



# UW Medicine



使用您的手机摄影机扫描此二维码，可获取此讲义的电子副本。

## 如果你有過造影劑過敏

對於術前用藥，你需要知道些什麼

本資料是為某些病人編寫，這些病人過去在接受造影劑時出現過中等程度或嚴重的過敏反應，而現在已預約接受使用造影劑的造影研究。

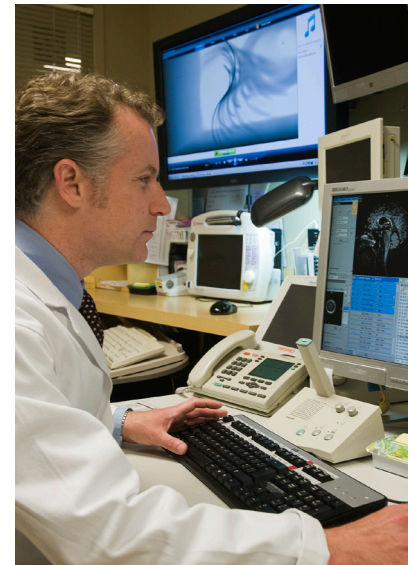
你的醫生已經決定需為你做一項特殊的造影研究，藉以幫助他們管理你的健康。已為你安排好做以下其中一項掃描：

- 使用含碘造影劑的電腦斷層 (CT) 掃描
- 使用含釷造影劑的磁力共振 (MR) 掃描

### 什麼是造影劑？

造影劑是一種在許多種造影過程中使用的物質。它幫助醫生更清楚地看到你體內的情況。造影劑也稱為顯影劑、對比劑，或顯影媒質。

造影劑的類型包括用於 CT 造影的含碘造影劑以及用於 MR 造影的含釷造影劑。造影劑通常使用靜脈注射注入你體內（透過一條管子注入你的靜脈）。



掃描出來的圖像可以幫助你的醫生管理你的健康。

### 是什麼讓我有造影劑過敏反應的危險？

如果你有下述情況，則你對造影劑會有較高的過敏反應危險：

- 過去對同一種造影劑藥物有過反應。
- 對 4 種或以上的食物或藥物有中等程度或嚴重的過敏反應，並且不能只用可他敏 (Benadryl) 抗過敏藥治療來消除反應。過敏型反應包括出現呼吸困難或臉部腫脹。
- 目前有活躍的哮喘症狀。

## 我如何知道我是否對造影劑過敏反應？

中等程度的造影劑過敏反應包括：

- 蕁麻疹（超過 12 歲）
- 呼吸急速
- 氣喘
- 臉部腫脹
- 沒有呼吸短促的喉嚨發緊

嚴重的造影劑過敏反應包括過敏症，這種過敏症可以威脅到生命，需要靜脈注射藥物、插管或住院。這種嚴重反應的一些症狀包括：

- 低血壓（血壓過低）
- 心跳加快（心動過速）
- 帶有呼吸短促的氣喘
- 喉嚨和呼吸道腫脹，難以呼吸

## 我需要做什麼？

如果你過去對這些造影劑有過任何反應：

- 如果你再次使用造影劑，你有另一次反應的風險會較高。
- 告訴造影師你以前有過造影劑過敏反應。造影師將需要與放射師和你的醫生討論你這次檢查是否需要使用造影劑。
- 如果你的造影劑過敏反應很嚴重，你可能需要簽署一份特別的知情同意書，以確認你希望繼續做這次使用造影劑的掃描。
- 閱讀完這份資料後，如果你有任何問題或疑慮，請告訴你的造影師。造影師會告訴你的醫生，你的醫生將會找你談話並回答你的問題。
- 有關術前用藥，請諮詢你的醫生。

## 什麼是術前用藥？

對於有造影劑過敏反應的人仕，醫生發現在掃描前給他們用藥，會有助於減低他們出現另一次過敏反應的風險。這便叫做術前用藥。一種稱為類固醇的藥物最常用於術前用藥。

## 術前用藥可以防止過敏反應嗎？

大多數有術前用藥的病人都不會出現另一次造影劑過敏反應。小數病人（10%，或 100 個病人中有 10 個）使用術前用藥後仍會出現突破性反應。突破性反應是一種過敏反應，即使在有術前用藥後仍會發生。大多數時候，這些突破性反應與他們的第一次過敏反應相似。

這意味著即使你有術前用藥，你也許仍會有小小風險再次出現造影劑反應。如果發生這種情況，你的反應很可能與你第一次的反應相似。

## 如果我以前試過術前用藥將會怎麼樣？

密西根大學的一項研究發現，在某項掃描前用藥而出現突破性反應的病人中，88% 的病人（100 個病人中有 88 個）在後來的掃描前用藥沒有出現另一次突破性反應。（要閱讀有關此項研究的更多資訊，請訪問 [www.ncbi.nlm.nih.gov/pubmed/19789241](http://www.ncbi.nlm.nih.gov/pubmed/19789241)）。

這意味著即使你曾經在術前用藥後有過突破性反應，你在下次術前使用類固醇藥並注入造影劑後，也許不會有突破性反應。

## 接受造影劑後多久才會出現過敏反應？

接受造影劑後，小數人在 1 天後才會出現造影劑過敏。有這種延遲反應的大多數人會出現皮疹、皮膚癢、頭痛或噁心。

如果你有延遲性的造影劑過敏反應，你可能需要使用潤膚霜、類固醇和抗組胺等藥物來治療。請致電你的家庭醫生。

### 有問題嗎？

你的問題很重要。如果你有任何問題或疑慮，請致電你的醫生或保健服務提供者。

周日上午 8 點至  
下午 6 點，請致電：

- UWMC 放射科：  
206-598-6200
- HMC 放射科：  
206-744-3105
- Fred Hutchinson Cancer  
Center: 206.606.1434

如果你有緊急情況，請致電  
9-1-1。

UW Medicine



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## If You Have Had Contrast Allergy

*What you need to know about premedication*

*This handout is for patients who have had a moderate or severe allergic reaction when they received contrast in the past, who are scheduled for an imaging study that uses contrast materials.*

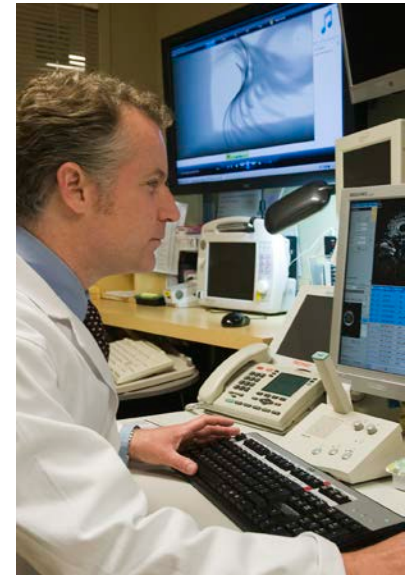
Your doctors have decided that a special imaging study is needed to help them manage your health. You are scheduled for 1 of these scans:

- A **computed tomography (CT) scan** that uses *iodinated contrast* (X-ray dye)
- A **magnetic resonance (MR) scan** that uses a *gadolinium contrast agent*

### What is contrast?

*Contrast is a substance used in many types of imaging procedures. It helps your doctor see the inside of your body more clearly. Contrast is also called **contrast dye, contrast agent, or contrast media.***

Types of contrast include iodinated contrast for CT imaging and gadolinium contrast for MR imaging. Contrast is usually given *intravenously* (through an IV tube into your vein).



*Images from the scan will help your doctors manage your health.*

### What puts me at risk for an allergic reaction to contrast?

You have a higher risk of allergic reaction to contrast if you have:

- Reacted to the same type of contrast medicine in the past.
- Had moderate to severe allergic reactions to 4 or more foods or medicines, that treating with just Benadryl did not resolve. Allergic-type reactions include having trouble breathing or having facial swelling.
- Current, active asthma symptoms.

## How do I know if I had an allergic reaction to contrast?

**Moderate** allergic reactions to contrast include:

- Hives (more than 12)
- Shortness of breath
- Wheezing
- Facial swelling
- Throat tightness without shortness of breath

**Severe** allergic reactions to contrast include *anaphylaxis*, which can be life-threatening and require IV medicines, intubation, or hospitalization. Some symptoms of this severe reaction are:

- Low blood pressure (*hypotension*)
- Fast heart rate (*tachycardia*)
- Wheezing with shortness of breath
- Swelling in your throat and airway that makes it hard to breathe

## What do I need to do?

If you have had any of these reactions to contrast in the past:

- You have a high risk of having another reaction if you are exposed to contrast again.
- Tell your technologist that you have had an allergic reaction to contrast before. Your technologist will need to talk with the radiologist and your doctor about whether you need contrast for this study.
- If your allergic reaction to contrast has been severe, you may need to sign a special *informed consent form* to confirm that you want to go ahead with the scan that uses the contrast agent.
- If you have any questions or concerns after reading this handout, please tell the technologist. The technologist will tell your doctor, and your doctor will talk with you and answer your questions.
- Talk with your doctor about *premedication*.

## What is premedication?

For people who have had allergic reactions to contrast, doctors have found that giving them medicine before the scan may help reduce the risk of their having another allergic reaction. This is called *premedication*. A type of medicine called a *steroid* is most often used for premedication.

## Will premedication prevent my allergic reaction?

Most patients who have premedication do not have another allergic reaction to the contrast. A small number of patients (10%, or 10 out of 100 patients) who are premedicated have *breakthrough* reactions. A breakthrough reaction is an allergic reaction that occurs even after having premedication. Most times, these breakthrough reactions are similar to their first allergic reaction.

This means there is a small risk that you may have a repeat contrast reaction even if you are premedicated. If this happens, your reaction will likely be similar to your first reaction.

## What if I have tried premedication before?

A study at the University of Michigan found that 88% of patients (88 out of 100 patients) who had a breakthrough reaction with premedication on one scan did **not** have another breakthrough reaction when they were premedicated before a later scan. (To read more about this study, visit [www.ncbi.nlm.nih.gov/pubmed/19789241](http://www.ncbi.nlm.nih.gov/pubmed/19789241).)

This means that even if you have had a breakthrough reaction with premedication once, you may not have one the next time you are premedicated with steroids and given contrast dye.

## How long after receiving contrast could I have an allergic reaction?

A small number of people have a reaction to contrast more than 1 day after they receive contrast. Most people who get these delayed reactions have rashes, itchy skin, headaches, or nausea.

If you have a delayed reaction to contrast, you may need treatment with skin lotions, steroids, and antihistamines. Please call your primary health care provider.

### Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns.

Weekdays from 8 a.m. to 6 p.m., call:

- UWMC Radiology:  
206-598-6200
- HMC Radiology:  
206-744-3105
- Fred Hutchinson  
Cancer Center:  
206-606-1434

**Call 9-1-1 if you are having an emergency.**