

Anemia in pregnancy & parenteral iron therapy

Raul H. Morales-Borges

American Red Cross, USA

The prevalence of anemia in pregnancy varies considerably because of the differences in social conditions, lifestyles, and health seeking behaviors across different cultures. Anemia affects all pregnant women in the world-52 % in developing countries compared with 23 % in the developed world. It is one of the most prevalent nutritional deficiency problems affecting pregnant females. Iron deficiency is the major cause of anemia followed by folate deficiency. Intravenous iron therapy is a safe alternative for the treatment of anemia, being able to reduce the need for blood transfusion and its concomitant side effect such as anaphylactic shock, febrile and hemolytic reactions, infections (hepatitis B, C, HIV, protozoan and bacterial) alloimmunization and graft versus host disease. During pregnancy and puerperium it helps to rebuild iron stores, helping the symptoms of anemia to subside at a faster rate and reduces the risk of developing anemia in subsequent pregnancies. Major advantages are safety, efficacy, compliance, simple mode of administration in an outpatient setting and cost effectiveness because admission is not needed in all cases. Normally blood transfusion is an option in the cases of moderate and severe anemia in the third trimester of pregnancy. The given Iron intravenously may reduce the need for blood transfusion because of its faster action. Therefore, it can be considered as an alternative to blood transfusion in the treatment of pregnant women with moderate iron deficiency anemia during the third trimester. I will present my experience in my practice using either iron sucrose or iron dextran presentations over 15 years.

Biography

Raul H. Morales-Borges has completed his M.D. at the age of 27 years from San Juan Bautista School of Medicine in Puerto Rico, Internal Medicine in 1993 at Henry Ford Hospital and Hematology/Oncology fellowship from Providence Hospital and University of Michigan Medical Center in Michigan, USA in 1995. He is the medical director of Ashford Institute of Hematology & Oncology and American Red Cross in Puerto Rico. He has published 18 papers and abstracts, served as lecturer in many conferences and symposiums in PR and USA, and served as a reviewer for IMMUNOHEMATOLOGY Journal.

rmoralesborges@yahoo.com