

Anaemia in Pregnancy: Causes, Symptoms, Diagnosis, and Treatment



Highlights

When you have anaemia, your blood doesn't have enough healthy red blood cells or haemoglobin to carry oxygen around your body and to your baby.

Iron deficiency is the main cause of anaemia during pregnancy.

If you have anaemia, you may feel tired and weak.

Anaemia during pregnancy is diagnosed by doing a simple blood test.

If you are found to have iron deficiency anaemia during pregnancy, your doctor may suggest that you take iron supplements or have intravenous iron (through your veins).

In This Article

Understanding Anaemia

Causes of Anaemia During Pregnancy

Symptoms of Anaemia in Pregnancy

Diagnosing Anaemia in Pregnancy

Treatment for Anaemia During Pregnancy

Risks of Anaemia During Pregnancy

Preventing Anaemia in Pregnancy

Understanding Anaemia

Anaemia occurs when your blood doesn't have enough healthy red blood cells or haemoglobin to carry oxygen around your body and to your baby. Red blood cells are produced in bone marrow and contain a protein called haemoglobin, which is essential for oxygen transport. You need adequate iron, vitamin B12, and folate to produce sufficient haemoglobin. If these nutrients are lacking, you may become anaemic.

Causes of Anaemia During Pregnancy

During pregnancy, your body needs to produce extra blood to support your growing baby. This requires additional iron, vitamin B12, and folate to make enough haemoglobin. Iron deficiency is the most common cause of anaemia during pregnancy, as your iron needs increase threefold. Absorption of dietary iron can be challenging, so many people need iron supplements. Other causes of anaemia include lack of folate or vitamin B12, unusual bleeding, or conditions like pre-eclampsia or sickle cell disease.

Symptoms of Anaemia in Pregnancy

Mild anaemia is common in pregnancy and may result in fatigue. Severe anaemia can cause symptoms such as shortness of breath, weakness, dizziness, irritability, difficulty concentrating, and palpitations (a fast heartbeat).

Diagnosing Anaemia in Pregnancy

Your doctor or midwife will check your haemoglobin levels during routine blood tests at the start of your pregnancy and again at 28 weeks. If your haemoglobin is low, you may undergo additional tests to identify the cause.

Treatment for Anaemia During Pregnancy

If diagnosed with iron deficiency anaemia, your doctor will recommend iron supplements, which may help improve haemoglobin levels. Some people experience side effects such as nausea or constipation from iron supplements. If supplements are ineffective or cause discomfort, intravenous iron may be suggested.

Risks of Anaemia During Pregnancy

Severe anaemia can strain your heart and increase the risk of complications during labor, especially if significant blood loss occurs during childbirth.

Preventing Anaemia in Pregnancy

Starting Pregnancy in Good Health

It's recommended to have a pre-pregnancy check-up with your doctor. Ensure you're taking folic acid supplements (0.5mg daily for at least one month before pregnancy) to reduce the risk of neural tube defects. A higher dose may be necessary for those with certain conditions, such as diabetes or obesity. Iodine supplementation is also advised during pregnancy.

Eating Well While Pregnant

A balanced diet is key to preventing anaemia. Foods rich in iron include meat, iron-fortified cereals, spinach, and dried fruits. Vitamin B12 is found in meat, fish, and dairy products, while folate-rich foods include leafy vegetables, beans, and asparagus. For vegetarians, lentils, beans, tofu, and soy drinks can replace animal-based sources.

Tools and Assistance

Iron Supplements: If diagnosed with anaemia, iron supplements are commonly prescribed to increase haemoglobin levels. These are available over-the-counter or through prescription. It's important to follow the recommended dosage and guidelines to avoid side effects such as nausea or constipation.

Intravenous Iron (IV Iron): If iron supplements are ineffective or difficult to tolerate, your healthcare provider may recommend intravenous iron. This method delivers iron directly into your bloodstream to quickly restore iron levels.

Blood Tests: Regular blood tests are essential for monitoring haemoglobin and iron levels during pregnancy. These tests help track the effectiveness of treatment and ensure proper levels are maintained for both the mother and baby.

Folic Acid Supplements: For preventing neural tube defects and addressing

folate deficiency, folic acid supplements are recommended, particularly for those planning pregnancy or in the early stages. A standard dose is 0.5mg, but higher doses may be prescribed based on individual health conditions.

Dietary Guidance: A registered dietitian or nutritionist can provide personalized advice on maintaining a diet rich in iron, folate, and vitamin B12. They can guide you in making dietary choices that help prevent anaemia and ensure both maternal and fetal health.

Iodine Supplements: Iodine supplementation is recommended during pregnancy to support thyroid function and fetal development. Ensuring adequate iodine intake is critical for the baby's growth.

Healthcare Provider Consultation: Regular consultations with your healthcare provider, including midwives and obstetricians, are crucial for managing anaemia during pregnancy. They can provide tailored advice and monitor your health to ensure the well-being of both you and your baby.