

Management of Iron Deficiency Anemia in Toddlers and School-Aged Children

Dietary Modifications

Limit milk intake to <20 oz/day
Limit juice intake <4 oz/day
3 helpings of iron rich foods/day

- Advise iron intake with vitamin C rich foods
- Anticipatory guidance about constipation and dental staining
- Ferrous sulphate well tolerated by children
- Monitoring
 - CBC at 1-2 weeks
 - CBC with iron indices at 3 months
- If no response
 - Consider poor compliance
 - Use ferrous gluconate/iron polysaccharide complexes to improve intake
 - Consider malabsorption

Iron Supplementation

3-6 mg/kg of elemental iron for at least
12 weeks (3-4 months)

Indication for intravenous iron therapy

- Poor compliance despite education and trials of different sources or oral iron
- Inflammatory bowel disease
- Dependence on total parenteral nutrition
- Short bowel syndrome
- Other malabsorptive syndromes
 - Intravenous iron therapy should be considered in conjunction with pediatric hematologist or gastroenterologist