# IRON DEFICIENCY – Patient Information Leaflet

## What is Iron Deficiency?

Iron is essential for making red blood cells and helping your body carry oxygen. Not enough iron leads to iron deficiency, which can progress to iron deficiency anaemia (IDA) if untreated.

## Symptoms You Might Notice

- Feeling very tired or weak  
- Shortness of breath or fast heartbeats  
- Pale skin, brittle nails, hair loss  
- Sore tongue or mouth ulcers  
- Strange cravings (like ice or clay)  
- Restless legs, headaches, difficulty concentrating

## How It’s Diagnosed

Blood tests such as full blood count (FBC) to check haemoglobin & red blood cell size and ferritin level confirm iron deficiency. Ferritin <15–30 µg/L suggests deficiency.

## Common Causes

- Heavy menstrual bleeding or pregnancy  
- Bleeding in the gut (e.g., ulcers, haemorrhoids)  
- Poor diet (low in red meat, greens)  
- Absorption problems (e.g., coeliac disease)  
- Chronic inflammation or illness

## Treatment Options

**1**. Oral Iron Supplements:  
- Typical dose: one ferrous sulfate/fumarate/gluconate tablet daily  
- Continue for at least 3 months  
- Take with vitamin C and avoid tea, coffee, dairy during dose  
- May cause stomach upset, constipation, dark stools  
  
**2**. Intravenous Iron:  
- Used if oral iron is not tolerated or for urgent correction (e.g., before surgery)  
  
**3**. Diet and Lifestyle:  
- Eat iron-rich foods: red meat, beans, cereals, leafy greens  
- Combine with vitamin C-rich foods  
- Avoid tea, coffee around mealtimes

## What Happens Next

- Blood tests will be repeated in 4–12 weeks  
- Continue iron for 3 months after blood levels return to normal  
- If no improvement, further testing may be needed

## When to Seek Help

- Persistent tiredness or dizziness  
- Side effects from iron tablets  
- Signs of bleeding (e.g., blood in stools, heavy periods)  
- Before surgery – discuss iron needs with your clinician

## Summary Table

1. Diagnose via blood tests (FBC + ferritin)  
2. Start oral iron (daily tablet + vitamin C)  
3. Reassess blood in 4–12 weeks  
4. Continue 3 months post-recovery  
5. Investigate any ongoing symptoms

## For Surgery Preparation (All‑Wales Guidance)

If surgery is planned soon, treatment should start immediately. IV iron may be needed if oral tablets aren’t fast or effective enough.