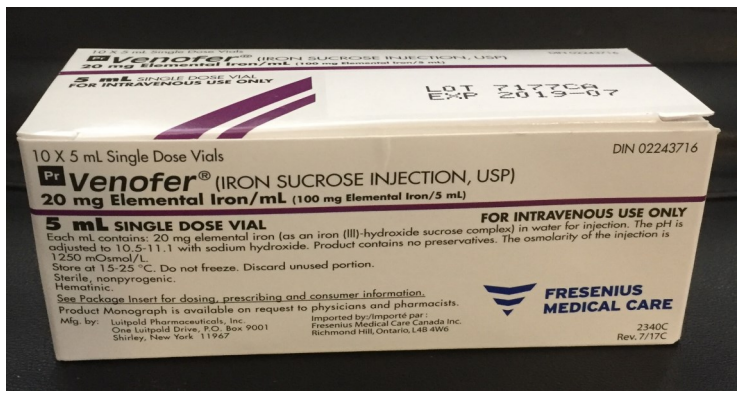
Iron Sucrose (Venofer)… Did you Know?

INDICATIONS FOR USE

1. Intolerance to oral iron
2. Inadequate response to an adequate trial of oral iron
3. Inability to absorb oral iron (ie. gastric bypass, celiac disease, gastritis)
4. Rate of bleeding too brisk for oral iron
5. Severe anemia (Hgb < 90 g/L) especially if ongoing bleeding
6. Non-urgent procedures
7. To avoid blood transfusion in an iron deficient anemia

CONTRAINDICATIONS FOR USE

1. Venofer is contraindicated in active bacterial infections and/or the patient is on antibiotics
2. A known hypersensitivity to iron sucrose in the past



ADMINISTRATION

1. Doses may vary. Standard dose used in blood conservation is 300 mg of Venofer in a single dose. Refer to the WRHA adult parenteral drug monograph for administration routes, rates and dilutions.
   Please note special considerations for dialysis/renal patients
2. Monitor vital signs prior to the start of the infusion, then every 30 minutes and for at least 30 minutes after completion of the infusion until stable.
3. Common rare side effects include metallic taste in mouth, generalized achiness or cramps, headache, nausea, and/or diarrhea, which generally resolve within 24 hours of administration of IV iron.
4. If multiple doses are required they should be given at least 48 - 72 hours apart.
5. A patient's hemoglobin will start to rise 3 - 7 days after the IV infusion. You can expect a 1 - 2 point rise in the hemoglobin per day, and after 2 - 4 weeks the hemoglobin will have risen 20 - 30 g/L.
6. If patient is taking oral iron it is recommended that this be resumed 5 days after receiving the last dose of Venofer
7. The following patients should receive Venofer at a slower rate due to increasing risk and/or severity of hypersensitivity reactions:
   A. Severe asthma or eczema
   B. Severe respiratory or cardiac disease
   C. Treatment with beta blockers, ACE inhibitors

NOTE: Charting should be done as per hospital policy and should not be done on the Cumulative Blood Product Record (CBPR) – this is NOT a blood product

RISKS OF IRON

1. Hypotension (1 - 2%) with flushing may be associated with rapid IV administration and generally resolves in 1- 2 hours.
2. Serious allergic reactions (< 1% incidence). Symptoms include chest pain or tightness, flushing or fainting, difficulty breathing, and hives, rash or itching.

*** For more information about blood conservation, please contact Blood Management Service at (204) 926-8006 ***

REFERENCES

1. Rampton D, Folkersen J, Fishbane S, Hedenus M, Howaldt S, Locatelli F, Patni S, Szebeni J, Weiss G. Hypersensitivity reactions to intravenous iron: guidance for risk minimization and management. Haematologica. 2014 Nov; 99(11):1671-1676. PubMed PMID: 25420283; PubMed Central PMCID: PMC4222472.
2. Sunnybrook Health Sciences Centre INTRAVENOUS IRON THERAPY (Venofer© or Feraheme© or Iron Dextran) INDICATIONS & CRITERIA FOR USE. (2014, November 4). Retrieved from https://emergencymedicinecases.com/wp-content/uploads/filebase/pdf/IV_Iron_Therapy-Indications_and_Criteria_for_Use.pdf
3. Ten Things Physicians and Patients Should Question. (2017, June). Retrieved from https://choosingwiselycanada.org/transfusion-medicine/
4. WRHA Adult Parenteral Drug Monograph. (2017, Nov). Retrieved from http://hschome.hsc.mb.ca/files/drugmanual-adult/dmi-a-ironsucrose.pdf

BLOOD MANAGEMENT SERVICE