

**NHS Forth Valley**

# **Iron Deficiency Anaemia in Pregnancy**

**Patient Information Leaflet**

A decorative graphic at the bottom of the page consisting of two light blue, wavy, curved shapes that meet at a point in the center, resembling a stylized valley or a bridge.

## What is iron deficiency anaemia?

Iron is vital for making haemoglobin in red blood cells. Haemoglobin traps oxygen from the lungs and carries it around the body to your organs and baby.

Anaemia is when the level of haemoglobin in your blood is lower than normal; when this happens less oxygen can be carried around the body.

During pregnancy you are more likely to have low levels of iron and become anaemic. This leaflet offers some advice about how to improve your iron levels and why it is important.

## Why it important to maintain a normal Hb level while you are pregnant?

Good iron levels help to:

- Maintain a healthy immune system.
- Reduce risk of small babies or preterm births
- Decrease the impact of blood loss at delivery and reduce the risk of blood transfusion.
- Improve postnatal recovery, especially if you need surgery or have a perineal tear.
- Avoid a decreased breast milk supply associated with severe anaemia.

## How do I know if I have anaemia?

The most common symptoms of anaemia are:

- Excessive tiredness.
- Weakness.
- Dizziness.
- Irritability.
- Shortness of breath / chest pain.
- Heart palpitations (awareness of a faster heart beat).

If you have any of these symptoms, talk to your midwife and we can perform a blood test. We will also offer you routine blood tests when you book for your pregnancy and again when you are 28 and 34 weeks pregnant.

## Why would I have iron deficiency anaemia?

- There might not be enough iron in your diet.
- Your gut is not absorbing iron despite having an iron rich diet.
- Due to increase demands of pregnancy you are unable to take in enough iron through your diet.

## Who is more likely to have iron deficiency anaemia?

You may lose iron because of bleeding if you have heavy periods before your pregnancy or other medical conditions.

You are at risk of having Iron Deficiency Anaemia if you:

- Have low iron stores prior to pregnancy (Ferritin <50).
- Have some blood conditions like sickle cell anaemia / thalassaemia.
- Have some inflammatory conditions affects your gut like inflammatory bowel diseases, coeliac disease, and previous gut surgeries.
- Have higher demands like multiple pregnancy.
- Being under 20 years of age.
- Have anaemia in previous pregnancy.
- Have a child less than 1 year of age.
- High risk of bleeding during pregnancy or at birth (e.g. placenta praevia, previous or planned LSCS).
- If you follow a vegan / vegetarian diet or have poor dietary intake of iron.

## What can I do to try to maintain good supply of iron?

You will be offered iron tablets 3 times a week from you booking visit (Mon-Wed-Fri) unless you are known to have a medical problem / not allowed to take iron or your ferritin level is  $>50$  (iron stores).

If you eat plenty of iron rich foods as part of a healthy diet will help to maintain to iron level and Hb level and iron stores within the normal values.

- Red meat.
- Fish.
- Poultry.

These contain a form of iron that is easily absorbed into the body.

**Do not** eat any liver products in pregnancy; even though these are high in iron they also contain high levels of vitamin A, which is dangerous for your baby.

Other vegetarian foods rich in iron include:

- Fortified cereals.
- Dried fruit.
- Green vegetables such as peas, broccoli or dark leafy cabbage and spinach.
- Beans and pulses such as lentils, soybeans, kidney beans or chickpeas.
- Nuts and seeds.
- Dark chocolate.
- Tofu.

Some fruits and vegetables containing vitamin C can help the body absorb iron. These include:

- Kiwi fruit.
- Oranges.

- Potatoes.
- Cauliflower.
- Brussels sprouts.
- Parsley.

Iron absorption can be delayed by:

- Coffee.
- Tea.
- Food containing calcium such as milk and other dairy.

You can check ([www.bda.uk.com/foodfacts](http://www.bda.uk.com/foodfacts)) for further information on diet advice.

## What treatment can I take if I develop anaemia?

- If you are found to be anaemic or have low iron stores your GP / Midwife will prescribe you iron tablets and you will be informed the correct dose to take depends on the amount of iron in each preparation.
- We know women who are pregnant and don't have high iron stores also benefit from taking iron to prevent them developing anaemia due to the increase demands of pregnancy.
- You should take the iron tablet on empty stomach, vitamin C / orange juice helps in absorbing the iron, avoid milk products for 1 hour before and after you take the iron tablet (e.g. milk in coffee, cereal with milk).
- Do not take other vitamins or medications or anti-acid at the same time.
- You will be offered a repeat blood test in 6 weeks to evaluate if the tablets are working.

- Some of the side effects are nausea, bloating and constipation. Sometimes we can change the type of iron you are taking such as liquid iron to reduce the side effects.
- Do not take an extra iron tablet if you forget just take one when you remember. It's best to take iron no more than on alternate days to improve absorption.
- Occasionally if you can't tolerate the oral iron due to side effects or it doesn't seem to be working we will offer you iron intravenously (through a drip).
- **Keep iron tablets out of reach of children due to risk of iron poisoning.**

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**If you can't go let us know!**

Every month around 2,000 people across Forth Valley fail to turn up for hospital appointments. This costs the NHS millions of pounds each year and increases waiting times. So if you are unable to attend or no longer require your hospital appointment please let us know so we can offer it to someone else.

**Smoking** is not permitted anywhere on our hospital grounds and it is now an offence to smoke within 15 metres of a hospital building. This can result in a fixed penalty notice of £50 or a fine of up to £1,000.



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