Pathway for Iron Supplementation in pregnant women 26-28 weeks gestation

Check Ferritin and FBC with 26-28 week bloods

- Ferritin >50 Hb >100 g/L: No iron tablets likely to be necessary
- Ferritin <50 but >15 Hb >100 g/L: ? Iron tablets required later in pregnancy
- Ferritin <15 Hb >100 g/L: Low dose iron tablets (1 Ferrotab/day)
- IDA*: no need for earlier delivery
- IDA* early delivery possible (e.g. IUGR)

Low dose iron tablets (1 Ferrotab/day)

- Hb > 70 g/L: High dose iron tablets (2 Ferrotabs/day)
- Hb rise >15 g/L: Maintain Ferritin No anaemia

Assess response after 4 weeks therapy

- No: Continue
- Yes: IV Iron Recommended

*Iron deficiency anaemia (IDA)
Hb < 100g/L and Ferritin < 15 umol/l
**Pathway for Iron Supplementation in pregnant women ≥30 weeks gestation**

**IDA**

- **in late gestation**

  **30-34 weeks Gestation**
  - **Hb >70 g/L**
    - High dose iron 2 Ferrotab/day
  - **Hb < 70 g/L**

  **> 34 weeks Gestation**
  - **Hb 90-99 g/L**
  - **Hb < 90 g/L**
    - Assess response after 3 weeks therapy
      - **Hb rise >10 g/L**
        - Yes: Continue
        - No: IV Iron Recommended
  - **Hb < 70 g/L**
    - Yes: Continue

*Iron deficiency anaemia (IDA)*

Hb < 100g/L and Ferritin < 15 umol/l