

Recommended oral iron preparations for Maternity Blood Optimisation (MBOP)

Date: ___/___/___

Dear _____

Based on your test results, it is recommended you begin taking an iron preparation with (100–200 mg / 60 mg) of elemental iron content to boost your iron levels.






Your test results:

Hb: _____ g/L

Ferritin: _____ µg/L

Test date: ___/___/___

Recommended iron preparations include:

Name	Tablet	Formulation	Elemental Iron Content	Other active ingredients	PHARMACY subsidy	Hospital Medicine List
Ferro-f-tab*		310mg Ferrous Fumurate Non-controlled release	100mg	Folic acid 300mcg	Fully subsidised	yes
Ferro-tab*		200mg Ferrous Fumurate Non-controlled release	65.7mg	nil	Fully subsidised	yes
Ferro-Liquid		Ferrous Sulphate Oral liquid	60mg/10ml	nil	Fully subsidised	yes
Ferro-gradumet		325mg Ferrous Sulphate Controlled release**	105mg	nil	Fully subsidised	yes
Ferrograd C		325mg Ferrous Sulphate Controlled release**	105mg	Ascorbic acid 500mg	no	no

* first line recommendation

**controlled release formulation not recommended due to poor absorption

- Please take one tablet of oral iron (ONCE a day / TWICE a day / on alternate days).
- Take your iron tablets on an empty stomach (at least 1 hour before or 2 hours after a meal) with water and vitamin C rich fruit, such as kiwifruit or an orange, to improve absorption and reduce constipation (a common side effect of oral iron). Taking an iron tablet before bed can be an easy time to remember.
- Eat an iron rich diet from haem (meat) and non-haem (non-meat) sources. Rich sources of haem iron include beef, lamb and fish (freshly cooked mussels are a good source of iron). Non-haem sources of iron are green leafy vegetables, tofu, beans and some cereals. Cooking in cast-iron cookware increases the iron content of food. Eating fruit after a meal also increases iron absorption from food.
- Avoid things that bind to iron, an hour or two before or after your meals, or iron tablet, such as tea, coffee, calcium or magnesium.
- You will need to have your blood tests repeated in ___ weeks, or at ___ weeks gestation to see if your iron levels are back to normal, or if you need to continue taking iron.


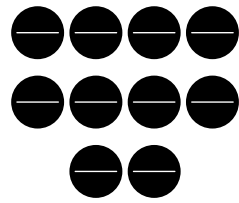
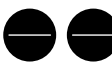
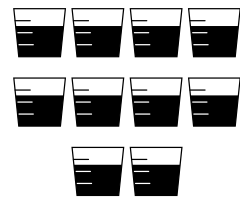
Adapted from Australian Red Cross Blood Service mytransfusion.com.au


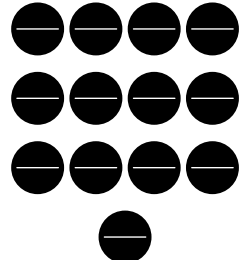

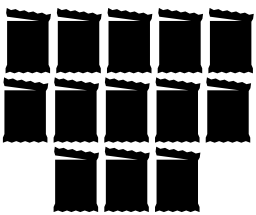
2311353 | Authorised by: Chair, Maternity Operational Group | November 2019

Canterbury
District Health Board
Te Poari Hauora o Waitaha

Recommended iron preparations include:

Number of tablets/capsules required for a daily therapeutic dose based on the recommended daily dose of elemental iron.

Ferro-f-tab	Healtheries Pregnancy and Breastfeeding Multi	Elevit Pregnancy	Floradix Iron and Herbs
1 tablet = 100mg elemental iron	1 tablet = 10mg elemental iron	1 tablet = 60 mg of elemental iron	10 mL dose = 10 mg of elemental iron
			
1 tablet	10 tablets	2 tablets	10 x 10 mL doses

Ferro-tab	Blackmores Pregnancy and Breastfeeding Gold	Thompsons organic iron	Spatone Iron+
1 tablet = 65.7mg elemental iron	1 tablet = 5 mg of elemental iron	1 tablet = 24 mg of elemental iron	1 sachet = 5 mg of elemental iron
			
1 tablet	13 tablets	3 tablets	13 sachets

Important

The information on this page is for illustration purposes only, comparing common over-the-counter (OTC) lower dose iron preparations with higher dose iron preparations

Do not take multiple doses of multivitamin tablets.