

Tinzaparin

Department of Renal Medicine Patient Information Leaflet

Introduction

The information in this booklet is for patients who are having haemodialysis.

People having haemodialysis need to have medicine to ensure the blood that is outside the body being cleaned and purified does not clot during their treatment. This leaflet describes one of these medicines, called tinzaparin.

Please note that the information in this booklet is only a guide. If you need any more information or have any queries, please speak to the Renal Unit staff.

What is tinzaparin?

Tinzaparin belongs to a group of medicines known as anticoagulants. An anticoagulant is something that helps prevent blood from clotting. Tinzaparin is a type of heparin called a low molecular weight heparin.

What does tinzaparin do?

It changes the way your blood clots while you are having dialysis. This means your blood will keep flowing smoothly during your treatment.

How is tinzaparin used in dialysis?

Tinzaparin is injected into the dialysis machine within the first 15 minutes of your treatment. A second dose is sometimes needed after two hours of dialysis. Your nurse and doctor will review this when you start using tinzaparin.

What are the benefits?

It allows your blood to move easily through the dialysis machine without clotting. It wears off over time so that after dialysis any risks of bleeding are reduced.

This type of heparin has fewer side effects than conventional heparin. Therefore the risk of hair loss, bone density loss and increased levels of potassium in the body are reduced.

What are the risks?

Most drugs have some risks or side effects and it is important that we make you aware of these. The risks of tinzaparin are:

Common side effects (one out of 10 people may get these)

- Anaemia. This is a reduction in red blood cells that can result in your skin looking pale. It can cause weakness and breathlessness.
- Bruising.

Less common side effects (one out of 100 people may get these)

- Changes in blood test results, such as those that show how your liver is working and changes in platelets in your blood. Platelets help wounds heal and prevent bleeding by forming blood clots.
- Allergic reaction.
- Itchy skin.

Rare side effects (one out of 1,000 people may get these)

- If you have a drop in the number of platelets, this can lead to more harmful blood clots. Your doctor can explain more about this.

- Changes in your blood tests – the amount of potassium in your body may increase. This is more likely to happen if you have severe kidney problems or diabetes.
- Your bones may weaken or break more easily. This is known as osteoporosis and has been seen in patients using heparin for a long time.
- Prolonged painful erection in men.

What should I look out for at home?

The following are serious but rare allergic reactions that **need urgent medical attention** (one out of 1,000 people may get these):

- Difficulty breathing
- Your face and throat swell
- Your skin develops a rash
- Blistering of your skin, eyes, mouth, or genitals or your skin peels

If you get any of these symptoms, **dial 999**.

If you spot any of the following signs that mean you may be starting to bleed severely:

- Red or brown urine
- Passing blood when you poo, or having black poo
- Severe bruising
- Bleeding from your nose or mouth that will not stop

Contact your GP, dial 111 or in an emergency, go to your nearest accident and emergency (A&E) department.

What are the alternatives?

An alternative to the tinzaparin drug is heparin sodium. Your consultant will discuss this with you.

What do I need to tell you?

If you know you are allergic to any form of heparin, you must tell your doctor or nurse as we may not be able to use tinzaparin during your dialysis.

If you have had surgery in the last 72 hours, or are expecting to have an operation within 72 hours, you must tell your doctor. We will need to make alternative arrangements for your dialysis.

What if I have problems at home?

If you experience anything unusual, or bleeding that is not expected when you get home, contact one of the following:

- the Russells Hall Hospital dialysis unit
- your parent hospital
- your GP Surgery
- your nearest A&E department

Contact information

The Renal Unit at Russells Hall Hospital: 01384 244384

7.30am to 8pm, Monday to Saturday

9am to 15.30pm, Sunday

Ask to speak to a vascular access nurse (VAN) or a member of the haemodialysis staff, if a VAN is not available.

Out of these hours, ring the hospital switchboard number and tell them you are a renal patient. Ask to speak to the haemodialysis nurse on call.

Remember: the renal team is always willing to give help and advice. Please contact us, however small your query.

Russells Hall Hospital switchboard number: 01384 456111

Kidderminster Dialysis Unit: 01562 826370

6am to 7.30pm, Monday to Saturday

Tipton Dialysis Centre: 0121 557 8313

7.15am to 6.30pm, Monday to Saturday

If you have any other questions, please speak to your dialysis nurse or kidney doctor.

Can I find out more?

The following weblinks have information on dialysis and kidney conditions:

- www.patient.co.uk
Information fact sheets on health and disease.
- www.nhs.uk
For information on dialysis:
<http://www.nhs.uk/Conditions/Dialysis/Pages/Introduction.aspx>
- www.kidney.org.uk
Information on many renal conditions. Help and support for you and your family.

This leaflet can be downloaded or printed from:

<http://www.dgft.nhs.uk/services-and-wards/renal/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru va rugăm sunați la 0800 073 0510.

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