

Pre-operative Assessment

Management of iron deficiency anaemia before elective surgery

Introduction

This leaflet is to inform you about iron deficiency anaemia (IDA) and the treatment and investigations that we may recommend before you have your surgery.

Diagnosis

The blood sample taken in clinic was used to measure your level of haemoglobin and ferritin. If your levels are low, this confirms that you have IDA.

IDA can be corrected with iron treatment, but in some cases further investigations may be required. Your GP will be informed of your results and arrange any further tests required.

What is anaemia

Anaemia is a condition which occurs when:

- The number of red cells is lower than normal
- The amount of haemoglobin in each red cell is less than normal

Millions of red cells are made in the bone marrow every day. A good diet, including plenty of iron is essential for the body to make red blood cells.

Blood

Blood contains three different types of cells:

- Red blood cells which carry oxygen around the body in a substance called haemoglobin
- White blood cells which defend the body against infection
- Platelets which help the blood to clot



Symptoms of IDA

Common symptoms include:

- Tiredness
- Feeling breathless
- Feeling faint

Less common symptoms include:

- Headaches
- Palpitations (irregular heart beat)
- Sore tongue
- Pale skin
- Brittle flaking nails
- Painful cracks in the corners of the mouth
- Itchy skin

Causes of IDA

Bleeding in the stomach or bowels is the most common cause of IDA in men and post menopausal women.

This could be due to:

- Medications, in particular anti-inflammatory tablets such as ibuprofen or aspirin
- Ulcers of the stomach or gullet
- Cancer of the stomach or bowel. The risk of this is between 5-10%
- Other bowel conditions such as colitis
- Lack of iron in the diet
- Coeliac disease, which is an allergy to wheat, barley and rye

Other investigations and tests

If your IDA is not suitable for treatment with iron, we will inform your GP and they will arrange further investigations.

Your GP will either refer you for a clinic appointment or may refer you directly to the endoscopy unit for investigations.

If you are referred to your GP for investigations, your operation date will be postponed. We will await your GP to contact us that they have completed their investigations and treatment and are happy for your surgery to proceed.

Treatment

Iron tablets

- IDA is usually corrected by taking iron tablet. If your results indicate you may benefit from iron treatment you will be prescribed a type of iron tablet called Ferrous Sulphate. It is important that you take at least a months supply of iron.
- Iron tablets usually make your bowel motions turn black.
- In some people Ferrous Sulphate can cause side effects such as an upset stomach. If that happens it is important that you let us know as there are other types of iron tablets you can take that may cause less side effects.
- It is important that you store your iron tablets safely out of reach of young children. An overdose of iron in a young child can be fatal.

Iron Infusions

Occasionally we will offer people an iron infusion (iron given in a drip). You will only be offered this if you are unable to tolerate iron tablets because of severe side effects or if your blood count keeps dropping to very low levels.

What happens next

After completing a course of iron tablets or an infusion, you will have another blood test at the hospital to see if you have responded to the treatment. The pre-assessment department will contact you to organise this to be done – usually 4-6 weeks after your treatment.

You will then continue preparations for your surgery if your blood count has improved sufficiently. In some cases, we may need to delay this if your count is still low.

Dietary iron

A balanced diet should provide enough iron to meet your body's needs.

This should include:

- Cereal and cereal products
- Meat
- Vegetables

For further information please refer to the NHS website www.nhs.uk/live-well/eat-well

Are there any alternatives?

There are limited alternatives to treatment. These will be discussed with you if further investigations are required.

If you have any comments about this leaflet or the service you have received you can contact :

Clinical Service Manager Pre-Operative Assessment Huddersfield Royal Infirmary

Telephone: 01484 342652

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

ਰ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਪ੍ਰਾਰੂਪ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو سی معلومات کس می اور فارم می بازبان می درکار ہوں، تو برائے مہربازی مندرجہ بالا شعبے می ہم سے رابطہ کری.

"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"

