



# Kent Kidney Care Centre: medicines prescribed for people with chronic kidney disease

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## Information for patients

The following pages offer you information on some of the medicines that you may need.

It is possible you need all of them, but equally you may need only one or two.

Medicines are an important part of the management of your condition.

There is a partnership between you, the patient, and us, the healthcare professionals. The aim is for you to achieve the best possible use from, and understanding of your medicines. So if you have any problems with your medicines or any questions no matter how small, please contact one of the departments listed below.

- **Pharmacy Department, Kent and Canterbury Hospital, Canterbury**

- Pharmacy  
Telephone: 01227 864263
- Marlowe Ward  
Telephone: 01227 783100
- Medicines Information  
Telephone: 01233 616001

For non-urgent questions relating to your medicines and kidney disease, please email Medicines Information. ([ekh-tr.medicinesinformation@nhs.net](mailto:ekh-tr.medicinesinformation@nhs.net))

## Your medicines

There are a number of medicines that are used to help treat kidney disease.

There are some important points to be aware of, in order to make the most of your medicines and avoid problems.

- Read the leaflet that comes with every medicine. Keep it handy in case you need to refer to it once you start taking your medicine.
- Do not take any medicines you can buy 'over the counter' without checking with your community pharmacist or doctor first. Some of these medicines can interact with your prescribed treatment. This same advice applies to herbal medicines and dietary supplements that can be bought from health food shops (for example cod liver oil and St John's Wort).
- Do not share your medicines with anyone else, they are prescribed just for you and may cause harm to someone else.
- Do not take anyone else's medicines, these are prescribed for them and may cause you harm.
- Make sure you store your medicine in the correct way. Some medicines need to be refrigerated and you will be advised of this. All medicines need to be stored in a cool dry place out of the reach of children.
- Do not hoard medicines; take any unused or discontinued medicines to your local chemist to be disposed of correctly.

### Renal Multivitamins (Renavit®)

- These tablets are specially designed for patients with kidney disease. They contain a mixture of vitamins needed by your body if there are problems with your kidneys.
- They also replace vitamins that are removed by dialysis.
- The vitamins included are those needed for a healthy blood, immune, and nervous system, and for wound healing.
- It is possible that your chemist has not come across this specialist medicine. If you find this is the case the chemist can order Renavit® from a company called Stanningley Pharma Ltd, Biocity, Pennyfoot Street, Nottingham, NG1 1GF.
- **The usual dose is one tablet each day, swallowed whole (not chewed) with a little fluid.**

### Folic acid

- You may be prescribed a tablet called folic acid.
- Folic acid is an essential vitamin needed to help make red blood cells.
- **The usual dose for folic acid is 5mg (milligrams) once a day.**

### Iron tablets

- Iron tablets are used to help to correct anaemia, a common problem amongst patients with kidney disease.
- Your blood tests will show if you are anaemic and iron tablets will be prescribed for you by the kidney doctor or nurse.

- The dose for oral iron will depend on the brand you are prescribed, for example:
  - **Ferrous Sulphate tablets:** 200 mg (one tablet) three times a day.
  - **Ferrous Fumarate tablets:** 210 mg (one tablet) three times a day.
  - **Ferrous Fumarate liquid:** 280 mg twice a day.
  - **Ferrous Gluconate tablets:** four to six tablets a day in divided doses.
- The main side effect of iron tablets is irritation to the gut, such as nausea (feeling sick), vomiting, stomach pain, diarrhoea (or constipation), or blackening of stools (poo). If you are affected by any of these, please tell your doctor or nurse.
- It is important to know when to take your iron tablets. Certain things can stop them working as well as they should, for example when they are taken with certain foods or other medications.
- Do not take your iron tablets at the same time as your phosphate binders (Calcichew®, Phosex®, Osvaren®, Renagel®, Fosrenol®, Velphoro®), sodium bicarbonate, antacids, or some antibiotics. Iron tablets should be taken one hour before or two hours after you have taken any of these.
- Do not take your iron tablets with a cup of tea and avoid taking them at meal times with food.

### Erythropoiesis Stimulating Agents (ESA)

Your kidneys produce a hormone called erythropoietin, in response to a reduced level of oxygen in your blood. As your kidney function declines your kidneys cannot produce as much of this hormone and you can become anaemic (low levels of red blood cells).

There are many man-made ESAs available. In this Trust we use two types, Eprex® and Mircera®.

- **Eprex®** is prescribed for all our patients who need ESA therapy.

Eprex® is normally given as an injection into the skin (subcutaneously). It will be prescribed by the hospital for you to administer at home once or twice a week. It is usually delivered directly to your house. It is not prescribed by your GP.

If you have haemodialysis, Eprex® will be given during your dialysis into the machine lines by the Unit staff up to three times a week.

- **Mircera®** is also an injection that can be given under the skin. It is only used in those patients needing very high doses of Eprex®, that have had an allergic response to Eprex®, or those who have tissue viability concerns, such as thin skin.

It is also prescribed by the hospital and delivered to you at home or given during haemodialysis. Mircera® is usually given once a month.

### Phosphate binders

Healthy kidneys will remove phosphate that the body does not need. If you have a kidney problem the phosphate levels can build up in your blood stream. Too much phosphate in your blood can lead to itching and

upset the balance of calcium in your body. This can lead to a condition called hyperparathyroidism, which can cause thinning of your bones.

Your body needs phosphate, which it gets from the food you eat. A low phosphate diet can reduce the amount of phosphate available for your body to absorb; your doctor or dietician will advise you on this. Sometimes it is necessary to take medicines that react with phosphate in the food, trapping it in your stomach, so it cannot be absorbed. These medicines are called phosphate binders.

Taking phosphate binders means your body has less phosphate to deal with. If you are on dialysis they give the dialysis more chance of removing excess phosphate.

It is important to know when to take your phosphate binders. Taking them at the right time will make sure that they work properly. Several types of medicines are used as phosphate binders, these include the following.

- **Calcium Carbonate (Calcichew®)**
- **Calcium Acetate (Phosex®, Renacet®)**
- **Calcium Acetate and Magnesium Carbonate (Osvaren®)**
- **Lanthanum Carbonate (Fosrenol®)**
- **Sevelamer (Renagel®, Renvela®)**
- **Sucroferric Oxyhydroxide (Velphoro®)**

Which type you take depends on several things, including the results of your blood tests and whether you can tolerate the medicines.

- **Calcium Carbonate (Calcichew®)** can be sucked or chewed before or with meals and is used when your calcium levels are low. Calcium can cause constipation.

- **Calcium Acetate (Phosex®, Renacet®)**

Less calcium is absorbed with this preparation, so it may be used if your calcium levels are normal. These tablets should be taken during meals. They can cause indigestion.

- **Calcium Acetate and Magnesium Carbonate (Osvaren®)**

Very little calcium is absorbed with this preparation, so it may be used if your calcium levels are normal. Osvaren® should be taken during meals.

- **Lanthanum Carbonate (Fosrenol®)** should be taken with the last few mouthfuls of each meal. The tablets should be chewed thoroughly and not swallowed whole.
- **Sevelamer (Renagel®, Renvela®)** is not absorbed and acts like a sponge, mopping up phosphate in the gut. It should be taken with meals. It can cause diarrhoea in some people.
- **Sucroferric Oxyhydroxide (Velphoro®)** is an iron-based calcium-free chewable phosphate binder. It should be taken with meals.

**Alfacalcidol (One-Alfa®)**

This is a medicine which acts like vitamin D. The kidneys are involved in making vitamin D. Vitamin D is needed for healthy bones and helps control the levels of calcium and phosphate in your blood. As your kidneys fail, your body's ability to make this vitamin is lost, so you need to replace it by taking capsules called alfacalcidol.

Some renal patients can develop a condition called hyperparathyroidism. If not treated, this can upset the calcium and phosphate levels in the blood and affect the bones. You may also need alfacalcidol to control this.

Your kidney doctor will prescribe this drug for you should you need it, either as a high dose once or twice a week or daily depending on your blood results. If your calcium levels are very low you may be prescribed alfacalcidol and a calcium supplement.

It is important that you have regular blood tests if you are taking this, to check that your calcium doses are not too high and that you are receiving the correct dose. These blood tests will be arranged by your kidney doctor or nurse.

### **Sodium bicarbonate**

The kidneys help to neutralise and remove excess acid in the blood. When kidney function is reduced there is a risk that the acid can accumulate (build up) in your body. This medicine contains the same ingredient used in cooking. It is used to stop the blood becoming acidic, by converting any excess acid in the blood to harmless products.

There are two strengths of this medicine, 500 mg and 600 mg. They are almost the same, so they can be interchanged (swapped with each other). The dose you have will depend on your most recent blood test.

This medicine is well tolerated but can taste salty.

Sodium bicarbonate should not be taken at the same time as some coated medicines, as it removes the protective covering.

Do not take sodium bicarbonate at the same time as iron tablets, as it stops the iron being absorbed. A time gap of two hours between oral sodium bicarbonate and other medications is recommended when possible.

**This leaflet has been produced with and for patients.**

**Please let us know:**

- If you have any accessibility needs; this includes needing a hearing loop or wanting someone to come with you to your appointment.
- If you need an interpreter.
- If you need this information in another format (such as Braille, audio, large print or Easy Read).

**You can let us know this by:**

- Visiting the Trust web site (<https://www.ekhuft.nhs.uk/ais>).
- Calling the number at the top of your appointment letter.
- Adding this information to the Patient Portal (<https://pp.ekhuft.nhs.uk/login>).
- Telling a member of staff at your next appointment.

**Any complaints, comments, concerns or compliments**, please speak to a member of your healthcare team. Or contact the Patient Advice and Liaison Service on 01227 783145 or email ([ekh-tr.pals@nhs.net](mailto: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 information leaflets** are available via the East Kent Hospitals' web site (<https://www.ekhuft.nhs.uk/patient-information>).

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