Obstetrics and Gynaecology

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Ferinject (Ferric Carboxymaltose) Intravenous Iron in Obstetric patients

What is Ferinject?

Ferinject is an injectable formulation of iron that is used to correct iron deficiency anaemia.

Why do you need it?

Early detection and appropriate management of iron deficiency anaemia may prevent otherwise an unnecessary blood transfusion.

If left untreated, anaemia can make you feel very tired. You may feel shortness of breath or your heartbeat can go very fast and you can feel them beating in your chest (palpitations). If you get too unwell, there are increased chances that you might need a blood transfusion.

When do you receive it?

Ferinject is given when your blood tests (Haemoglobin and Ferritin) reveal that you have iron deficiency anaemia and do not tolerate iron tablets or they are not working well.

When and how will you receive it?

- You will be called to Maternity Day Assessment Unit at the hospital (Birmingham Heartlands Hospital and Good Hope Hospital).
- The nurse/midwife will explain the treatment to you and perform a set of observations including blood pressure, heart rate and temperature. A cannula/intravenous line will be inserted into your arm to allow the intravenous iron to be started. This cannula will be removed before you leave.
- The infusion takes around 30 minutes to administer and you will be required to stay for 30 minutes following completion of the infusion to ensure you do not experience any symptoms of allergy or reaction to the iron infusion.
- You will be then monitored closely during and following the infusion and will have a repeat a set of observations. As long as you feel well, you will be able to leave.

If you need to receive a second dose of Ferinject, it will not be given until at least 14 days after the first dose.

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Possible allergic reactions:

Ferinject is generally safe unless you have a known sensitivity or allergy to iron supplements, a liver problem or you are in the first trimester (first 12 weeks) of pregnancy.

- 1. Less than 1% (1 in 100) will experience some allergic reaction
- 2. Up to 10 in 100 (10%) may experience such as headache, dizziness, nausea and vomiting, rash, muscle cramps, diarrhoea, constipation, low or high blood pressure, flushing, abnormal liver function and injection site reactions.
- 3. On rare occasions, fluid can leak out of the cannula or the needle in your vein and lead to discoloration/staining of the skin, which occasionally is permanent.
- 4. In some patients these allergic reactions (affecting less than 1 in 1,000 people) may become severe or life-threatening (anaphylactic reactions).

You must report any symptoms to the nurse/midwife immediately whilst you are in the clinic. If you feel unwell after going home, please report to the Pregnancy Assessment Room (PAER) at Heartlands Hospital or Delivery Suite at Good Hope Hospital, Accident and Emergency department (A &E) or GP telling them you have had an iron infusion. You may be having an allergic reaction and may need treatment.

Other medicines and Ferinject:

Tell your doctor if you are using, have recently used or might use any other medicines, including medicines obtained without prescription.

You must not take iron tablets or supplements while you are having Ferinject. If you need to restart the oral iron, it would be at least 5 days after the last dose of Ferinject.

Driving and using machines after Ferinject is unlikely to impair the ability to drive or operate machines.

You must NOT receive Ferinject if-

- 1. You are allergic to ferric carboxymaltose or any other similar composition
- 2. You have experienced serious allergic reactions to other injectable iron preparations
- 3. If you have anaemia not caused by iron deficiency
- 4. If you have an iron overload (too much of iron in your body) or are at risk of it (e.g., sickle cell disease) or disturbances in the utilisation of iron.
- 5. You are in the 1st trimester (first 12 weeks) of pregnancy. However, it can safely be used in the 2nd or 3rd trimester (between 13–40 weeks) as well as breast-feeding.
- 6. You have current infection, asthma, eczema, current inflammatory or immune condition (e.g. Rheumatoid arthritis, systemic lupus erythematosus), or any other condition in which your liver function is not normal.

Will you need a follow up?

You will need your blood tests to be repeated 2 weeks after the infusion to make sure your iron levels have improved.

If you have any queries, please speak to your doctor or midwife. Alternatively, you can contact us on the following numbers-

Heartlands- DAU - 0121 424 3729

Good Hope - MAC- 0121 424 7577

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