

Media Release

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Supplements Have an Important Role in Correcting Iron Deficiency

With about 10 per cent of young Australians found to be iron deficient, Mr Carl Gibson, chief executive of Complementary Medicines Australia (CMA), has welcomed an article published in *Australian Prescriber* encouraging iron supplementation as a part of correcting iron deficiency.¹

The article found that iron deficiency is the most common cause of anemia and that oral iron replacement is the most appropriate first-line treatment for the majority of patients.² The paper also revealed that the very young and the very old, and people with restrictive dietary patterns such as vegans, are included in at-risk groups for iron deficiency. The authors note that iron deficiency is also expected to be highly prevalent in indigenous communities.

“Iron is an essential mineral for the human body, and iron deficiency can cause serious health conditions, including exacerbation of certain diseases such as angina and cognitive impairment in children,” said Mr Gibson.

“While we all agree that it is extremely important that people obtain adequate iron from a healthy and balanced diet, there are sometimes special circumstances where demands cannot be met from foods, such as patients with restrictive diets or those with increased iron demands due to pregnancy or rapid growth. In these cases, supplementation may be necessary to correct iron deficiency,” said Mr Gibson.

“Simple iron supplementation can be of a great assistance in preventing further health conditions caused by prolonged untreated iron deficiency. As demonstrated by this article, complementary medicines can play a significant role in contributing to consumer health through primary and secondary prevention of illness,” said Mr Gibson.

The article recommends that patients be advised to take oral iron supplementation on an empty stomach since phosphates, phytates and tannates in food bind with iron and impair absorption. Patients are also advised to take iron two hours apart from the ingestion of antacids. Moreover, the article highlighted the importance of taking Vitamin C with iron for increasing absorption rates.

The article recommended liquid Iron supplementation for patients intolerant of iron tablets as it allows divided daily doses, reducing adverse effects. Since requirements vary according to individual cases, CMA strongly advocates following instructions and dosage guidance on labels, as with any medication, and seeking advice from a healthcare provider.

ENDS

¹ Baird-Gunning, J. and Bromley J.(2016), Correcting iron deficiency. Aust Prescr. doi: 10.18773

² Therapeutic Guidelines suggest ferrous sulfate at a dose of 325–650 mg daily (equivalent to 105–210 mg elemental iron).

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