Desferoxamine (desferrioxamine) mesilate Intravenous Infusion for Adults

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- **Monitoring** requirements - see overleaf
- **Rapid** administration may lead to flushing, hypotension and acute collapse
- **Care** should also be taken when **flushing IV lines** to avoid the sudden infusion of residual desferoxamine which may be present in the dead space of the line as this may lead to acute collapse

Available preparations

Desferal 500mg vial

Reconstitution

Water for injection

5ml per 500mg vial

Infusion fluids

Sodium chloride 0.9% or Glucose 5%

Methods of intravenous administration

Continuous intravenous infusion (administer using an electronically controlled infusion device) For the treatment of acute iron poisoning

- The volume of fluid to be used for intravenous infusion is not critical, as long as the recommended rate of administration is not exceeded [(ref 1)] - if a 50ml infusion volume is used the residual volume in the infusion line must be flushed through at the same rate to avoid significant underdosing
- Administer at a suitable rate according to dosage instructions

Dose in adults

Acute iron overload/poisoning

- Recommended dose is 15mg per kg per hour
- Reduced as soon as the situation permits, usually after 4 to 6 hours
- Maximum of 80mg per kg in 24 hours cannot usually be exceeded. (but see below re Poisons centre)
    - If symptoms have not improved discuss with Poison Centre [ref 2]
    - An extension of the infusion may be recommended

Other indications - see manufacturer's SPC

Renal impairment

- See Specialist texts

Monitoring

- Follow Poisons Centre advice

Further information

Acute iron overload

- Haemodialysis may be required if the patient is in renal failure as the ferrioxamine complex formed must be renally excreted
- Theoretically, 100mg Desferoxamine can chelate 8.5mg of ferric iron
- It should be noted that the serum iron level may rise sharply when the iron is released from the tissues

Storage

- Store below 25^{0}C

References

SPC July 2018

1: Injectable medicines administration guide, Medusa, assessed online on 18/06/2026

2: Toxbase, assessed online on 18/06/2026

Therapeutic classification

Chelating agent