

If you are told you have low iron, iron deficiency or have iron deficiency anemia.

Your recent blood test shows the level of **hemoglobin** (red blood) in you body is lower than normal. There are signs that your level of iron (**ferritin**) is also low and iron is one of the building blocks needed to make hemoglobin.

There are many reasons this likely has developed now. The reserves you had before you became pregnant; the amount you are getting from foods and supplements and the amount you need while pregnant is not enough for you and your baby. Low hemoglobin, also called anemia, may make you feel tired and dizzy. You may look pale. You may feel you are short of breath or have a rapid heartbeat.

Please start taking one of the following iron supplements, starting with one daily and if you tolerate one this dose, try to increase to taking the tablet twice daily, at separate times. Generally, iron supplements are better absorbed if taken with vitamin C rich food.

It is important to correct the low hemoglobin and to take the recommended iron to help your baby and your body. Please do not stop taking the iron, or avoid taking it without talking to us at Noakes Clinic. If you think you are having side effects that are difficult to manage, we may have suggestions that will help.

Iron supplements: There are many different iron supplements, some cost little per tablet, but more people complain of minor side effects such as nausea, bloating and/or constipation. Other iron supplements cost more per tablet, but have lower chance of causing the side effects and seem easier for people to tolerate.

Iron supplement	Brand name (if any)	Iron dose per tablet/capsule	Cost	Likelihood of GI side effects
Ferrous sulphate		300 mg (60 mg elemental iron)	Less than \$5 per 30 day supply	***
Ferrous gluconate		300 mg (35 mg elemental iron)	Less than \$5 per 30 day supply	**
Ferrous fumarate	Palafer	300 mg (100 mg elemental iron)	\$5-\$25 per 30 day supply	**
Polysaccharide-iron complex	Feramax, Proferrin	(150 mg elemental)	\$5-\$25 per 30 day supply	*

Once your hemoglobin and ferritin become low, it is very difficult to correct the problem from foods alone. The body needs to take in enough to give to the baby, to build up your red blood supply to normal and enough to replenish your reserves for after the birth when all women lose some blood.

At the same time as taking a supplement of iron, it is a good idea to try to increase the amount of iron from food sources as a step towards healthier eating habits. The information at <u>https://www.healthlinkbc.ca/healthlinkbc.files/iron-foods</u> may help you find iron rich food choices you can include in your diet.

The amount of iron in most prenatal vitamin products contains the full RDA (Recommended Daily Allowance) of approximately 27 mg but this is not enough to correct iron deficiency.

What to expect when taking iron supplements: When taking iron supplements, you will likely see that your bowel movements (poop) look very dark, almost black. Most people taking iron supplements will have harder and possibly more difficult to move bowel movements (see below about managing constipation). A few people taking iron supplements may have looser bowel movements.

Some people taking iron supplements notice a full or bloated feeling, maybe even nausea but this is usually very mild and is not a reason to stop taking the iron supplement. Taking the iron at a different time in the day may help reduce these symptoms.

How long should you take the iron supplements: It will likely take many weeks or longer before your low hemoglobin has completely returned to normal and many more months before your iron reserves are restored. Expect to continue to take iron supplements even after the birth of your baby.

How to managing constipation:

If you have constipation (harder and more difficult to move bowel movements), make sure you increase the amount of water you drink daily (2 glasses more than your usual).

Try to make sure you are getting enough fibre from your foods. Most people are surprised to find out their diet is not high in fibre, even when they are eating what they thought was a healthy diet. The recommended amount of dietary fibre for an adult woman is 25-30 gms per day. This can be difficult to get from foods. One simple strategy to get half of the daily-recommended fibre is to include a serving of a high fibre cereal such as 'All-Bran Buds' into your diet. This would give you an additional 13 gms of fibre from the 1/3 cup serving (approximately 2 heaping tablespoons). Sprinkled onto yogurt provides a crunchy topping or the high fibre cereal can replace a portion of your usual cold cereal if you prefer.

For some people, eating a few dried prunes or drinking a small glass of prune juice daily, will also help manage constipation. Prunes and prune juice contain sorbitol, which is a naturally occurring sugar alcohol, sorbitol, that can have a mild laxative effect. Prunes and prune juice are best used in combination with a diet high in fibre and fluids.

A short list of some common foods and the fibre content of these foods is listed below. Health Link BC can provide more information about fibre in foods (see the links below) or you can call 811 to speak to a nutritionist. <u>https://www.healthlinkbc.ca/health-topics/hw252132</u> <u>https://www.healthlinkbc.ca/healthlinkbc-files/fibre</u>

Food		Portion	Fibre per serving
Brown bread		1 slice	2 gm
Multigrain bread		1 slice	3 gm
	Special K cereal	1 cup	0 gm
	Rice Krispy cereal	1.2 cup	1 gm
	Shreddies cereal	1 cup	6 gm
	All Bran Buds cereal	1/3 cup	13 gm
Medium apple		1	5 gm
Medium banana		1	4 gm
Prunes		5	3 gm
Small orange		1	2.3 gm
Romaine lettuce		1 cup	1 gm
Broccoli		1 cup	2.4 gm