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## *Information for You from Your Health Care Team*

### **PREVENTING IRON DEFICIENCY ANEMIA IN INFANTS AND TODDLERS**

#### **What is anemia?**

Anemia is a decrease in the hemoglobin in the red blood cells. This means that the blood is less able to carry oxygen. To better understand how this happens, here is an analogy that I like. The purpose of circulation (the train) is to deliver oxygen (freight) to the body. The red blood cells (the boxcars) contain hemoglobin (crates) in which the oxygen is stored. When the number of crates is decreased, there is a disturbance in freight transport.

#### **How does anemia affect my child?**

Anemia affects a child's growth and development. It can decrease activity, physical endurance and learning ability. Recent studies have shown lower mental and motor development scores when there is an iron deficiency. In addition, anemia depresses immune function and the body's ability to fight infections.

#### **How common is anemia?**

By far the most common anemia seen in children between the ages of 6 - 18 months is iron deficiency anemia. Recent data show that about 1% of infants have iron deficiency anemia. However, as high as 9% of toddlers have iron deficiency without anemia.

#### **When should my child be tested for anemia?**

Most pediatricians screen children for iron deficiency anemia when they are between 9 months to a year old. This is done by a blood test. Weaning often occurs when an infant is around 6 months old. Unless iron fortified foods are added to the diet at the time of weaning, the child's possibility of being iron deficient is highest at this time.

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

Usually the child's medical provider prescribes a daily iron supplement to increase the hemoglobin level. This is often taken for several months.

#### **How can I prevent my child becoming anemic?**

You can prevent nutritional anemia by ensuring a healthy diet with good sources of iron and vitamins. Vitamin C helps the body absorb iron. Breastfed infants don't need additional iron until 6 months. After that, iron fortified foods should be added. In bottle-fed infants, the use of iron enriched formulas has led to a tremendous decrease in the incidence of iron deficiency. The introduction of iron-fortified cereals and baby foods at the time of weaning helps maintain iron stores until children are able to eat table foods. Foods that provide iron include red meats, poultry, beans, green leafy vegetables, dried fruits such as raisins, and whole grain flours, breads and pasta. Introducing whole milk in the child's diet prior to one year of age increases the risk of anemia due to intestinal bleeding.

Your child's doctor or clinic is the best source for information regarding whether your child is at risk for becoming iron deficient or anemic.

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