

Enoxaparin (Clexane[®])

What is enoxaparin?

Enoxaparin belongs to a group of medications called anticoagulants and is sometimes referred to as a low molecular weight heparin (LMWH). It is only available on prescription.

What is it for?

Enoxaparin is given to infants and children only for two reasons:

1. They are at a high risk of developing a blood clot, which is also known as prophylaxis treatment.
2. They have an existing blood clot which could potentially get bigger or dislodge and travel to other parts of the body such as lungs. This is known as therapeutic treatment.

Enoxaparin works by interfering with how the process of blood clotting occurs.

Enoxaparin works in two ways:

- It stops unwanted blood clots from forming.
- It prevents existing clots from growing bigger. Enoxaparin does not break down existing clots.

Some printed information suggests that enoxaparin should not be used in children. However, for many years, specialists at Perth Children's Hospital have been using it to treat and prevent thromboembolic disorders in children safely and effectively.

How to take this medication?

Enoxaparin is given by an injection once or twice a day (morning and/or night) under the skin or via an Insuflon[™], also known as a subcutaneous injection. Do not administer into the muscle layer as it may cause bleeding, bruising or a haematoma.

Monitoring enoxaparin therapy

The dose of enoxaparin given is based on weight.

When enoxaparin is prescribed for therapeutic treatment of an existing blood clot, monitoring of therapy may be needed. Two days after starting treatment on enoxaparin, a blood test will be taken to determine if the dose is within the correct range and if the child's body is responding to the medication. This test is called anti-Factor Ten-A (anti-Xa) test. Frequency of the tests decreases to every two to four weeks once a child's anti-Xa levels are in the right range.

Enoxaparin prescribed for short term prophylaxis may not require monitoring.



Storing the medication

Store below 25°C. Do not freeze.

Store it in a cool dry place away from moisture, heat or sunlight. If the individual packaging becomes damaged, return it to a pharmacy.

Keep out of the reach of children.

Use of other medication

This medication interacts with various medications that may affect blood clotting, including herbal/homeopathic medicines. Over the counter medicines, including aspirin, ibuprofen (Nurofen®) and other anti-inflammatory drugs should not be taken unless specially advised by the doctor.

It is very important to inform your child's treating health professionals, including doctors, pharmacist, dentist, etc. that they are taking enoxaparin. This will help them decide what treatment plan is required.

What to do if a dose is missed?

If it is almost time for the next dose, skip the dose missed and give the next dose at the usual time. Otherwise, give the medication as soon as you remember and then go back to giving the medicine as usual.

Do not make up for missed dose(s) by giving more than one dose at a time as this can increase the risk of side effects.

If unsure, contact the treating team at PCH or PCH Pharmacy Medicines Information Service.

Possible side effects:

- bruising at the injection site
- bleeding
- headache.

The risk of bleeding can be reduced by administering the correct dose and having blood tests when instructed by the treating team.

Very uncommon side-effects from long-term use of enoxaparin include:

- hair loss
- thinning of bones
- haematomas – collection of blood under the skin.

Your doctors will keep an eye out for all these problems, but they are rare.

Contact your treating team if any of the following occur:

- Head injury – any injury causing a knock to the head even if there is no loss of consciousness.
- Prolonged bleeding:
 - from minor cuts
 - from the gums after brushing of teeth
 - from the nose
 - during periods.
- Severe headache or back pain.
- Swelling, bruising or tender areas without a clear cause.
- Blood in the urine, faeces, vomit or coughed up from the lungs.

Commercially available dosage forms and strengths

- Ready to use prefilled syringes
 - 20mg
 - 40mg
- Ready to use prefilled syringes with graduated markings
 - 60mg
 - 80mg
 - 100mg
 - 120mg
 - 150mg

Sports and activity

Enoxaparin can increase the risk of bleeding so all contact sports must be avoided including football, rugby and martial arts.

A helmet should be worn when riding a bicycle, rollerblading or participating in any activity that increases the risk of falls.

All physical activities undertaken by the child should be discussed with your treating team and any changes in the activity must be reported.

Important information



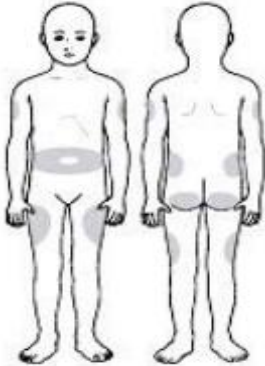
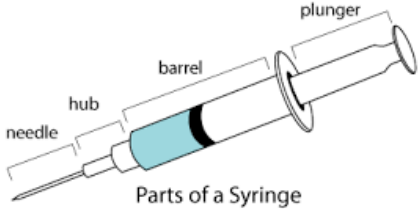
Sharps containers can be purchased from your local pharmacy. Return them to PCH pharmacy or your local pharmacy when they are full.

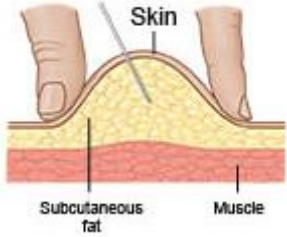
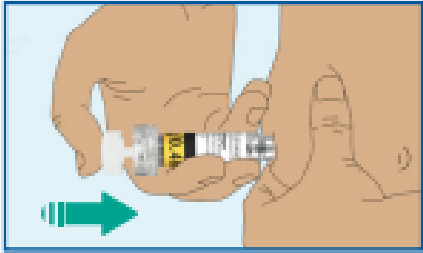

An Insuflon™ may be used to reduce the need for subcutaneous injections.

Do not use medication after the expiration date on the package. Return expired medications to a pharmacy for disposal.

**In the case of overdose or poisoning,
contact the Poisons Information Centre on 13 11 26**






Procedure for performing enoxaparin (Clexane®) injection at home

Steps	
<p>1. Wash and dry your hands</p>	
<p>2. Gather your equipment:</p> <ul style="list-style-type: none"> ○ Enoxaparin syringe (do not expel the air bubble in the syringe), check prescription and expiry date. ○ Cotton ball/tissue. ○ Sharps container. 	
<p>3. Identify which injection site (rotate the injection site with each dose i.e. left/right).</p> <ul style="list-style-type: none"> ○ Abdomen: below the waist, above the hip bone and at least 3cm from the belly button. ○ Thigh: In the area halfway between the knee and hip and slightly to the side. ○ Upper arm: the area halfway between the elbow and shoulder. 	
<p>4. Hold the syringe with your writing hand and pull the cover off with your other hand. Place the syringe between your thumb and first (index) finger like a pencil. Let the barrel of the syringe rest on your second finger.</p>	<p>Parts to a syringe:</p> <ul style="list-style-type: none"> ○ Needle: goes into the skin. ○ Barrel: holds the medicine and has markings for millilitres (mL). ○ Plunger: pushed to inject the medicine from the barrel into the body out of the syringe.  <p style="text-align: center;">Parts of a Syringe</p>

Steps	
<p>5. Gently pinch at least 3-4 cm of skin with your non writing hand and inject at a 90-degree angle or at a 45-degree angle depending on the amount of skin you can grasp, 45-degrees if you can only grasp a small amount of skin.</p>	<p style="text-align: center;">Pinch and inject</p> 
<p>6. Hold the syringe barrel tightly and use your wrist to inject the needle into the skin (i.e. at 45-degree angle to the skin). Once the needle is all the way in, push the plunger down with your first (index) finger to inject the medicine.</p>	
<p>7. Pull out the needle and gently at the same angle as you put it in. Apply firm pressure with a cotton ball to the injection site for 30 seconds after each injection to reduce the chance of bruising. Wipe the area with a cotton ball/ tissue and immediately place the whole syringe and needle into a sharps container.</p>	
<p>8. Do not rub the injection site after administration as bruising may occur.</p>	<p>It is important to monitor the injection site and seek medical attention if the area becomes inflamed, hot to touch or has excessive bruising.</p>

Procedure for performing enoxaparin (Clexane®) injection

via an Insuflon™ at home:

Steps	
<p>1. Gather your equipment:</p> <ul style="list-style-type: none">• Enoxaparin syringe (do not expel the air bubble in the syringe), check prescription and expiry date.• 2% chlorhexidine/alcohol swab.• Sharps container.	
<p>2. Wash and dry your hands.</p>	
<p>3. Identify which Insuflon™ site (for twice daily doses 2 Insuflon™ are recommended and alternating with each dose).</p>	
<p>4. Cleanse the hub of the Insuflon™ with 2% chlorhexidine/alcohol swab and allow to dry completely.</p>	
<p>5. Insert the needle slowly into the Insuflon™ port, keeping the syringe parallel to your child's arm or leg. Twist the syringe to help the needle insert to be flush with the Insuflon™ port.</p>	
<p>6. Give the medication slowly to prevent irritation.</p>	<p>It is important to monitor the injection site and seek medical attention if the area becomes inflamed, hot to touch or has excessive bruising.</p>

Steps	
7. Remove the needle/syringe and discard in sharps container.	
8. Wipe Insufflon™ hub with the alcohol swab to remove any excess medication.	



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Child and Adolescent Health Service



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