



Iron deficiency anemia

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in iron, such as some vegetarian diets.

- ▶ Insufficient absorption of iron due to diarrhea decreased gastric acid secretion, digestive problems, or drug interactions, and drugs such as cholestyramine, cimetidine, pancreatin, ranitidine, and tetracycline)
- ▶ Increasing the need for iron to increase blood volume during infancy, adolescence, pregnancy, and lactation
- ▶ **Some of the symptoms of iron deficiency anemia include:**

The pallor of the skin, tongue, and mucous membranes of the lips and eyelids, premature fatigue, dizziness and headache, drowsiness and tingling in the hands and feet, nausea, and severe anemia, dents on the nails (spoon nails).

▶ Treatment of iron deficiency anemia

There are several methods used to treat anemia, the best and least dangerous of which is the use of oral supplements. Treatment with simple iron salts such as oral ferrous sulfate is quite effective and is in the form of tablets, capsules, or liquid and should be continued for several months. If these pills are taken on an empty stomach, they will be absorbed better and more, but in this case, they will irritate the stomach and cause digestive problems.

Gastrointestinal side effects from iron consumption such as nausea, heartburn,



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heartburn, diarrhea, or constipation can be minimized, provided that iron is consumed in very small amounts and gradually increased to reach the body's needs. It is best to take iron tablets at the end of the night before bed to reduce the side effects. Coffee, eggs, milk and dairy products, whole wheat bread, legumes (containing phytic acid), and dietary fiber reduce iron absorption due to the formation of insoluble complexes. Therefore, iron-containing products should not be consumed for one hour before or two hours after the consumption of any of these substances.

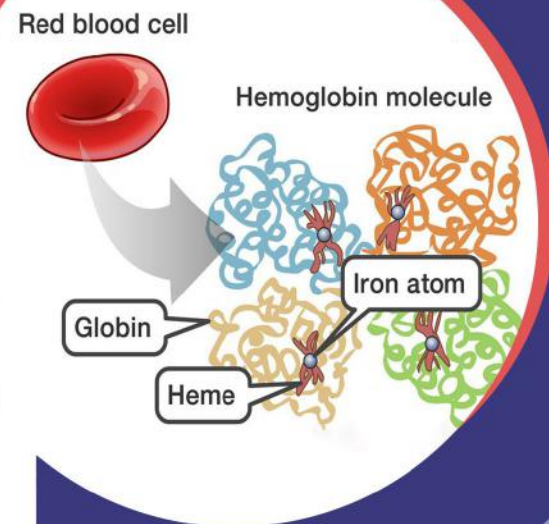
▶ Iron sources

Iron-rich food sources include liver, offal, red meat, fish, egg yolks, dark green leafy vegetables such as parsley, spinach, and legumes





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children and finally reducing the physical and mental capacity in a large part of society.

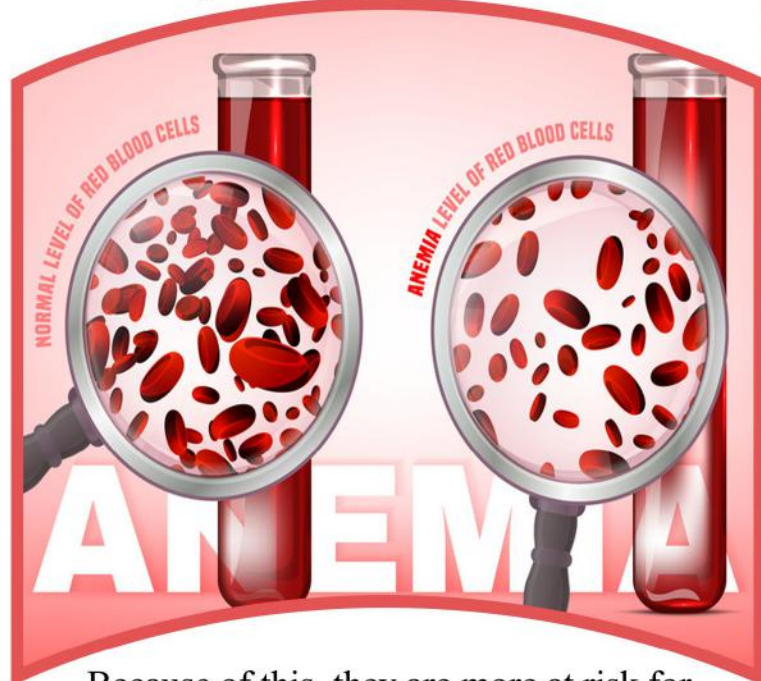
► **The need for iron**

Iron requirements vary based on age, sex, and physiological status. For example, pregnant women need more iron due to increased blood volume, fetal and placental growth, and other tissues.

► **Anemia** is a condition in which the number or size of red blood cells or the amount of hemoglobin in the blood decreases and the exchange of oxygen and carbon dioxide between the blood and the host cells is disrupted. Causes of anemia include nutritional deficiencies, bleeding, genetic abnormalities, chronic diseases, or drug poisoning. Nutritional anemias are anemias that occur as a result of insufficient nutrient intake.

► **Iron deficiency anemia**

Iron deficiency is one of the most common nutritional disorders in developing countries and the most important cause of nutritional anemia in children and women of childbearing age. The effect of increasing the mortality rate of the disease in mothers and



in breast milk is sufficient for the first 4-6 months of life. However, in the case of low birth weight infants, iron stores are low and extra iron should be taken orally from 3 months of age. Premature umbilical cord closure also increases the risk of iron deficiency because it deprives the baby of one-third of its total blood.

► **Causes of iron deficiency**

There are various reasons for iron deficiency, including the following:
► Inadequate iron intake due to the diet used, which is low

Because of this, they are more at risk for anemia. In infants, if the mothers are healthy, the amount of iron