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Q : What is the recommended dose of RENOGEN?
A : According to the PERNEFRI CONSENSUS 2011, the dose of ESA is divided into two phases as follows: :

1. **Correction Phase**
   Doses of 80 – 120 IU / kg Body Weight given two times per week or 2000 - 5000 IU per administration.
2. **Maintenance Phase**
   Once per week or adjusted to the hemoglobin value achieved.

Q : When the best time should RENOGEN be given?
A : Renogen should be given if the hemaglobin value is below 10 g/dL (about 9 g/dL). While the hemoglobin value below 7 g/dL is an indication of blood transfusion with targeted hemoglobin value between 7 - 9 g/dL.

Q : What is the recommended blood pressure for giving RENOGEN?
A : ESA therapy (including RENOGEN) has potential to increase the blood pressure, especially if the hemoglobin value increased too fast or using high doses of ESA. Referring to the cautionary warning in severe hypertension (180/110 mmHg), RENOGEN should be given at blood pressure below 180/110 mmHg while monitoring the blood pressure before and after.

Q : How long can RENOGEN be used after being stored at room temperature?
A : RENOGEN should be used as soon as possible if stored at room temperature by paying attention to several things such as the packaging is still tightly closed, no color change or turbidity. However, it is still recommended to store at a temperature of 2°C - 8°C if it has not been / is not used.

Q : Is it necessary to add iron before treatment with RENOGEN?
A : According to the PERNEFRI CONSENSUS 2011, prior to ESA therapy, iron status should be checked first. In order for an adequate erythropoiesis response, iron status should be sufficient with *Transferrin Saturation (TS)* value 20%, *Serum Ferritin (SF)* 100ng/ml (Non-Dialysis & Pre-Dialysis Chronic Kidney Disease) and *Serum Ferritin (SF)* 200ng/ml (Dialysis Chronic Kidney Disease).

Q : What are the contraindications to RENOGEN therapy?
A : Several conditions are contraindications to the administration of Renogen, such as absolute iron deficiency anemia, severe infections, hypersensitivity to ESA therapy, severe hypertension with blood pressure 180/110 mmHg, hypercoagulation (high blood viscosity).

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Q : Should RENOGEN be given intravenously (i.v) or subcutaneously (s.c)?
A : RENOGEN can be given intravenously (i.v) or sub-cutaneously (s.c). However, sub-cutaneous administration (s.c) is more recommended because of the longer half-life and the dosage requirement 30% lower compared to intravenous (i.v) administration.

Q : When should RENOGEN be discontinued?
A : According to the ESA Therapy Algorithm, if hemoglobin value is mora than 13 g/dL, ESA therapy should be discontinued then evaluated after one month of therapy. Furthermore, the ESA dose should be adjusted based on the evaluation of hemoglobin value according to the guidelines in ESA Therapy Algorithm.

Q : Are RENOGEN available for BPJS patients?
A : RENOGEN are already available in the e-catalogue, especially the 2000 IU, 3000 IU and 4000 IU preparations (with special price for BPJS Kesehatan)

Q : How to reduce pain sensation when injected RENOGEN ?
A : Pain sensation depends on patient's tolerance / sensitivity, large volumes injected quickly and cold product temperature injected. To reduce pain sensation, do not inject RENOGEN in cold temperatures. To ensure it, you can rub the pre-filled syringe in both palms slowly without shaking until it equals to the palms' temperature. And then inject it slowly.

Q : Which part of the body should RENOGEN be injected ?
A : Three common locations / parts of the body that are commonly injected sub cutaneously (s.c), such as the outer upper arm or 1/3 of the shoulder, lower abdomen and outer upper thigh.

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