

Greetings!

We would like to invite you to attend the webinar on:

New Treatment Paradigm for Iron Deficiency Anaemia



ID/IDA remains a global health concern and is a common comorbidity in multiple medical conditions. We are honoured to present to you our esteemed speakers who will be sharing their clinical insights and new treatment paradigm for IDA.

Date: 27 November 2021 (Saturday) | **Time:** 2:00–3:30 PM MYT

Moderator	Dr Premitha Damodaran Consultant Obstetrician and Gynaecologist, Pantai Hospital Kuala Lumpur
Speakers	Dato Dr Chang Kian Meng Consultant Haematologist and Transplant Physician, Sunway Medical Centre Assoc. Prof. Noppacharn Uprasert Associate Professor of Medicine, Division of Hematology, Chulalongkorn University, Thailand

Agenda

2:00 PM	Opening
2:05 PM	ID/IDA: Omnipresent Yet Undertreated Dato Dr Chang Kian Meng
2:25 PM	New Paradigm for IDA: The Role of High Dose IV Iron Assoc. Prof. Noppacharn Uprasert
2:55 PM	Case Sharing Assoc. Prof. Noppacharn Uprasert
3:15 PM	Panel Discussion
3:30 PM	Adjourn

ID: Iron deficiency; IDA: Iron deficiency anaemia; IV: Intravenous

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This webinar is brought to you by



Ferinject® Abbreviated Product Information

Pharmaceutical Form: Ferric carboxymaltose as solution for injection/infusion (10 mL solution containing 500 mg iron). **Indications:** Ferinject® is indicated for treatment of Iron Deficiency when oral iron preparations are ineffective, oral iron preparations cannot be used, and when there is a clinical need to deliver iron rapidly. **Administration:** Ferinject® must only be administered by the IV route and must not be administered by SC or IM route. **Posology:** Follows a stepwise approach: [1] determination of the individual iron need, [2] calculation and administration of the iron dose(s), and [3] post-iron repletion assessments. These steps are outlined in the Prescribing Information Leaflet. A single dose of Ferinject® should not exceed 1,000 mg of iron per day. The maximum recommended cumulative dose of Ferinject® is 1,000 mg of iron per week. Ferinject® should only be administered when staff trained to evaluate and manage anaphylactic reactions is immediately available, in an environment where full resuscitation facilities can be assured. The patient should be observed for adverse effects for at least 30 minutes following each Ferinject® administration. **Contraindications:** The use is contraindicated in cases of known hypersensitivity to Ferinject® or any of its excipients, known serious hypersensitivity to other parenteral iron products, anaemia not attributed to Iron Deficiency and evidence of iron overload or disturbances in utilisation of iron. **Special Precautions:** If hypersensitivity reactions or signs of intolerance occur during administration, the treatment must be stopped immediately. Facilities for cardiorespiratory resuscitation and equipment for handling acute anaphylactic/anaphylactoid reactions should be available. Parenterally administered iron preparations can cause hypophosphataemia, which in most cases is transient and without clinical symptoms. In patients with liver dysfunction, parenteral iron should only be administered after careful risk/benefit assessment. Parenteral iron must be used with caution in case of acute or chronic infection, history of asthma, eczema or atopic allergies. Discontinue use in patients with ongoing bacteraemia. Stop immediately in case of paravenous leakage. A careful risk/benefit evaluation is required before use in pregnancy. Not recommended in children <14 yr. **Overdose:** Administration of Ferinject® in quantities exceeding the amount needed to correct iron deficit at the time of administration may lead to accumulation of iron in storage sites eventually leading to haemosiderosis. Monitoring of iron parameters such as serum ferritin and transferrin saturation may assist in recognising iron accumulation. **Undesirable Effects:** Common (1% to <10%): Hypophosphataemia, headache, dizziness, flushing, hypertension, nausea, injection/infusion site reactions. **Interactions:** Oral iron therapy should not be started for at least 5 days after the last injection of Ferinject®. **Date of Revision:** 29 Jul 2021. **Reference Code:** MY-VPI-FESI-DEA-HCP-10655-V1-072021.

Please refer to the full prescribing information before prescribing. Full prescribing information is available upon request.

For any adverse event, kindly report to zpmypv@zuelligpharma.com. For more information, please consult with the local representative.