

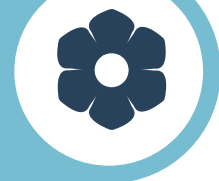
## KEEPING AN EYE ON YOUR Iron Levels

Iron is an essential nutrient the body needs to maintain energy levels<sup>1</sup> and concentration<sup>2</sup>



Iron deficiency is one of the leading risk factors for disability and death worldwide.<sup>3,4</sup> Yet it is commonly underdiagnosed.<sup>5</sup>

Treating iron deficiency can improve health and well-being<sup>6,7</sup>



### Should You Get Your Iron Levels Checked?

**Signs that you may have iron deficiency include:**

#### FATIGUE

Feeling mentally tired, irritable, dizzy or losing concentration quickly<sup>7,8</sup>

#### HAIR LOSS

Losing clumps of hair or more hair than normal<sup>9</sup>

#### SHORTNESS OF BREATH

Can't be as active as you would like<sup>4,15</sup>

#### PALENESS

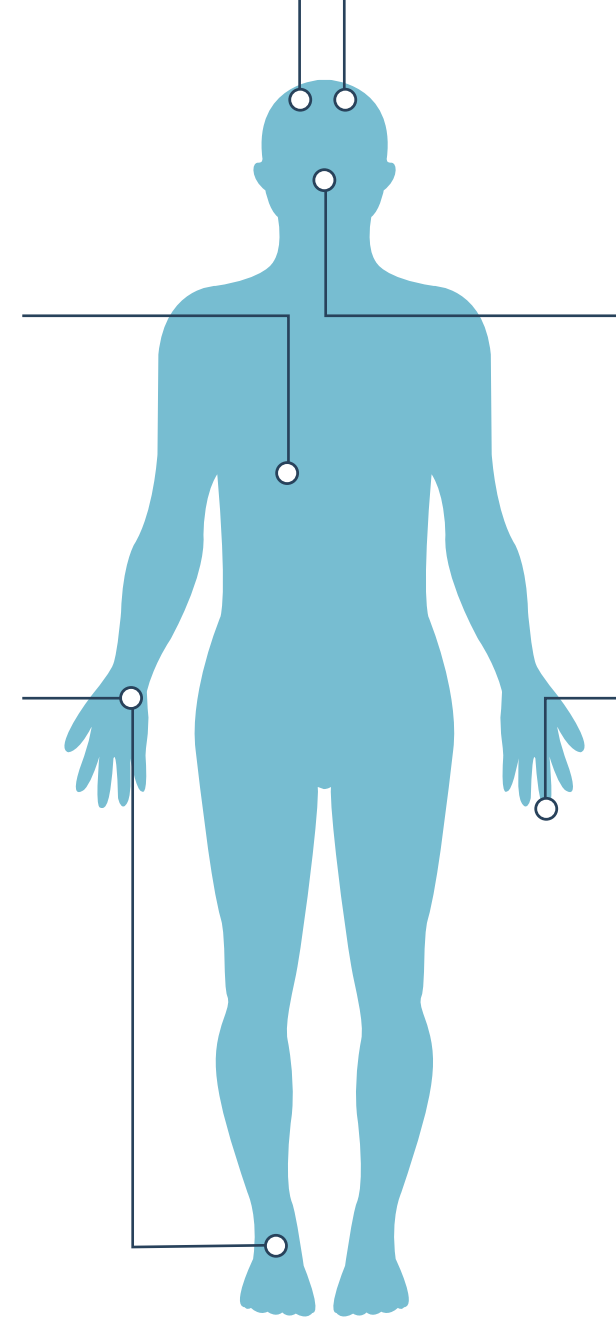
Most noticeable on the face, nails, inner mouth, and lining of eyes<sup>10</sup>

#### COLD INTOLERANCE

Cold hands and/or feet may mean that there is not enough oxygen being delivered in the blood<sup>11,12</sup>

#### BRITTLE NAILS

Nails that chip and crack easily<sup>13</sup>



There are also things that can make you more likely to be iron deficient:



If you suffer from a **chronic disease**, for example heart failure,<sup>16</sup> inflammatory bowel<sup>17</sup> and kidney disease<sup>18</sup>



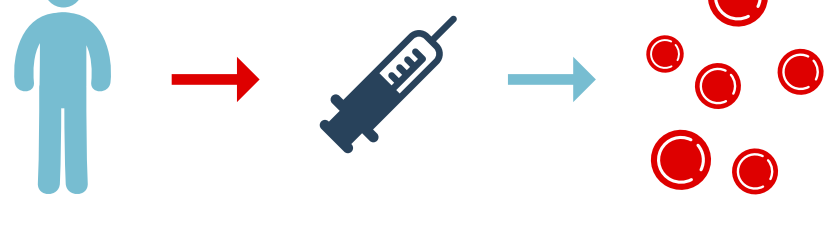
If you experience **heavy menstrual bleeding**<sup>19</sup>



If you are **pregnant**<sup>20</sup> or have **recently given birth**<sup>21</sup>

### How are My Iron Levels Measured?

A **blood test** is used which can provide information about your iron and red blood cell levels.



**Always talk to your doctor about your blood test results and what they mean.**

### MAIN LABORATORY TESTS FOR THE ASSESSMENT OF IRON

Test	What it Measures	Normal* Levels
<b>A Complete Blood Count</b>	The number of red blood cells and amount of haemoglobin in your blood <sup>22</sup>	Haemoglobin <sup>23, 24</sup> Men over 15 yrs More than 13-17 g/dL Women over 15 yrs (not pregnant) More than 12-16 g/dL
<b>TSAT, or serum transferrin saturation</b> <sup>25</sup>	The amount of iron in your blood that is attached to a substance called transferrin	20-50% <sup>24</sup>
<b>Serum ferritin</b>	Represents the iron stores you have in your body <sup>26</sup>	30-300ng/mL <sup>24</sup>
<b>Serum iron</b>	The total amount of iron present in the serum of your blood <sup>26</sup>	50-180 µg/dL <sup>24</sup>
<b>Serum iron TIBC, or Total Iron-Binding Capacity (transferrin)</b>	The amount of iron your blood can carry <sup>22</sup>	50-180 µg/dL <sup>27</sup>

\*Normal values may differ depending on the assay used.

### Why are My Iron Levels Low?



**IT IS IMPORTANT THAT YOU DISCUSS THE REASON FOR YOUR IRON DEFICIENCY WITH YOUR DOCTOR:**



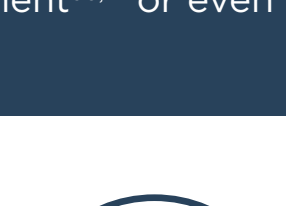
The most common cause of iron deficiency anaemia in adult men and postmenopausal women is blood loss from the stomach or intestines<sup>28</sup>



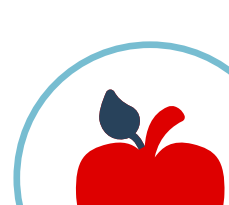
Coeliac disease is often diagnosed after signs such as iron deficiency anaemia are detected<sup>29</sup>



Iron deficiency anaemia may be associated with chronic underlying disease which requires treatment<sup>30,14</sup> or even with some form of cancer<sup>31</sup>



For example, could your iron deficiency anaemia be due to any **medication** you are taking, **extensive exercise** increasing your iron requirements, a **diet** where iron can be limited (e.g. vegetarians, a vegan) or are there signs of **inflammation** in your blood?



Vifor Pharma, a company of the Vifor Pharma Group, is a world leader in the discovery, development, manufacturing and pharmaceutical products for the treatment of iron deficiency. The company also offers a diversified portfolio of prescription and non-prescription medicines. Vifor Pharma's operational headquarters are in Zurich, Switzerland, and the company has an increasingly global presence and a broad network of affiliates and partners around the world. For more information about Vifor Pharma, please visit [www.viforpharma.com](http://www.viforpharma.com).

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1. Haas JD, Brownlie IV T. Iron Deficiency and Reduced Work Capacity: A Critical Review of the Research to Determine a Causal Relationship. *J Nutr*. 2001;131(2):676S-690S.  
2. Lozoff B, Beard J, Connor J, Felt B, Georgieff M. Long-lasting Neural and Behavioral effects of iron deficiency in infancy. *Nutr Rev*. 2006;64(5):534-591. 3. Peyrin-Biroulet L, Willett N, Cacoub P. Guidelines on the diagnosis and treatment of iron deficiency across indications: a systematic review. *Am J Clin Nutr*. 2015;doi:10.3945/ajcn.114.103366. 4. Zimmermann MB1, Hurrell RF. Nutritional iron deficiency. *Lancet*. 2007 Aug 11;370(9586):511-5. 5. Thachil J. Iron deficiency: still under-diagnosed? *Br J Hosp Med*. 2015;76(9):528-532. 6. Patterson A, J. Brown WJ, Roberts DC. Dietary and supplement treatment of iron deficiency results in improvements in general health and fatigue in Australian women of childbearing age. *J Am Coll Nutr*. 2001;20(4):337-342. 7. Patterson A et al. Iron deficiency, general health and fatigue: Results from the Australian Longitudinal Study on Women's Health. *Qual Life Res*. 2000;9(4):497-507. 8. Favrat B, Balck K, Breyman C, et al. Evaluation of a single dose of ferric carboxymaltose in fatigued, iron-deficient women - PREFER a randomized, placebo-controlled study. *PLoS One*. 2014;9(4):e112. doi:10.1371/journal.pone.0094217. 9. Frost LB, Bergfeld WF, Calaganea E. The diagnosis and treatment of iron deficiency and its potential relationship to hair loss. *J Am Acad Dermatol*. 2006;54(8):924-44. Available at: [http://www.jaad.org/article/S0190-9622\(05\)04745-6/abstract](http://www.jaad.org/article/S0190-9622(05)04745-6/abstract). Accessed November 8, 2013. 10. Stoltzfus R, Edward-Raj A. Clinical pallor is useful to detect severe anemia in populations where anemia is prevalent and severe. *J Nutr*. 1999;129(May):1675-1681. Available at: <http://n.nutrition.org/content/129/9/1675.short>. Accessed February 11, 2014. 11. Miller JL. Iron deficiency anemia: a common and curable disease. *Cold Spring Harb Perspect Med*. 2013;3(7):1-13. doi:10.1101/cshperspect.a011866. 12. World Health Organization. Iron deficiency anemia: Assessment, prevention and control: A guide for programme managers; 2001:1-114. 13. Cashman MW, Sloan SB. Nutrition and nail disease. *Clin Dermatol*. 2010;28(4):420-5. doi:10.1016/j.clindermatol.2010.03.037. 14. Clark S. Iron deficiency anemia. *Nutr Clin Pr*. 2008;23(2):128-141. 15. McDermid J, Lonnardal B. Iron. *Adv Nutr*. 2012;1(1):532-533. doi:10.3945/an.112.002261. Table. 16. Ebner N, von Haehling S. Iron deficiency in heart failure: a practical guide. *Nutrients*. 2013;5(9):3730-9. doi:10.3390/nu5093730. 17. Goldberg ND. Iron deficiency anemia in patients with inflammatory bowel disease. *Clin Exp Gastroenterol*. 2013;6:61-70. doi:10.2147/CEG.S43493. 18. Mehdi U, Ioto RD. Anemia, diabetes, and chronic kidney disease. *Diabetes Care*. 2009;32(7):1320-6. doi:10.2337/dc08-0779. 19. Liu Z, Doan Q, Blumenthal P, Dubois RW. A systematic review evaluating health-related quality of life, work, impairment, and health-care costs and utilization in abnormal uterine bleeding. *Value Health*. 2007;10(3):183-94. doi:10.1111/j.1524-4733.2007.00168.x. 20. Milman N. Postpartum anemia: prevention and treatment. *Ann Hematol*. 2008;87(12):1449-59. doi:10.1007/s00277-008-0518-4. 21. Milman N. Postpartum anemia I: definition, prevalence, causes, and consequences. *Ann Hematol*. 2011;90(11):1247-53. doi:10.1007/s00277-011-1279-z. 22. Dean L. 1. Blood and the cells it contains. *Blood Groups Red Cell Antigens*. 2005:1-6. Available at: <http://www.ncbi.nlm.nih.gov/books/NBK2263/>. 23. WHO. Haemoglobin concentrations for the diagnosis of anaemia and assessment of severity. *Vitamin and Mineral Nutrition Information System*. Geneva, World Health Organization, 2011 WHO/NMH/ANHD/MNM/11.1 (<http://www.who.int/vmnis/indicators/haemoglobin.pdf>, last 06-January-2016).

24. Muñoz M, García-Erce, Remacha Disorders of iron metabolism. Part II: iron deficiency and iron overload. *J Clin Pathol*. 2011 Apr;64(4):287-96. doi:10.1136/jcp.2010.086991. Epub 2010 Dec. 25. Fishbane S, Pollack S, Feldman HI, Joffe MM. Iron indices in chronic kidney disease in the National Health and Nutritional Examination Survey 1988-2004. *Clin J Am Soc Nephrol*. 2009;4(1):57-61. doi:10.2215/CJN.01670408. 26. Suominen P, Punnonen K, Rajamäki a, Iijala K. Serum transferrin receptor and transferrin receptor-ferritin index identify healthy subjects with subclinical iron deficits. *Blood*. 1998;92(8):2934-9. Available at: <http://www.ncbi.nlm.nih.gov/pubmed/9763580>. 27. MedlinePlus U.S. National Library of Medicine. 2014. Available at <https://www.nlm.nih.gov/medlineplus/ency/article/003489.htm>. Last accessed 6-January-2016. 28. Goddard AF, James MW, McIntyre AS, Scott BB. Guidelines for the management of iron deficiency anaemia. *Gut*. 2011;60(10):1309-16. Available at: <http://gut.bmj.com/content/60/10/1309.full>. Accessed August 12, 2015:35.

29. Presutti RJ, Gangesi JR, Cassidy HD, Hill D a. Celiac disease. *Am Fam Physician*. 2007;76(12):1795-802. Available at: <http://www.ncbi.nlm.nih.gov/pubmed/18217518>. 30. Camaschella C et al. Iron deficiency, new insights into diagnosis and treatment. *Hematology Am Soc Hematol Educ Program*. 2015 Dec 5; 2015(1):18-13. doi:10.1182/hematology.201511.311. Logan ECM, Yates JM, Stewart BM, Fielding K, Kendrick D. Investigation and management of iron deficiency anaemia in general practice: a cluster randomised controlled trial of a simple management prompt. *Postgrad Med J*. 2002;78(923):533-7. Available at: <http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1742500&tool=pmcentrez&rendertype=abstract>. 31. Pozniakowski P, van Veldhuisen DJ, Comin-Colet J, et al. Beneficial effects of long-term intravenous iron therapy with ferric carboxymaltose in patients with symptomatic heart failure and iron deficiency. *Eur Heart J*. 2014;35(46):668. doi:10.1093/eurheartj/ehu385. 33. Gisbert et al. Oral and Intravenous Iron Treatment in Inflammatory Bowel Disease: Hematological Response and Quality of Life. *Improvement Inflamm Bowel Dis*. 2009 Oct;15(10):1485-91. doi:10.1002/ibd.20925. 34. Lee TW, Kolber MR, Fedorak RN, Van Zanten SV. Iron replacement therapy in inflammatory bowel disease patients with iron deficiency anemia: A systematic review and meta-analysis. *J Crohn's Colitis*. 2012;6(3):267-275. doi:10.1016/j.jcrot.2011.09.010.