![Union Hospital logo 仁安醫院 UNION HOSPITAL]

Procedure Information

Venesection

Introduction

Venesection is a safe and quick procedure to remove approximately a pint (450ml) of blood from the vein in the inner band of the elbow to reduce the number of red cells and/or excess iron from the body. It is similar to the procedure used for donating blood.

Outcomes

Venesection is used primarily to treat various medical conditions, namely genetic haemochromatosis, polycythaemia vera, erythrocytosis, transfusion-related iron overload, and porphyria cutanea tarda.

Source:
https://tophealthdoctors.com.au/wp-content/uploads/2023/05/Venesection.png

Procedures

1. The patient lies on the bed.
2. A tourniquet is applied to the arm. A needle, which is already fixed to the blood collection bag, is inserted into the vein in the inner band of the elbow.
3. The patient may be required to squeeze a ball to help the blood flow.
4. The needle is removed and pressure is applied on the puncture site for a few minutes.
5. The puncture site is covered with a small dressing.
6. The patient should stay on the bed / chair for at least 10 minutes.

Possible Risks and Complications

1. Bleeding, bruising or haematoma
2. Vasovagal: symptoms include dizziness, weakness, anxiety and may progress to loss of consciousness
3. Nerve irritation or injury
4. Tendon injury
5. Compartment syndrome: may occur if the haematoma is large and accumulates inside an enclosed muscle space

** The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all procedures are carried out with utmost professionalism and care, this does not rule out the possibility of complications from arising.

Pre-procedure Preparations

1. The procedures and possible complications will be explained by the doctor and a consent form must be signed prior to the procedure.
2. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia. Please inform doctor if you are taking medications that affect blood coagulation, such as Aspirin, Warfarin, Xarelto, Pradaxa or beta-blockers, herbs and dietary supplement.
3. You are recommended to be accompanied to and from the hospital if you are planning to be discharged on the same day of the procedure.

Post-procedure Instructions

1. You should remain reclined for 10 to 15 minutes and then slowly adopt an upright position.
2. You may offer oral fluids and snacks if appropriate.

Advice on Discharge

1. You are recommended to be accompanied and not to drive or operate machinery for the rest of the day.
2. It is possible to have delayed bleeding from the puncture site. If it happens, apply pressure on the puncture site, and elevate your elbow above the heart level. Seek medical assistance if the bleeding does not stop within 15 minutes.
3. If you feel faint, sit down with head bending towards the knee, or lie down, and request help.
4. The wound dressing can be removed a few hours later.
5. Avoid lifting heavy objects on the affected side for the rest of the day.
6. You are advised to increase fluid intake but not alcohol for the rest of the day.
7. Immediately consult your doctor or return to hospital for professional attention in the event of severe wound pain, swelling, bleeding, pus discharge, affected limb numbness, or any other unusual symptoms.
8. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

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Compiled by Union Hospital Operating Theatre (OT) Governance Committee