

Iron supplements during pregnancy

Why is it necessary to take iron tablets during pregnancy?

The body's need for iron increases significantly during pregnancy, and it is difficult to get enough iron from food alone. Iron is necessary for the body to produce blood cells and to supply the fetus with iron. A deficiency in iron can lead to low hemoglobin (Hb) levels, making you feel more fatigued and out of breath than normal. A normal blood value and good iron reserves allow the body to better handle bleeding during childbirth and also reduce the risk of infection and depression after delivery.

How much iron is needed?

The midwife checks your blood values and iron reserves (ferritin) through a blood test early in the pregnancy. If the levels are normal, you should take 100 mg of iron every other to every third day. If iron reserves are low (<30), you should take 100 mg every day. If you have very good iron reserves (>150), you do not need to take iron tablets.

When should the treatment start and how long should treatment last?

It is good to start treatment as early as possible, but if you are troubled by morning sickness, you can wait until the symptoms decrease, which usually happens around pregnancy week 10-12. After childbirth, treatment should continue for at least 2-3 months. If you have the blood disorder thalassemia or an inflammatory bowel disease, you should talk to your doctor before starting iron tablets.

Which iron supplement is recommended?

Duroferon® (depot tablet) or Niferex® (capsule) contains 100 mg of iron and is recommended. They are available over the counter at the pharmacy. The tablets should preferably be taken in the morning before breakfast. Avoid simultaneous consumption of coffee, tea, and milk which can impair absorption. Simultaneous intake of vitamin C facilitates absorption. If you are being treated with the medication Levaxin® or using medications for gastritis, you should allow at least two hours between intakes, as iron decreases the absorption of these medications.

Common side effects

Problems from the gastrointestinal tract are common, especially at the beginning of treatment, but are harmless and often decrease after a period of use. It is common for the stools to be stained black from the iron. Nausea may decrease if the iron is taken with a meal. Constipation can be alleviated with over-the-counter bulk-forming agents (Laktulos®, Movicol® or Inolaxol®). Bulk-forming agents are not habit-forming and do not affect the fetus. They should be used daily for best effect. There are also dietary supplements that contain iron. The doses are lower and often lead to fewer gastrointestinal side effects. If you experience significant side effects from Duroferon® and Niferex® and the above advice doesn't help, you can, if your blood values and iron reserves are normal, try SiderAL Forte® (30 mg), one tablet daily. If you have low iron reserves and low blood values, intravenous iron treatment may instead be applicable if you cannot continue with iron tablets due to side effects. Please talk to your midwife if you have difficulty taking.

Info translated from: