



Chemotherapy / immunotherapy and the rare risk of extravasation

Information for patients from the Trust's Chemotherapy Units

This leaflet is not meant to replace the information discussed between you and your doctor, but can act as a starting point for such a discussion or as a useful reminder of the key points.

This leaflet explains extravasation, and its causes, and treatments within chemotherapy / immunotherapy.

What is extravasation?

Extravasation is the term used to describe the leakage of a drug out of the vein into the surrounding tissue.

What causes extravasation?

The exact cause is not always clear, but we know that some people are more at risk than others. These include;

- elderly, confused, or agitated people
- people with fragile veins or certain diseases such as Raynaud's phenomenon
- people with a low platelet count (platelets are cells in the blood which help to stop bleeding; they also line the inside of veins)
- people who have already had a lot of chemotherapy treatment through their veins; and
- children.

What are the symptoms?

You may notice redness, inflammation, or irritation, warmth, pain, stinging, or swelling at or near the site where the drug enters your vein.

Fortunately, more severe symptoms are very rare. However, these can range from superficial tissue / skin reaction (such as inflammation and blistering of the nearby skin), to damage to the underlying tissue and structures (such as muscles and tendons).

How is it diagnosed?

Extravasation can be difficult to diagnose. Some drugs can make veins feel sore without causing lasting damage and other drugs can cause temporary redness or 'flare' around the treatment site.

If while you are being given your treatment you feel a change in the sensation or anything different in the way the drugs are going into your vein, please let the chemotherapy staff know immediately. It is important to let us know how you really feel, so that we can act quickly.

If extravasation is confirmed or suspected as having happened, we will ask you to look at the area once a day to check whether;

- the area has changed in colour or increased in redness
- the area is blistering, peeling, or flaking
- the area is more uncomfortable; and / or
- the pain is making it difficult for you to exercise your arm or hand.

If the answer is 'yes' to any of the above symptoms, please contact your Chemotherapy Unit on the number in your red appointment book. The numbers are also printed at the end of this leaflet.

Can it be prevented?

We can reduce the risk by careful choice of the type of cannula used (this is a small device for entering the vein and through which fluids and drugs are given) and where it is placed in your arm.

The possibility of extravasation happening cannot be completely prevented. This is why it is so important that you let staff know immediately of any change in the sensation around the cannula whilst your treatment is being given. Quick action can reduce the damage and discomfort of extravasation.

What are Central Venous Access Devices?

Central Venous Access Devices are semi-permanent lines which your nurse will be able to tell you about. Whether or not you need one depends on the regime of treatment you are to have. If you have a central line the risk of extravasation is reduced, but it is still possible.

If you have any of the symptoms listed above, tell a member of the nursing team immediately.

How is it treated?

East Kent Hospitals has a clear policy on the management of extravasation and the treatment needed for the different drugs used. All staff working on the Chemotherapy Units have regular training on extravasation.

If you experience an extravasation, you will be asked to continue some treatment. This usually involves applying a cream to the area (depending on which drug has leaked), elevating (raising) your affected arm or hand, and taking painkillers if needed. The treatment for extravasation can make the treated area uncomfortable and you may need to take painkillers for a while afterwards.

Depending on which drug has extravasated, or the extent to which it has, you may be asked to come to the Chemotherapy Unit for further treatment. However unfortunately, even with prompt action, certain drugs can cause painful tissue damage and some patients may need to see a plastic surgeon for treatment.

Available help and further information

- **Brabourne Ward, Kent and Canterbury Hospital, Canterbury**
Telephone: 01227 864394
- **Cathedral Day Unit, Kent and Canterbury Hospital, Canterbury**
Telephone: 01227 783096 (also the number for out of hours emergency advice)
- **Celia Blakey Centre, William Harvey Hospital, Ashford**
Telephone: 01233 616194
- **Viking Day Unit, Queen Elizabeth the Queen Mother Hospital, Margate**
Telephone: 01843 234488

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This leaflet has been produced with and for patients.

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 783145 (tel://+441227783145), or email ekh-tr.pals@nhs.net (ekh-tr.pals@nhs.net)

Patients should not bring large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property has been handed into Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals website (<https://www.ekhuftr.nhs.uk/information-for-patients/patient-information/>).

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