

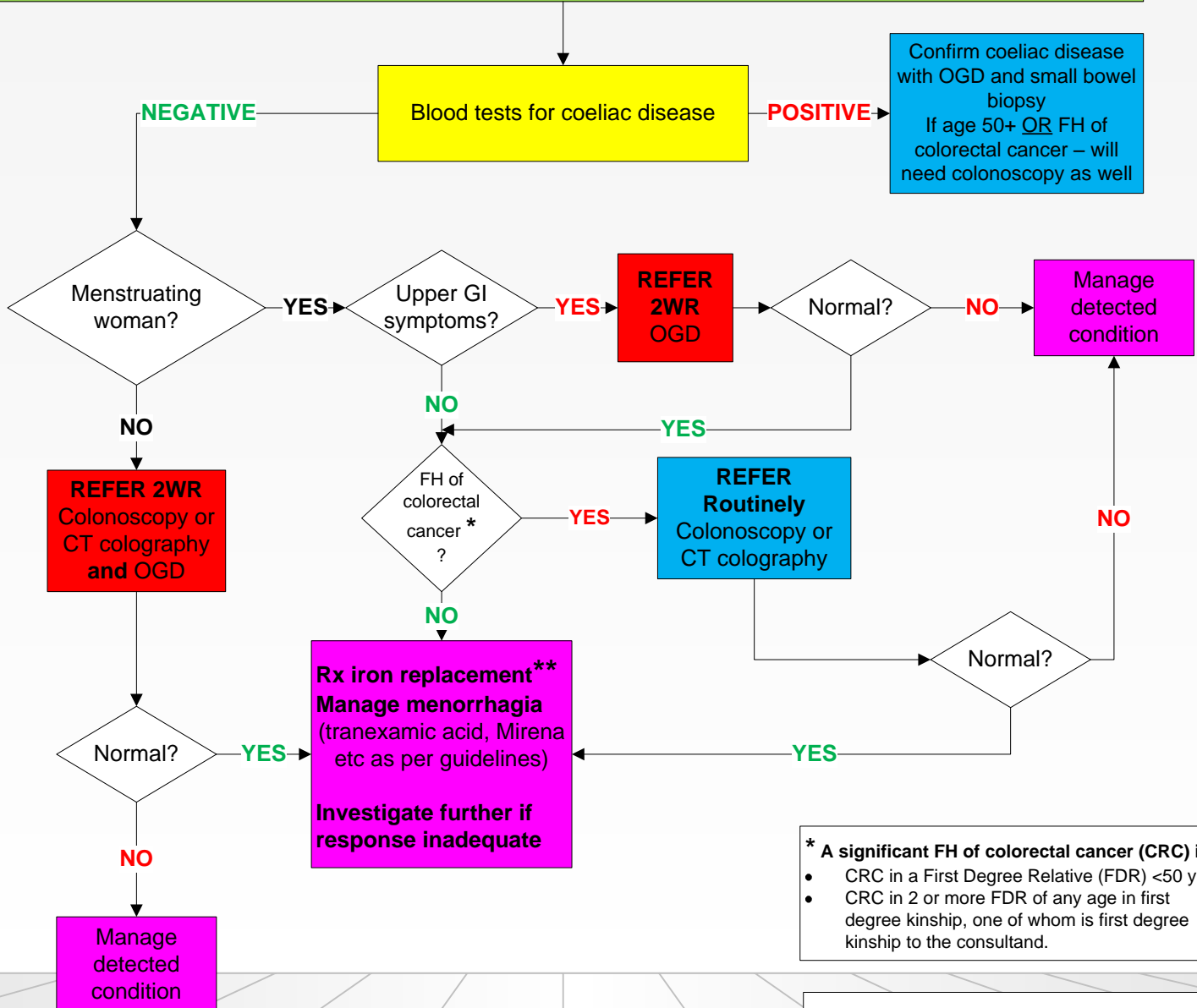
# BSUH DDC & BHCCG

## Investigation of Iron Deficiency Anaemia

**Evidence of iron deficiency anaemia:**

- **Low Hb** (<110g/l in men over 15yrs, <100g/l in non-pregnant women over 15 yrs and...
- **Low ferritin** (<15ug/l unless CRP is significantly raised in which case <40ug/l)

Exclude non-GI causes: Renal failure. Bleeding from the renal tract - urinalysis



**\* A significant FH of colorectal cancer (CRC) is:**

- CRC in a First Degree Relative (FDR) <50 yrs
- CRC in 2 or more FDR of any age in first degree kinship, one of whom is first degree kinship to the consultand.

**\*\*Iron replacement**

There is no evidence that any preparation is better absorbed than others.

Start with: **ferrous sulphate 200mg BD**

If not tolerated try ferrous gluconate 300mg BD

If liquid required give Sytron 5mls TDS

Continue Rx until indices normal, then for an additional 3 months to replenish supplies.

Recheck Hb and ferritin 6-8 weeks after treatment ends to ensure response is maintained.

As with all guidelines consider the overall condition of the patient when deciding if investigation is in their best interest