

**Patient
Information**

Ferinject[®] iron infusion

Introduction

You have been given this leaflet as you are anaemic with low iron levels in your body. Your doctor has suggested that you receive Ferinject[®] which is a special type of iron preparation given through a drip. Ferinject[®] is used instead of iron tablets.

Reasons for giving Ferinject[®]

- You are anaemic and have not responded to oral iron; or the iron tablets have made you unwell
- You are anaemic following the birth of your baby
- You have requested not to have a blood transfusion. Ferinject[®] is not a blood product and does not have the risks of blood

Ferinject[®] can be used instead of blood unless there is an urgent need for blood. Blood transfusions are safe but there is a small risk of infection.

Suitability for Ferinject[®]

You should not have Ferinject[®] if you:

- have anaemia caused by deficiencies other than iron, such as B12 that has not yet been treated
- have ever been told by a doctor that you have 'iron overload'
- have ever had an allergic reaction to iron given to you via a drip
- have ever had a serious problem with your liver

Safety of Ferinject[®]

You should not use Ferinject[®] in the first 3 months of your pregnancy. However, it is safe to use in the rest of your pregnancy and after you have given birth.

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Department

Maternity

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Uncommonly (in less than 1 in every 100 cases) it can cause problems with allergic reactions. The most serious allergic reaction (anaphylaxis) is rare (in less than 1 in every 1000 cases). You will be monitored closely during and after the treatment to make sure that if you have a reaction, it is managed safely.

Very little Ferinject[®] crosses into breast milk so you can safely breast feed.

Side effects of Ferinject[®]

As with all medicines, Ferinject[®] can cause side effects.

Common side effects (in less than 1 in every 100 cases) include:

- Headache
- Dizziness
- High blood pressure
- Nausea
- Injection site reaction, including skin staining

Uncommon side effects (in less than 1 in every 1000 of cases) include:

- Tummy upsets (vomiting, tummy pain, diarrhoea, constipation)
- Flushing, fast heart rate, low blood pressure
- Muscle and joint pains, backache and muscle cramps
- Tiredness, chills, chest pain, swelling, pins and needles
- Temperature, itching and a rash

How is Ferinject[®] given?

Ferinject[®] is usually given when you are in the Delivery Suite or on the Maternity Ward. Before starting the treatment, the midwife will check your pulse, blood pressure and temperature. If you are pregnant, your baby's heart beat will be checked.

A drip (thin tube) will be put into a vein in your arm and the Ferinject[®] infusion will be given over (about) 15 minutes. The midwife will check your pulse, blood pressure and temperature after the drip has finished. If you have not had your baby the midwife will monitor your baby's heart rate before you go home.

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You will usually be able to go home after about 30 minutes unless there are other reasons to keep you in hospital. The treatment does not affect your ability to drive.

After the Ferinject® treatment?

Some women feel a little tired and their urine will be a darker colour the next day.

Most women notice that the symptoms of low iron levels such as tiredness, shortness of breath and dizziness get better within a few days.

If you have any questions after reading this leaflet, please let your midwife know.

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85