



# Skin Management

**Apomine<sup>®</sup>**

Solution for Infusion

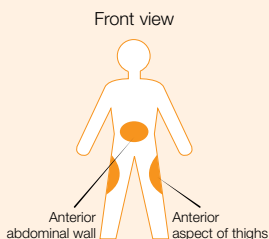
apomorphine hydrochloride hemihydrate  
subcutaneous infusion

# What are skin nodules?

Apomine® Solution for Infusion is a medication used to treat Parkinson's disease (PD), given subcutaneously (under the skin) into the lower abdomen or thigh by injection or continuous infusion. A side effect of Apomine® Solution for Infusion therapy can be redness, tenderness, itching and development of nodules and/or hardening of the skin at the injection site. These reactions often resolve with time, but in some cases, these tissue changes may make insertion of the infusion needle difficult, and may affect absorption of the medication.

## Top Tip

Rotate the injection/infusion site on a daily basis



# What causes them?

Studies that looked at thin slices of tissue under the microscope have concluded that apomorphine nodules are a form of panniculitis – a local inflammatory reaction in the subcutaneous tissue (the area under the skin).

This irritation, which can vary greatly between individuals, is thought to be influenced by the amount of Apomine® Solution for Infusion administered, needle insertion technique, body mass index and skin type.

## Top Tip

New needle sites should be at least:

- 2 inches (5cm) away from a previous site
- 2 inches (5cm) away from the belly button

## Ensure the infusion site is clean

Hygiene at the infusion site is essential!

To clean the site of infusion, start at the centre of the area and wash with simple soap and warm water, cleaning an area about the size of a tennis ball.

Allow the area to air-dry for at least 60 seconds; do not blow on the site to help it dry faster. (As well as the hygiene benefits of clean dry skin, dry skin will help the infusion dressing to stick to the skin and secure it firmly in place).

## Trim any body hair

Trim any hair around the insertion area or use an electric razor to enable dressings to be applied and removed with ease. Using other means of hair removal may lead to irritation and/or infection.

## Choosing an infusion site

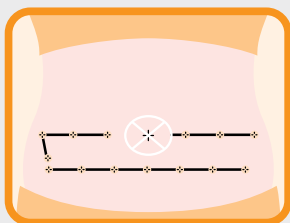
Site rotation (changing the infusion site each day) is an essential component of successful therapy. Proper site rotation helps minimise the chances of infection, scarring and other site problems and helps to ensure good absorption.

Site rotation ensures that the most recently used site has a chance to fully heal before another needle is inserted into that area. Any site rotation method that works well for the individual can be used. We have listed 4 abdominal site rotation suggestions (to the right) for you to consider.

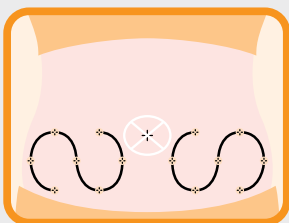
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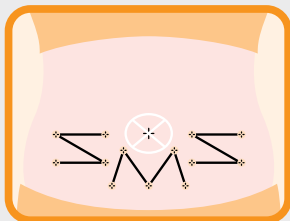
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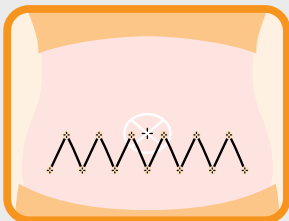
**Horizontal pattern**



**Curves pattern**



**Zigzag pattern**



**Criss-cross pattern**

- Try not to use comparatively small areas of the abdomen repeatedly
- In consultation with your PD Nurse Specialist and/or Consultant, consider using other sites such as outer thigh for needle siting
- Place the needle in a position that won't cause pain when bending

## Recommendations

Try to avoid the following:

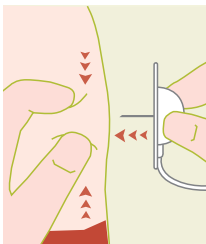
- Frequently moving the needle from 1 injection site to another during the day
- Placing the needle where it may be removed by accidental tugging of the line
- Placing the needle in a skin fold
- Siting the needle in areas that may be visibly inflamed

## Needle positioning

Different needles require different techniques.

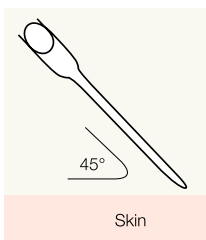
### 90-degree insertion needle (e.g. D-mine® Inf-set or Neria™)

Pinch the skin with 1 hand and insert this needle at a 90-degree angle. This needle is attached to an adhesive dressing to secure it to the skin.



### Butterfly needle

This needle is inserted at an angle of 45 degrees. The needle is secured with a lightweight see-through dressing.



## Dressings

Once the infusion line has been inserted, a dressing can be used to secure the needle.

Transparent dressings are recommended because they:

- Prevent bacterial infection
- Allow you to see whether the needle is still in place or the infusion site is inflamed

If there is a reaction to the dressing, a hypoallergenic dressing tape can be used instead.

## Pump preparation

Prepare the pump on a surface recently cleaned with an antibacterial/antiviral product.

### Important

If the insertion site becomes red, inflamed or painful throughout the day, it is advisable to remove the needle and re-insert into a new site.

## Watch Out

If the angle is greater than 45 degrees, a butterfly needle may contact the muscle layer. An angle less than 45 degrees with this type of needle may result in the infusion being released into the superficial skin layer rather than the deeper fatty tissue.

## Is there any treatment for existing nodules/hardened skin areas?

- Massage: Evidence suggests that some people find massage helpful – 3–5 minutes before and after infusion to stimulate local blood flow to help reduce nodule formation using fairly deep pressure for existing nodules
- Use of skin moisturisers
- Hold a cold compress to inflamed skin
- Silicone gel dressings applied after removal of the needle
- Ultrasound by a trained professional

There are mixed reviews on the above treatments, none of which has been evaluated by research. There may be other specific management strategies – please consult your healthcare professional.

## Should skin nodules stop treatment?

Skin nodules are generally well tolerated and can be managed by careful skin attention with the guidance of a specialist nurse.

Skin nodules may become infected if left untreated.

Please tell your doctor, nurse or pharmacist if you notice any other things that worry you.

## Top Tip

When finished, always check that:

- The dressings are applied correctly
- The needle is held in place and is not exposed

# What can I/my carer do to help minimise or prevent these skin reactions?

## Hygiene

Start with clean hands to minimise infection of the site. To ensure your hands are germ-free, follow this effective hand washing technique.

1. Wet hands with water
2. Apply enough soap to cover all surfaces
3. Rub hands palm to palm
4. Entwine fingers and continue rubbing movement
5. Rub the back of each hand with the palm of the other
6. Circle thumb with opposite hand and use a twisting motion
7. Rub palms using small circles
8. Rinse hands thoroughly, removing all traces of soap
9. Dry hands taking particular attention to spaces between fingers
10. To avoid re-contamination, use a paper towel to turn off the taps and then dispose of it in the rubbish bin

### Top Tip

Effective, thorough hand washing should take at least 15 seconds!

Key areas to focus on when cleaning your hands are:

- Fingernails
- Fingertips
- Thumbs
- Palms (especially crevices)



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**Please discuss any specific concerns you may have about your medical condition or treatment with your specialist or clinic nurse.**

Apomine<sup>®</sup> Solution for Infusion is a registered trademark.  
Further Information is available from InterPharma Medical  
Information at 1300 308 213 or [medinfo@interpharma.com.au](mailto:medinfo@interpharma.com.au).

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