

GUIDE FOR YOUR PHLEBOTOMIST

The word “Scleroderma” comes from two Greek words: “**sclero**” meaning hard, and “**derma**” meaning skin. Hardening of the skin is one of the most visible signs of the disease. It is a chronic connective tissue disease generally classified as an autoimmune rheumatic disease. This brochure is designed to help the patient cope with the stress of difficult blood draws and assist the phlebotomist with information about potential collection difficulties.

- Due to the overproduction of collagen the skin can be hard and thick.
- Damage to the blood vessels, especially the small ones, is typical in Scleroderma.
- Injury to blood vessels causes them to constrict and stiffen and lose their elasticity.
- The blood vessels can overreact to cold or stress and constrict.
- Fragile, smaller and delicate veins can also occur with Scleroderma. This could mean that sometimes the needle will pass straight through the vein and no blood will be able to be collected.

In some people that have this problem, the surgical insertion of an artificial collection site called a portacath may be needed and require special care when access is required.

- Scleroderma patients are often on prednisolone, warfarin, or other medications that affect venepuncture – they should bring you a list of current medications to check prior to the procedure.
- A person with Scleroderma often needs to have blood taken and can explain to you previous problems and successes in blood collection.

DISCLAIMER: Scleroderma Australia Inc. in no way endorses any of the medications or treatments reported in this Newsletter. The information is intended only to keep you informed. We strongly advise that you consult your doctor regarding any medications or treatments of interest to you.

*This brochure is an extract from an Autoimmune Resource & Research Centre fact sheet publication entitled “ARRC guide for reducing difficulties in drawing blood”.
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HELPFUL TIPS WHEN HAVING BLOOD TAKEN

Scleroderma Patients

The aim of this brochure is to help you undergo blood tests with the minimum of distress and assist the collector to understand your special needs.

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FOR PATIENTS

Having Scleroderma you may be asked to have frequent blood tests. This procedure can be stressful and difficult for you and the collector (also called a phlebotomist) due to various symptoms. It could be that veins “disappear” or are hard to find, or that blood flows slowly, that your skin is hard and thick, or that you become anxious or panic.

As a patient there are things you can do to help:

- Learning to relax can reduce the difficulty of the collection. Stress and anxiety can increase your blood pressure and constrict blood vessels. Relaxing will reduce the chance of adrenaline-like hormones shrinking the peripheral veins in the hands and feet.
 - If taking blood is painful, ask for the use of some local anaesthetic (EMLA cream) 1 — 2 hours before the draw. You can also consider self-administering an over the counter local anaesthetic preparation such as 1% lignocaine. This can be useful; however, be sure to tell the collector when and where the preparation was used.
 - If you are dehydrated the blood will be thicker and your blood pressure may be reduced. Drinking additional fluids in the hour or two before blood is to be taken often helps. In cold weather hot drinks can warm the inner body and aid blood flow.
 - Plan your appointment and arrive early if possible. Finding car parks and locating the clinic can be stressful and this will give you the chance to calm yourself and have that extra drink!
- If you are cold, there will be less blood flow to the extremities (arms and legs) making it difficult to find a suitable vein. Dressing warmly and keeping your skin temperature a bit higher than usual will help. Take in your own heat pack and apply to the area before and during the process. Offer it to the person taking blood — it will dilate veins and make them easier to feel and see.

Good communication

This is the key to effective interactions. Some simple and effective strategies when taking blood will improve the experience. These can include:

- Expressing your concerns.
- Explaining that you have scleroderma as well as any past collection problems and successful solutions that have been undertaken. This includes expressing a preference for collection areas on the body. In some cases one side of the body may be easier to access than the other.
- Suggesting which arm/vein works best is good; however, the phlebotomist taking the blood needs to feel or see the vessel. They also need to be confident that they can gain access to the vein to draw blood. All collectors have their preferred methods.
- Being your own advocate — if someone has had three attempts at getting your blood ask if someone else could possibly try instead. Also consider coming back later in the day or another day, when you are more hydrated, less stressed etc. Clinicians as a rule are advised not to have more than 3 attempts at taking blood, unless it's a life or death situation. This is a reasonable request.
- Booking for a specific phlebotomist that you are comfortable with is also a good strategy.