

Chemotherapy and the rare risk of extravasation

Patient Information Leaflet

A decorative graphic consisting of several overlapping, wavy lines in shades of grey and white, creating a sense of movement and depth. The lines are smooth and fluid, with varying thicknesses and colors, ranging from light grey to dark grey.

This leaflet contains important information about your treatment.
Please ensure you read and understand it.

Introduction

This booklet has been written to provide information to patients receiving intravenous (IV) chemotherapy. It is not meant to replace the discussion between you and the nursing team treating you but we hope it helps you to understand more about what is discussed.

What is extravasation?

Extravasation is the term used to describe the accidental leakage of a drug out of the vein into the surrounding tissue. This can occur during the administration of chemotherapy or other intravenous drugs. Evidence of Extravasation may be delayed, often symptoms aren't present for some days or weeks following the initial administration of the infusion.

Whilst it can be potentially serious it is important to know the risk of extravasation is very low.

What causes extravasation?

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

- The elderly.
- People who are confused or agitated .
- People with fragile veins or certain diseases.
- People with a low platelet count (platelets are cells in the blood which help to stop bleeding).
- People who have already had a lot of chemotherapy treatment through their veins.
- Movement of the cannula (a small device entering the vein), through which fluids, drugs and treatment can be given).
- Multiple puncture sites
- Limited site selection
- Lymphoedema

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 the vein. Fortunately, more severe symptoms are very rare. However, these can range from superficial tissue/skin reactions

and inflammation and blistering of the nearby skin. More severe symptoms can be damage to the underlying tissue and structures, such as muscle and tendons.

How is it diagnosed?

Extravasation can be difficult to diagnose as 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 during the process of being given your treatment, you feel a change in sensation or anything different in the way the drugs are going into the vein, please tell the chemotherapy staff immediately. It is important to let us know how you really feel so that we can act quickly.

Action to take

If extravasation is confirmed or suspected as having occurred, we will ask you to look at the area once a day to assess whether:

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

If the answer is 'yes' to any of the above symptoms please contact Cancer Treatment Helpline on 0141 301 7990 (8am-8pm)

National Treatment Helpline 0800 917 7711 (8pm-8am)

We will phone you the next day and may ask you to return to the unit for a specialist doctor or nurse to examine the affected area the next working day following the extravasation injury. We will also take a photo of the affected area to help us monitor the situation and we will keep this in your hospital notes.

Can it be prevented?

We can reduce the risk by careful choice of the type of cannula used and where it is placed in the hand or arm.

Unfortunately the possibility of extravasation occurring cannot be completely prevented, and is a known side effect of intravenous therapy.

This is why it is important that you let staff know immediately of any change in the sensation around the cannula whilst the treatment is being given.

Prompt action can reduce the damage and discomfort of extravasation. However unfortunately, even with prompt action, certain drugs can cause painful tissue damage and some patients may need to see other specialists such as a plastic surgeon for assessment.

You can help to reduce your risk of getting an extravasation by wearing loose fitting clothing when you attend for treatment. This will help to reduce the amount of movement to your hand and arm if you need to use the toilet, and will also reduce the risk of pulling on your cannula or drip.

How is it treated?

The West of Scotland Cancer Network has a clear policy on the management of extravasation and the treatment required for the different drugs used. All staff administering chemotherapy receive regular training on extravasation recognition and management.

If you experience an extravasation, we may ask you to continue some treatment when you go home. The doctor or nurse will advise you on what you need to do. This can involve applying a cream to the area (depending on which drug has leaked), applying a warm or cold pack to the affected area, elevating the affected limb and gently exercising the affected arm or hand and taking painkillers if needed. We will discuss this with you on an individual basis.

Have your say

NHS Greater Glasgow and Clyde, Specialist Oncology Services and Clinical Haematology aims to provide high quality services. If you have a comment about a service or treatment, please raise this with a member of the ward/department staff in the first instance.

If you have any questions or are unsure about any of the information provided in this booklet, please ask a member of staff.