**Guidance on the Management of Iron Deficiency Anaemia for Primary Care Professionals**

**Northern Ireland Transfusion Committee**

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**Optimise Haemoglobin**

Pre-operative anaemia whether mild or severe, is an independent risk factor for postoperative morbidity and mortality.

**Is the patient anaemic?**

(Male Hb < 130g/L, Female < 120g/L)

- **Yes** → **Perform iron studies**
- **No** → **Perform appropriate investigations to facilitate optimisation of haemoglobin and haemostasis**

**Is there a confirmed diagnosis of iron deficiency?**

(Ferritin < 30 ug/L and/or TSAT < 20%)*

- **Yes** → **Has condition causing the iron deficiency been identified?**
- **No** → **Perform appropriate investigations to facilitate optimisation of haemoglobin and haemostasis**

**Has condition causing the iron deficiency been identified?**

- **Yes** → **Consider urgent referral to surgical team to reduce requirement for transfusion**
- **No** → **Consider hospital referral for intravenous iron***

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**Avoid Delays...**

Surgery may have to be postponed if treatable anaemia is not corrected promptly.

**Is there heavy ongoing blood loss?**

- **Yes** → **Consider hospital referral for intravenous iron***
- **No** → **Is patient suitable for oral iron supplements?***

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- **Yes** → **Ensure oral iron therapy is started and continued**
- **No** → **Consider hospital referral for intravenous iron***

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- **Yes** → **Continue oral iron**
- **No** → **Consider hospital referral for intravenous iron***

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**Reduce Transfusion...**

Transfusion could have been avoided for 1 in 5 patients by proactive correction of anaemia.

* Ferritin may be elevated in acute inflammation (e.g. 30-100 ug/L) and can mask iron deficiency.

  In these cases a TSAT < 20% and a low serum iron identifies iron deficiency.

* As per Chief Medical Officer Guidance HSS-MD-22-2012 “Management of the Anaemic Adult Patient Prior to Scheduled Major Surgery”

**Contraindications to intravenous iron include**

1. Known hypersensitivity
2. Characteristics of iron overload
3. Pregnancy in 1st trimester
4. Porphyria cutanea tarda (caution)

**Intravenous iron is indicated for patients with malabsorption, inflammatory bowel disease, non-compliance with oral iron and intolerance of its side effects**

N.B. intravenous iron is a Red-listed drug [www.ipnsm.hscni.net](http://www.ipnsm.hscni.net)

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* Read the "Management of Anaemia and Avoidance of Transfusion" GAIN 2010 regional audit of 743 transfused patients across NI

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