



TREATMENT AND PREVENTION OF IRON DEFICIENCY ANEMIA DURING PREGNANCY

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Annotation: iron deficiency anemia considered a common disease in pregnant women. This disease has a negative effect on the fetus, both in a woman and in a woman. In the treatment of this type of anemia, both enteral and parenteral methods have been used to take iron preparations. This article provides a review of the literature studied about iron deficiency anemia during pregnancy.

Keywords: iron deficiency anemia, parenteral method, enteral method, iron-polymaltose, reproductive age, cognitive function

Iron deficiency anemia (TTA) is the most common deficiency condition in pregnant women and the most common form of anemia. Its clinical consequences are very important, since the negative effects of iron deficiency not only affect the woman's body, but can also affect the passage of the gestation period and the health of newborns. The first way to treat iron deficiency is to take iron preparations entorally, the most effective and safe form of which is currently the Iron-polymaltose complex. In the case of severe anemia, the preferred alternative method is the administration of an intravenous iron drug. Timely diagnosis and adequate therapy make it possible to restore iron metabolism in a pregnant woman in the shortest possible time and prevent the development of complications.

Anemia is most often diagnosed in women during pregnancy and the postpartum period. This is due to the physiologically increasing needs of the fetus and often a decrease in iron reserves in the mother's body. Iron deficiency can cause a number of complications during pregnancy, both for the woman herself and later for the newborn. The fastest, most effective and safest correction of iron deficiency anemia, especially its severe forms, helps to avoid complications and improve the results of pregnancy. The main cure for iron deficiency anemia is the intake of iron preparations. However, oral forms, taking into account the peculiarities of the absorption of iron in the gastrointestinal tract, cannot achieve the effect in all cases. Iron carboxymaltose is an intravenous drug that is well tolerated and, most importantly, is an effective method for treating iron deficiency in pregnant women from the second trimester and in the postpartum period, filling in quickly.

Iron deficiency anemia is a common disease. According to various sources, it occurs in most women of reproductive age, pregnant women and postpartum women. This is due to high iron requirements during pregnancy, and increased iron consumption in the postpartum period. The shortest of the effects

Iron deficiency cases in pregnant women in the world average between 25 and 50%. Their prevalence in developing countries ranges from 35 to 75%, and in developed countries it is 18-20%. According to the Ministry of health of Russia, on average in the Russian Federation, the frequency of iron deficiency in pregnant women ranges from 39 to 44%, and

in postpartum women from 24 to 27%. Iron deficiency negatively affects pregnancy, childbirth and the postpartum period, the condition of the fetus and newborn, which contributes to an increased risk of pregnancy, placental insufficiency, growth delay and frequency of fetal hypoxia, premature birth, labor weakness. , the frequency and size of pathological blood loss during childbirth and early postpartum, infectious complications in postpartum women, and hypogalactia. Taking iron preparations for preventive purposes reduces the risk of anemia in the mother during childbirth by 70% and iron deficiency by 57%. Among the Iron preparations taken by mouth, the drug Sorbifer Durules (EGIS, Hungary) has proven itself well. In recent years, the use of this drug in a large sample of pregnant women and postpartum women has proven its effectiveness in the treatment of ID in this group of patients [5]. Iron deficiency in pregnant women negatively affects the process of pregnancy and childbirth, the postpartum period, the condition of the fetus and newborn, not only in an open, but also in a hidden way, and as a result of this, it remains one of the most pressing problems today. modern obstetrics. In the article, the etiology, pathogenesis, clinical picture, diagnosis of this condition,

Iron preparations for pregnant women

One of the most common diseases of pregnancy is anemia. According to the World Health Organization, 51% of women preparing to become mothers have been identified. There are several types of anemia, but when it comes to pregnancy, it means iron deficiency anemia. It turns out that this problem is a lack of iron in the blood.

The daily iron norm for a pregnant woman is 20 mg. With daily food, our body absorbs only 2 mg. Pregnancy increases the need for iron and the problem begins.

The clinical picture of iron deficiency is similar to:

Symptoms of anemia during pregnancy

The clinical picture of iron deficiency is similar to:

- blurred;
- increased fatigue and weakness;
- shortness of breath;
- fainting;
- heartbeat.

Anemia during pregnancy is dangerous not only for the future mother, but also for the fetus. As a result, with a decrease in hemoglobin, cells do not have oxygen, cannot develop. Most often, such children are born with a delay in mental development and a violation of immune and brain function.

Your diet should be considered in advance to prevent iron deficiency during pregnancy. Add dietary vegetables (broccoli, beets, carrots), fruits (peaches, apples), red meat and iron-rich grains. But if all the symptoms of the disease are already on the surface, you should consult a specialist who will write about special Iron preparations for pregnant women.

All preparations containing iron are divided into two types: ions and non-ionic preparations. Ion iron preparations for pregnant women are indicated in the form of iron salts (gluconate, chloride, ferrous sulfate). The absorption of such compounds is carried out in a double-sided form. Passing through the gastrointestinal tract, it is absorbed into the cells of the inner intestinal shell, and then enters the bloodstream. These drugs interact with food and other medications, so they must be separated from food or other medications. Black iron

Cisternas irritate the gastric mucosa, so they can worsen nausea, heartburn, chronic stomach and liver diseases. But many modern medicines were deprived of side effects, old products were removed from production. But in any case, a pregnant woman protects the drug from its unnecessary effects and receives all the preparations that give pregnant women iron only by prescription.

Form of iron-containing preparations

Most often, the drug is prescribed in tablets, syrup or drops. Infections are very rarely used due to shock, abscesses and problems with blood coagulation. They are prescribed only in acute intestinal diseases gastric ulcer. In other cases, tablets are prescribed.

Now new drugs have appeared on the pharmacological market, there are no negative consequences of their use. Iron in pills for pregnant women is the most convenient form. They were much safer and passed constant quality checks.

Treatment with anemia as much as necessary, the amount of hemoglobin is taken after about three weeks. During pregnancy and lactation after the treatment of a pregnant woman, it is necessary to take iron-containing vitamins for pregnant women.

One of the most common diseases in pregnant women today is iron deficiency anemia. This disease negatively affects not only the woman herself, but also the fetus, and an anemic child is born from a woman with iron deficiency. Many scientists have done scientific work in the treatment and Prevention of iron deficiency anemia. Despite the fact that many iron preparations are used, the complete treatment and Prevention of this disease during pregnancy is still not completely solved

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