



ANEMIA DURING PREGNANCY

Anemia refers to a lack of satisfactory red blood cells. We diagnose anemia in pregnancy when the hematocrit (the concentration of red blood cells per 100 milliliters of blood) falls below 33%.

We recommend the following treatment for anemia:

- Ferrous Sulfate 325 mg
 - Take two pills per day in addition to the prenatal vitamin. The three pills should be spaced apart over the course of a day.
 - Substitute Ferro-Sequels or a comparable brand in the event of constipation.
 - These iron pills are available without a prescription.
- Increased dietary intake of iron-rich foods:
 - Iron from animal foods is better absorbed than iron from plant sources or enriched foods.
 - Eating foods high in Vitamin C (e.g., citrus fruits and juices) along with a meal high in iron will help iron absorption from the intestine.
 - Some good sources of iron are: beef, shellfish, baked beans, prune juice, baked potato, spinach and broccoli.

Anemia is a common problem, occurring in up to half of all pregnancies. It is generally due to iron deficiency. Anemia may occur as the pregnant woman's blood volume increases during the second trimester. In addition, diets low in iron or folic acid, closely spaced pregnancies, or twin pregnancies may contribute to anemia.

Mild anemia does not pose a significant risk to the developing baby. Treatment is indicated, however, to prevent anemia from becoming severe, which could harm the fetus. In addition, treatment of mild anemia will protect the mother from side effects related to blood loss during childbirth.