

# TREATMENT OF IRON DEFICIENCY ANAEMIA

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# TREATMENT

PROPHYLACTIC

CURATIVE

# PROPHYLACTIC TREATMENT

- 1. Avoidance of frequency of child births
- 2. Supplementary iron therapy
- 3. Dietary prescription
- 4. Adequate treatment of associated conditions
- 5. Monitoring of Hb regularly

# CURATIVE

ANAEMIA IS A SIGN NOT A DISEASE SO AN  
ACURATE DIAGNOSIS SHOULD BE MADE

1. Hospitalization
2. General treatment
3. Specific therapy

# When to hospitalize?

- Ideal to admit when **Hb < 9gm %**
  - is co But due to high prevalance in INDIA **<7.5gm%** nsidered
  - associated obstetrical medical complications even with moderate degree of anaemia

# General treatment

- → **Diet** : balanced diet rich in proteins iron and vitamins
  - **Improve appetite**: Acid pepsin preparation thrice daily after meals
  - **INFECTIONS** : specific antibiotic therapy
  - Treatment of associated disorders

# SPECIFIC THERAPY

- AIM : To raise the Hb level near to normal as possible thereafter to restore IRON reserve.....

# Choice of therapy depends on

- 1.severity
- 2. period of gestation
- 3. associated complicating factors

# IRON THERAPY

- **ORAL ROUTE**

- best absorbed in ferrous form

- PREPERATIONS AVAILABLE

- Ferrous sulphate

- Ferrous fumarate

- Ferrous succinate

- Ferrous sulphate is most commonly used
  - FERSOLATE TABLET contains 200mg ferrous sulphate (60mg elemental Fe and traces of copper and manganese)

- TID with or after meals  
max. dose can be 6 tabs per a day stepped up gradual in 3 to 4 days and continued till the blood picture becomes normal  
→ maintenance dose is 1 tab a day for atleast 100 days following delivery to replenish the store

# DRAWBACKS

- 1.Intolerance
- 2.Unpredictable absorption rate
- 3. With the therapeutic dose serum iron may be restored but there is difficulty in replenishing iron store

# What should we observe?

- Response of therapy  
Rate of improvement  
If fails causes of failure

# Contraindications of oral therapy

1. Intolerance to the oral iron
2. advanced pregnancy with severe anaemia

# PARENTERAL THERAPY

- IT CAN BE
    - INTRAVENOUS
    - INTRA MUSCULAR
- indications of parenteral therapy
1. contraindicated oral therapy
  2. patient not co operative to take oral iron
  3. advanced pregnancy cases seen for first time with severe anaemia

# INTRAVENOUS ROUTE

- TOTAL DOSE INFUSION

Iron dextran or Iron sucrose

ADVANTAGES:

1. Eliminate repeated painful i.m injections
2. Treatment completed in a day and patient can be discharged
3. less cost

LIMITATIONS:

1. Unsuitable if at least 4 weeks time not available
2. previous history of reactions

## Estimation of the total requirement

- $\rightarrow 0.3 \times W(100 - \text{Hb}\%)$  for iron dextran  
w=patients weight in pounds  
 $\rightarrow$ PROCEDURE: required amount of iron is mixed with 500ml of 0.9% saline  
 $\rightarrow$ DRIP RATE= 10 drops/minute for first 20min there after increased to 40drops/min

# INTRAMUSCULAR THERAPY

- IRON DEXTRAN  
IRON-SORBITAL-CITRICACID IN DEXTRIN  
are the compounds can be used and contains  
50mg elemental iron per ml ORAL IRON  
SHOULD BE SUSPENDED AT LEAST 24hrs  
PRIOR TO THERAPY TO AVOID REACTION  
→DRAWBACKS:
  - 1.PAINFUL
  - 2.STAINING OF SKIN
  3. ABSCESS FORMATION

# BLOOD TRANSFUSION

- INDICATIONS:
  - 1.correct anaemia due to blood loss and PPH
  2. severe anaemia and termed pregnancy before the patient goes into labour
  - 3.Refractory anaemia
  - 4.Associated infections

*Fresh properly typed grouped and cross matched packed cells are used*

*→80-100ml at a time with gap of >24hrs*

# MANAGEMENT DURING LABOUR

- **FIRST STAGE:**

1. patient should be comfortable on bed

2. oxygen inhalation

3. strict

asepsis

## SECOND

### STAGE:

1. asepsis

should be maintained

2. prophylactic low

forceps or vacuum delivery 3. i.v methergin 0.2mg

following the delivery of anterior shoulder

### THIRD STAGE OF LABOUR:

1. replenish the blood lost by transfusion

2. postpartum cardiac overload should be avoided

# PUERPERIUM

- 1. prophylactic antibiotics
- 2. antianaemic therapy should be continued till replenish the store

● THANK U