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Why pregnant women do not adherent to iron/folate supplementation? A cross-sectional study

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Background & Aim: Iron deficiency anemia and acid folic deficiency are two important health problems involving pregnant women worldwide, especially in less developed countries. Although these nutritional insufficiencies could be prevented by iron and acid folic supplementation, adherence to prescribed supplementations is still problematic in many nations. A cross sectional study in Iran was conducted to explore the likely reasons of non-adherence to iron/folate supplements.

Methods & Materials: In order to address the research question, 433 pregnant women selected randomly from western Iran (2016) were interviewed. Data gathering instrument was a validated semi-structured questionnaire containing 27 questions including personal characteristics, socioeconomic situation and the likely reasons for non-adherence. Using Chi-square and t-test, when applicable, the relationships between outcome variable and predicting variables were assessed. A p-value of <0.05 was considered significant.

Findings: The mean and standard deviation ($\mu\pm$ SD) of women ages and their gestational ages were (27.86±5.54 years) and (23.29±9.86 weeks), respectively. The most common cause of non-adherence was forgetfulness and fear of side-effects, respectively. Educational status was only factor significantly associated with adherence to both supplementations.

Conclusion: Adherence to iron and folate supplementation in pregnant women can be promoted by minimizing side-effects and providing a strategy remembering women to take their pills on time.

Recent Publications

- 1. Ibrahim Z M, El-Hamid S A, Mikhail H, Khattab M S (2011) Assessment of Adherence to Iron and Folic Acid Supplementation and Prevalence of Anemia in Pregnant Women. *The Medical Journal of Cairo University*; 79(2).
- 2. King J C (2000) Physiology of pregnancy and nutrient metabolism. *The American Journal of Clinical Nutrition*; 71(5): 1218s-25s.
- 3. Beard J L (2000) Effectiveness and strategies of iron supplementation during pregnancy. *The American Journal of Clinical Nutrition*; 71(5): 1288s-94s.
- 4. Auerbach M, Adamson J W (2016) How we diagnose and treat iron deficiency anemia. *American Journal of Hematology*; 91 (1): 31-8.
- 5. Di Renzo G C, Spano F, Giardina I, Brillo E, Clerici G, Roura L C (2015) Iron deficiency anemia in pregnancy. *Women's Health*; 11(6): 891-900.

Biography

Soraya Siabani is an Associate Professor at Kermanshah University of Medical Sciences KUMS, Iran and an External Supervisor at University Technology Sydney (UTS), Australia. She has received her PhD in Public Health from the University of Sydney, Australia and Medical Doctorate from KUMS, Iran. Her research focuses on health promotion and epidemiology of chronic diseases.

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