Iron infusions



This fact sheet provides answers to some commonly asked questions about iron infusions. It does not take the place of talking to your doctor, pharmacist, nurse, or midwife about your care.

Why does my body need iron?

Your body needs iron to make haemoglobin (Hb), a pigment found in red blood cells. Haemoglobin carries oxygen from the lungs to the rest of the body.

Iron also helps our muscles store and use oxygen. If your iron levels are low, you may feel tired and not able to carry out your normal routine.

Why do I need an iron infusion?

We prescribe iron infusions for a condition called iron deficiency anaemia (IDA). This is when the amount of iron in your body is too low, and the haemoglobin levels fall below normal. If your body does not absorb enough iron from food or supplements, you may need an iron infusion.

Your doctor will consider the benefits and risks of an iron infusion and discuss what is best for you.

What types of iron infusion are available and how long will it take?

There are four types of iron infusions available in Australia. The time taken for your infusion will vary depending on the type.

Your doctor should explain what type of iron infusion they have prescribed.

Types of iron infusion	Time required for infusion
Iron carboxymaltose (Ferinject®)	15 minutes
Iron polymaltose (Ferrosig®)	75 to 90 minutes
Iron sucrose (Venofer®)	3 hours
Iron derisomaltose (Monofer®)	At least 30 minutes

You will need to stay in the hospital for at least 30 minutes after your infusion. This is to make sure you are well after the infusion.

How are iron infusions given?

We inject an iron infusion into your body through a vein, usually in the arm. The iron is diluted before it is injected.

Are there any side effects from the iron infusion?

Side effects and severe reactions are not common. However, you should be aware of what they are.

- flushing
- back pain
- rash
- feeling sick (nausea)
- headache
- dizziness
- changes in taste (for example, a metallic taste)
- changes in blood pressure or pulse.

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Rare and serious side effects

Some people may be allergic to the infusion and have a reaction called anaphylaxis.

Anaphylaxis is a rare but serious reaction.

Symptoms include chest pain, have trouble breathing, dizziness or neck/mouth swelling at any time. Your doctor, nurse or midwife is trained to deal with this if it arises.

Skin staining may occur if the medicine leaks into tissue around the injection site.

This is not common, but the stain can be long lasting or permanent. Keeping your arm still during your infusion will reduce the risk of skin staining.



Are iron infusions safe in pregnancy?

Iron infusions are considered safe to use in the second and third trimester of pregnancy.

In the first trimester of pregnancy, you should try oral iron supplements and avoid iron infusion where possible. Speak with your doctor about which one is best for you.

What to tell your doctor when considering an iron infusion

You will need to tell your doctor and the centre doing your iron infusion if you:

- have a history of asthma, eczema, or other allergies
- had an allergic reaction to any type of iron injection or infusion in the past
- have a history of high iron levels, haemochromatosis, or liver problems think you currently have an infection.

You should also tell them if you are on:

- any medicines including herbal, and medicines sold without a prescription
- sodium-controlled diets.

On the day of the iron infusion

There is no preparation needed for -your iron infusion.

- You do not need to fast. Have your usual meals.
- Take all your regular medicines.
- Drink plenty of fluids; this makes it easier to find a vein for the infusion.
- You will be able to drive home after the iron infusion.

During the iron infusion

Keep your arm as still as possible during your infusion. This will minimise the risk of skin staining.

If you have any side effects or reactions at the injection site during or after the infusion, tell your nurse or midwife immediately. Injection site reactions may include:

- · pain, discomfort or burning
- redness or swelling
- a feeling of pressure or prickling.

We will check your pulse, breathing rate, the amount of oxygen in your blood, temperature, and blood pressure before and during the infusion.

Your nurse or midwife will stop or slow the infusion if they believe you may be having a reaction to the infusion.

What to expect after your iron infusion

It is important to track your health after an iron infusion. Side effects such as headache, muscle, or joint pain can start one to two days after the infusion. They usually settle down over the next couple of days. If these symptoms affect your daily activities, please contact your doctor for advice.

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Your doctor, nurse or midwife will tell you when to start taking your iron tablets again. This is usually one week after the infusion. Blood tests are necessary two to three weeks after the infusion, to check if your iron levels have increased.

Before you leave the hospital, make sure you have:

- a contact number to call if you have any worries or questions
- dates or request forms for any follow up tests or appointments.

Talk with your doctor, pharmacist, nurse, or midwife if you have any questions or concerns.

For more information

Medicines Information Service

The Royal Women's Hospital

Hours: 9am - 4pm (Monday to Friday)

T: (03) 8345 3190

E: drug.information@thewomens.org.au

Better Health Channel

Iron and iron deficiency
www.betterhealth.vic.gov.au/health/conditio
nsandtreatments/iron

Follow up appointments

Date:

Time:

Location:

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