

SURGERY AND ANAESTHESIA

PRE-OPERATIVE ASSESSMENT CLINIC (POAC)

Lead Consultant: Dr C Eickmann | Lead Nurse: Anwen Creegan | Lead Pharmacist: Yasmina Hamdaoui
BCUHB - Anaesthetics I 01248 384366



Taflen wybodaeth i gleifion: therapi haearn i mewn i wythien (Mewnwythiennol)

Wedi i ni brofi eich gwaed yn y Clinig Asesu Cyn Llawdriniaeth (POAC), dangosodd bod y lefelau haearn yn eich gwaed yn isel. Gelwir hyn yn anaemia. Mae eich meddyg wedi penderfynu rhagnodi triniaeth haearn (Monofer), sef pigiad uniongyrchol i wythien yn eich braich.

Mae'n bosibl y bydd ar rai cleifion angen dau bigiad gyda bwlch o wylnos rhwng y ddau.

Mae haearn isel yn gallu arwain at flinder a bod yn fyr eich gwynt.

Mae'n bwysig bod gennych ddigon o haearn cyn eich llawdriniaeth i helpu eich corff wella ar ei hôl ac i osgoi unrhyw effeithiau annymunol yn ystod y llawdriniaeth.

Byddwn yn ail brofi eich gwaed 2-3 wylnos ar ôl i chi gael y pigiad haearn i wneud yn siŵr bod y lefelau wedi codi.

Os byddwch yn cymryd tabledi haearn drwy'r geg, dylech roi'r gorau i'w cymryd cyn eich pigiadau Monofer ac am o leiaf 5 diwrnod ar ôl y pigiad olaf.

Bydd yr apwyntiad i gael y pigiad yn para tuag awr.

Ystyri Monofer yn ddiogel i'w ddefnyddio. Yn anaml (mewn llai nag 1% o achosion) gall achosi adwaith alergol. Fe gewch eich monitro'n agos o'r herwydd, yn ystod ac wedi'r pigiad.

Cymhlethdod prin ond arwyddocaol o Monofer ydy staenio neu ddrygliriad parhaol ar y croen, sy'n gallu digwydd os ydy rhywfaint o'r cyffur yn gollwng tu allan i'r wythien yn ystod y pigiad. Er mwyn lleihau'r risg, fe roddir dŵr neu doddiant halwynog (dŵr halen) yn eich gwythien cyn y Monofer.

Mae sgîl-effeithiau posib yn digwydd mewn rhwng 1 a 10% o gleifion, gan gynnwys cur pen, pendro, brech, cyfogi a chwydu, poen abdomenol, gwasgfa yn y cyhyrau, dolor rhydd, rhwymedd, gweithgarwch anarferol yr iau/afu, gwrido, pwysedd gwaed isel neu uchel ac adweithiau ar leoliad pigiadau.

Iron therapy into a vein (Intravenous) patient information leaflet

We tested your blood in the Pre-Operative Assessment Clinic (POAC) and it showed that the iron level in your blood was low. This is known as anaemia. Your doctor has decided to prescribe iron treatment (Monofer). This will be an injection you will receive directly into a vein in your arm.

Some patients may need two injections with a gap of at least one week between them.

Low iron can give you symptoms of feeling tired and breathless.

It is important to have enough iron before your surgery to help your body recover afterwards and to avoid any unwanted effects during your surgery.

We will re-test your bloods 2-3 three weeks after you receive the iron injections to make sure your levels have risen.

If you are taking oral iron tablets you should stop them before your Monofer injections and for at least 5 days after the last injection.

The appointment for the injection will last about one hour.

Monofer is considered safe to use. Rarely (in under 1% of cases) it can cause allergic reactions. You will therefore be monitored closely before, during and after the infusion.

A rare but significant complication of Monofer is permanent skin staining or discolouration, which can occur if some of the drug leaks outside the vein during the infusion. To reduce the risk, a flush of water or saline (salt solution) is given into your vein before the Monofer.

Potential mild side effects occur in 1 to 10% of patients, including headache, dizziness, rash, nausea and vomiting, abdominal pain, muscle cramps, diarrhoea, constipation, abnormal liver function, flushing, low or high blood pressure and injection site reactions.