taking iron tablets?

If you are taking iron tablets you may not need to take them after receiving your iron infusion but please discuss this with your GP.

## More Information

Medical Therapies Unit ☎ 01225 825394

Ambulatory Care ☎ 01225 821657

Monofer® more information is available online at:

[www.monofer.com/patients-relatives](http://www.monofer.com/patients-relatives)

### Transfusion Team contact details:

Email: [ruh-tr.TransfusionTeam@nhs.net](mailto:ruh-tr.TransfusionTeam@nhs.net)

☎ 01225 821556 or 01225 821134

# Intravenous Iron Therapy

## Information for Patients



## Why do I need intravenous iron therapy?

You will have been diagnosed with **iron deficiency anaemia** by your GP or a hospital doctor or nurse. This may have caused you to feel tired and lacking energy.

Intravenous iron is used for treating iron deficiency anaemia when iron tablets aren't working, or if there is a need to deliver iron quickly e.g. before planned surgery.

### What does it involve?

At the Royal United Hospital we give intravenous iron if you are an inpatient on a ward, or in one of our day case units.

The drug we use is a liquid iron solution called iron isomaltoside (Monofer®).

The iron is administered via a drip which is connected through a cannula (small plastic tube) inserted into your vein. Nursing staff will monitor your temperature, pulse and blood pressure during the procedure. The infusion takes between 30 minutes and an hour.

### Who may not be able to have intravenous iron?

- We cannot give intravenous iron if you are known to be allergic to any of its ingredients ( particularly dextran)
- We may not administer intravenous iron if you have certain liver or kidney diseases, asthma, eczema or other allergies.
- It should not be used where your anaemia is not due to iron deficiency.
- It is not recommended if you have any new infections or if you have a current flare of rheumatoid arthritis.

If you have any of these problems please let the doctor or nurse know.

### What are the risks?

Severe side effects are rare. The nurse looking after you will want you to report if you are feeling at all unwell. In particular we want to know if you are getting tingling in your skin, a rash or itching and we need to know immediately if you are having trouble breathing, your mouth or tongue is swelling up or you are getting wheezy.

### After treatment

#### When will I feel the effect?

The time it takes for each patient to feel an improvement in their symptoms is very individual. Some people will feel better after only a few days, others will feel an improvement after a few weeks or a month.

#### Are there any side effects after treatment?

Some patients may experience achy joints or limbs or sometimes fever in the days after an infusion. Although uncomfortable, these effects usually settle after a few days. Sometimes using simple painkillers e.g. paracetamol can help ease the discomfort. If you have other worrying symptoms while at home please contact your GP for advice.