

HER HEALTH

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Iron-deficiency anemia

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Iron-deficiency anemia is a common condition in pregnancy, affecting approximately one in six women. Without iron, our bodies cannot produce the proper red blood cells that supply our tissues with oxygen. Because of the increasing demands for oxygen-rich blood to sustain a pregnancy, women are often found to be deficient, or anemic. Certain additional factors make a woman more susceptible to developing anemia, such as multiple gestation, short interval pregnancies, frequent vomiting, an iron-poor diet, and a heavy pre-pregnancy menstrual flow.

Women's blood counts are often tested every trimester, as the demands for circulating red blood cells increase as the pregnancy progresses. Through a simple blood test, your provider can detect the amount of hemoglobin in your body. Hemoglobin is an iron-rich protein responsible for carrying oxygen throughout your body. When your hemoglobin levels are low, AKA anemia, your body doesn't receive adequate oxygen to all of its tissues. Consequently, we can see adverse symptoms such as fatigue, weakness, racing heart, chest pain, shortness of breath, pale skin, headaches and dizziness. In addition, pregnancy outcomes can be affected, resulting in possible low birth weight, preterm birth, low iron stores in offspring, and increased susceptibility to infection.

Because of the negative implications, it is of vital importance to increase your iron stores if you have been diagnosed with anemia. The most effective prevention and first-line correction includes the addition of an iron-rich diet with accompanying vitamin C (orange juice) to enhance absorption. Some examples of iron-rich foods include: green leafy veggies, collard greens, egg yolks, raisins, prunes, liver, oysters, and some fortified cereals. Pro-tip: utilizing cast-iron while cooking can increase the amount of iron you consume, as iron passes into your food from the cookware. In addition to a change in diet, depending on your deficiency, your provider may also encourage an oral iron supplementation of ferrous sulfate 2-3 times a day, or in severe cases, IV iron infusions.

If you have been diagnosed with anemia, or are experiencing any of the above symptoms, know that you are not alone. Please speak with your Modern OB/GYN provider for more information.

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