مؤسسة الرعاية الصحية الأولية
PRIMARY HEALTH CARE CORPORATION

Anemia in Pregnancy

Anemia in Pregnancy

It matters to you and your baby

Anemia is a common health problem among pregnant women. It is a serious medical condition; it can cause severe complications during pregnancy for both you and your baby.

BUT it is preventable.

Anemia:

Anemia is a medical condition which occurs when a person has a deficiency of red blood cells. Pregnant women are more vulnerable to it. Due to prevalence of anemia, the fetus may not receive sufficient blood, for its development. This may result in low birth weight, poor fetal growth, and birth of the baby before completion of the actual term.

Causes of anemia in pregnancy:

The most common causes of anemia in pregnancy are:

- Expansion of (increasing) plasma blood during pregnancy, which upsets the balance in the amounts of red blood cells
- Iron and/or folate deficiency
- Vitamin B12 (for red blood cell formation) deficiency (common among vegetarian women)

Symptoms of anemia:

Most often there are no specific symptoms of anemia but if there are any symptoms, these will include the following:

- Excessive fatigue and weakness
- Pale complexion
- Shortness of breath
- Heart palpitations
- Dizziness, light-headedness, or fainting spells

Diagnosis

Early diagnosis of anemia starts in pregnancy at the first visit to the doctor through regular routine screening tests (CBC).

Complications

Pregnant women

- Preterm delivery < 37 of gestational age
- Increased obstetrical complications potential
- Increased maternal mortality

Fetus

- Low birth weight < 2500 gm
- Increased perinatal mortality

Iron Deficiency Anemia

Iron deficiency anemia is the most common form of anemia in pregnancy. It mostly occurs during the last three months of pregnancy. During this period, the baby requires the red blood cells from the mother's blood for development.

Causes:

- Malnutrition
- Poor absorption of iron
- Short intervals between births
- Pregnancy with more than one child

Preventing anemia

- Eating iron-rich foods such as meat, chicken, fish, eggs, dried beans and fortified grains. The form of iron in meat products, called heme, is easier to absorb than the iron in vegetables.
- Eating foods high in Vitamin C such as orange juice, citrus fruits and fresh raw vegetables as Vitamin C increases the absorption of iron.
- Eating foods high in folic acid, such as dried beans, dark green leafy vegetables, cabbage and spinach, wheat germ and orange juice.
- Cooking with cast-list iron pots can add up to 80 percent more iron to your food, however folic acid is extremely sensitive to heat, so most is lost in cooking.

Iron-Rich Foods

Protein source:

- Meats: beef, lamb, veal, liver, chicken, turkey
- Fish, shellfish (oysters, sardine, tuna)
- Seeds (sesame, pumpkin)
- Eggs, esp. egg yolk

Fruits:

- Dried fruit (e.g. prunes, figs, raisins, currants, peaches)
- Juices (e.g. prune, blackberry)
- Most fresh fruits

Vegetables:

- Greens (e.g. spinach, silver beet, lettuce)
- Dried peas & beans. (e.g. kidney beans)
- Pumpkin, sweet potatoes

Grains:

- Iron fortified breads and dried cereals
- Oatmeal, cereal
- Almonds nuts

Folate-Rich Food

Protein sources

- Liver (best source)
- Chicken giblets
- Kidney
- Egg yolk

Fruit and vegetables sources

- Spinach, beetroot, brussels sprouts, broccoli, cabbage, banana, oranges and peaches.

Legumes sources

- Dried beans
- Lentils
- Split peas (dhals)
- Soya products

Starch sources

- Wholegrain breads, wheat flour, potato and sweet potato

Supplements:

1. Folate

- It is advisable to take around 400 – 800µg per day, 1 to 3 months before getting pregnant and to continue up to 12 weeks of gestational age.

2. Iron

- Iron should be taken on the basis of your physician's recommendation.
- Good compliance to supplements based on your physician's instruction will help improve your hemoglobin level.