

Ferric Maltol (Feraccru[®]) capsules for the Treatment of Iron Deficiency Anaemia in adults [Gastroenterology only]

Eligibility criteria:

Ferric maltol can be considered for use by gastroenterology in the following circumstances, when no exclusion criteria are met:

- 1. When Hb and ferritin have failed to normalise after adequate trials of at least TWO conventional iron salts, OR
- 2. Patient has been deemed intolerant of conventional iron salts following an individual patient review and side effects are unmanageable to the extent patient is no longer able to continue conventional oral iron despite trial of two different products and implementation of strategies to minimise adverse effects (see "Intolerance to Oral Iron Supplements" below)

Exclusion criteria:

Ferric maltol should <u>not</u> be used if any of the following apply:

- Patient has not previously tried TWO conventional oral iron salts (as per eligibility criteria above)
- Iron overload syndromes
- IBD patients with an active flare or Hb <9.5g/dL
- Repeat blood transfusions
- Haemochromatosis

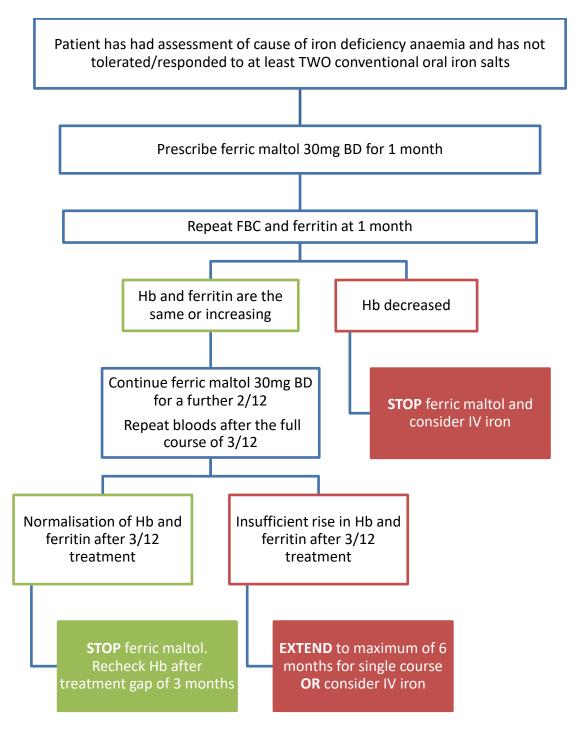
Intolerance to Oral Iron Supplements

Adverse effects of oral iron supplements (including constipation, diarrhoea, epigastric pain, faecal impaction, gastrointestinal irritation and nausea) are a common cause of non-compliance with treatment – 10-20% of people are thought to discontinue iron supplements because of adverse effects.

Adverse effects of oral iron are dose related and directly correlate to the amount of iron absorbed (though the relationship between constipation or diarrhoea is less clear than for nausea and epigastric pain). The incidence of adverse effects is no greater with ferrous sulphate than with other iron salts.

If adverse effects are troublesome, the following strategies should be tried in the first instance to help minimise them:

- Taking the iron supplement with or after food. Iron supplements are better tolerated when taken with or after food, but this may decrease iron absorption by 40-66%
- Reduce the dose frequency to alternate days (e.g. ferrous sulphate 200mg on alternate days)



Repeating Courses:

Courses may be repeated as and when necessary, but not if the patient switches to IV iron

Further information:

Feraccru® should be swallowed whole (with half a glass of water) and taken on an empty stomach. Feraccru® contains lactose and gelatine of bovine origin. For full prescribing information see <u>Feraccru</u> <u>Summary of Product Characteristics</u>.

References

Bath and North East Somerset, Swindon and Wiltshire Joint Formulary Ferric Maltol for the treatment of iron deficiency anaemia in adults (patients intolerant to conventional preparations), last updated March 2022 Accessed online via <u>https://bswformulary.nhs.uk/</u> on 17/01/2023

National Institute for Health and Care Excellence Clinical Knowledge Summary for Anaemia – Iron Deficiency, last revised Nov 2021 Accessed online via <u>http://cks.nice.org.uk</u> on 17/01/2023

Summary of Product Characteristics for Feraccru® 30mg hard capsules, last updated 07/10/2021 Accessed online via the Electronic Medicines Compendium http://emc.medicines.org.uk on 17/01/2023