Treating Anemia with Aranesp
For Renal Clinic patients

This handout explains the causes of anemia and what tests are done to check for it, and how kidney failure can lead to anemia. It also gives information about Aranesp (darbepoetin alfa), a drug that is used to treat anemia.

What is anemia?
Anemia is a low amount of red blood cells (RBCs) in the blood. Anemia can make you feel very tired and run down. It can also cause headaches and make you feel weak, dizzy, and short of breath, especially when you exercise.

What tests are done to check for anemia?
- A blood test called a hematocrit can detect anemia. The hematocrit measures how much of your blood is made up of RBCs. The normal range for hematocrit is 36% to 44%.

- Another blood test for anemia measures hemoglobin levels. Hemoglobin is a protein in blood that carries oxygen. The normal range for hemoglobin is 12 to 16 g/dl. If your hemoglobin is below normal, you have anemia.

- If your doctor finds that your hematocrit or hemoglobin is below normal, a blood test will be done to check the iron levels in your blood. Iron is needed to make RBCs. If your iron levels are low, you may be started on iron supplements and advised to eat foods that are high in iron. Some of the best food sources of iron are iron-fortified breads and cereals, dark green leafy vegetables, dried fruits, and beans such as red, black, and pinto beans. If your iron levels remain low after you have increased your iron intake, your doctor may recommend that you receive iron through an IV (intravenous, through a vein).
How does kidney failure cause anemia?

Normally, our kidneys produce a hormone called erythropoietin (EPO). This hormone tells our bodies to produce RBCs. RBCs are made in our bone marrow.

As a kidney fails, it produces less EPO. When there is not enough EPO, red blood cell levels are low.

What is Aranesp?

Aranesp is a drug that is used to treat anemia. It is a erythropoieses stimulating agent (ESA) that tells your bone marrow to make more RBCs. The main goal of Aranesp treatment is to avoid the need for blood transfusions.

ESAs were first used in the United States in 1989. They have greatly reduced the need for blood transfusions in patients with kidney disease.

How will I receive Aranesp?

You will receive Aranesp by injection under your skin (subcutaneously) every 2 to 4 weeks. These injections are given in the Renal Clinic. Aranesp injections are very expensive, so be sure to check with your health insurance company to see if it will cover this treatment.

You must make an appointment with the Renal Clinic nurse or your doctor for your injection. These appointments take place on:

- Tuesdays and Wednesdays from 8 a.m. to 12 noon
- Thursdays from 1 p.m. to 3 p.m.

To make your Aranesp injection appointment, call 206-598-0667.

Safety Precautions

Because Aranesp affects the hemoglobin levels in your blood, we will check your hemoglobin level before giving your injection to be sure it is safe to give it.

You should have a hemoglobin test within 30 days of your injection. This test may be done by a blood draw in the lab or a finger stick in the clinic. Ask your nurse which kind of test you should have.

We may need to reschedule your injection for a later date if your hemoglobin is too high. We will also check your iron levels while you are taking Aranesp. This is because we need to make sure there is enough iron in your blood for the Aranesp to work well.

We aim for a hemoglobin level of 10 to 12 g/dl. Levels above 12 can lead to increased risk of blood clots and stroke in people who are taking Aranesp.