#### Information For the Use Ferric Carboxymaltose (500mg)

# **Feryskol FCM Injection**

Information for the Use

Ferric Carboxymaltose (500mg) Injection

#### Composition: Each vial contains:

• Ferric Carboxymaltose: 500 mg (equivalent to elemental iron).

#### **Description:**

Ferric Carboxymaltose is a non-dextran, intravenous iron formulation used to treat iron deficiency states. It ensures rapid replenishment of iron stores with a lower risk of hypersensitivity reactions compared to older formulations.

Indications:

Ferric Carboxymaltose Injection is indicated for:

- Iron Deficiency Anemia (IDA):
  - In adults and adolescents ≥12 years when oral iron therapy is ineffective or cannot be tolerated.
  - Associated with chronic diseases such as chronic kidney disease (CKD), inflammatory bowel disease, or heavy uterine bleeding.
- Perioperative Anemia: In patients undergoing elective surgeries to optimize hemoglobin levels.
- Postpartum Anemia: For rapid iron replenishment in postpartum women.

### **Mechanism of Action:**

Ferric Carboxymaltose consists of iron bound to a carbohydrate polymer. After intravenous administration, it is taken up by macrophages and releases iron into the bloodstream. This iron is incorporated into hemoglobin, myoglobin, and other iron-dependent enzymes.

**Dosage and Administration:** 

- The dose depends on the patient's iron deficiency level.
- Typical Dosing:
  - 500 mg can be administered per session, with a maximum of 1000 mg per week.
- Administered as:
  - Intravenous Bolus Injection: 500 mg over at least 4-6 minutes.
  - Intravenous Infusion: Dilute in 100-250 ml of 0.9% saline; administer over 15-30 minutes.
- Total iron requirement is calculated using the Ganzoni formula or based on clinical judgment.

## **Contraindications:**

- Hypersensitivity to Ferric Carboxymaltose or its components.
- Iron overload disorders (e.g., hemochromatosis).
- Anemia not attributed to iron deficiency (e.g., megaloblastic anemia).

**Precautions:** 

- Allergic Reactions: Monitor for signs of hypersensitivity during and after administration.
- Hepatic and Renal Impairment: Use cautiously in patients with significant liver or kidney dysfunction.
- Monitoring: Assess ferritin, hemoglobin, and transferrin saturation levels periodically to avoid iron overload.
- Pregnancy and Lactation:
  - Pregnancy Category B: Use only if clearly needed during the second and third trimesters.
  - Lactation: Limited data suggest low iron transfer into breast milk.

Possible Side Effects: Common side effects:

- Nausea, vomiting, or abdominal discomfort.
- Injection site reactions (pain, swelling).
- Headache, dizziness, or flushing.

Serious side effects:

- Hypersensitivity Reactions: Includes rash, itching, or anaphylaxis (rare).
- Iron Overload: Symptoms include joint pain, fatigue, or darkened skin.

**Drug Interactions:** 

- Avoid concurrent administration with oral iron, as it reduces absorption of oral forms.
- Use cautiously with medications that may exacerbate hypersensitivity reactions.
- Storage:
  - Store at 15°C to 25°C.
  - Protect from light and freezing.

• Use immediately after opening.

**Special Instructions:** 

- This medication is for intravenous use only and should be administered by trained healthcare professionals.
- Ensure emergency equipment is readily available to manage hypersensitivity reactions.
- Discontinue use if signs of iron overload or intolerance occur.

Note: Regular follow-ups are essential to monitor the effectiveness of therapy and to avoid iron overload. Ensure adherence to prescribed dosage and frequency.

Manufactured in India for:

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