

## **Anaemia in Pregnancy**

Anaemia is when the level of haemoglobin in your blood is lower than normal. It can cause tiredness, breathlessness, fainting, headaches and your heart to beat faster. Mild anaemia is common during pregnancy and your haemoglobin level will be routinely checked at your first pregnancy appointment and at around 24-28 weeks. There are different types of anaemia and each has a different cause.

### **Can we prevent iron deficiency anaemia in pregnancy?**

The most common type for pregnant women is iron-deficiency anaemia (IDA). The rest of the leaflet gives more information on IDA, how it affects pregnancy and treatment options if IDA develops during pregnancy.

### **What causes iron deficiency anaemia?**

Pregnancy is often the cause of iron-deficiency anaemia. You and your baby need a lot more iron to make red blood cells while you're pregnant. Iron-deficiency anaemia can happen when you are not getting enough iron from the food you are eating.

You are also more likely to have anaemia if you:

- are carrying more than one baby
- you are pregnant again after having a baby within the last year
- were younger than 20 when you got pregnant
- have had anaemia before
- have a history of heavy periods
- are a vegetarian or vegan

### **Will iron deficiency anaemia harm me or the baby?**

Most woman with anaemia in pregnancy go on to have a healthy pregnancy and baby. However, anaemia has been linked to pregnancy complications before and after birth if it isn't treated. These can include:

- postpartum haemorrhage (losing excess blood from womb after birth) and your body being less able to cope with blood loss during
- premature birth

- low birth weight
- iron deficiency in your baby in their first 3 months of life
- problems with the baby's mental development

If you are diagnosed with anaemia and it is treated properly it is very likely you will still have a healthy pregnancy and baby.

### **How is iron deficiency anaemia treated?**

If you have anaemia you'll probably be prescribed iron supplements (tablets) or as a liquid to take every day. Try taking the iron tablets first thing in the morning with water and avoid eating for 30mins afterwards. The iron is better absorbed this way. Vitamin C can help the body absorb iron, so you could also try taking the tablets with a drink containing vitamin C such as orange juice [instead of water]. Avoid drinking tea and coffee (including decaf versions), at the same time because this can stop iron being absorbed into your body. The supplements may also give you some mild stomach pain, constipation and your bowel movements may have a black colour. This is normal but discuss with your midwife if you're worried.

### **How do I know if treatment is working?**

Your symptoms should get better after taking iron supplements. Also your doctor or midwife will offer a blood test to check your haemoglobin after few weeks starting the treatment.

If you are not able to tolerate iron tablets or syrup you may be given iron through intravenous therapy (IV). This means giving you iron in liquid form through a needle directly into the vein (usually in your arm). You may also be offered a blood transfusion.

If your anaemia is not improving or if anaemia is severe, you'll probably be offered more blood tests to check for other causes of anaemia and referred to a haematologist (a doctor expert in blood disorders).

### **How long do I continue the treatment?**

If you have started iron tablets in pregnancy it is important to continue through the remainder of the pregnancy and up to 3 months after delivery. If you start the treatment after birth then you should continue for further 3 months to replenish the iron stores in your body.

### **If you need more information or have questions**

If you have any questions please discuss this with your midwife or obstetrician.