

Severe iron-deficiency anemia in Canada

Dr. Patricia Parkin became concerned about iron-deficiency anemia (IDA) after she saw several toddlers admitted to the hospital with exceptionally low hemoglobin. This motivated her to become a co-investigator of a Canadian Paediatric Surveillance Program (CPSP) study that will determine the incidence of severe IDA among otherwise healthy children between the ages of 6 and 36 months. Dr. Parkin is working in collaboration with Dr. Stanley Zlotkin, Medical Director of the Nutrition Support Program, Staff, Gastroenterology, Hepatology and Nutrition at The Hospital for Sick Children.

“On occasion, I’ve seen children hospitalized requiring blood transfusions because of IDA,” says Dr. Parkin, Director of the Research and Fellowship Program, Paediatric Medicine at The Hospital for Sick Children.

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Dr. Patricia Parkin

IDA is associated with decreased oxygen-carrying capacity of red blood cells. If acute or prolonged, this condition can lead to congestive heart failure and ultimately death. There is also good evidence that moderate anemia is associated with changes in motor and cognitive development in young children.

It is well known that IDA affects vast

numbers of poverty-stricken children and youth in Africa, Asia, Latin America and the Caribbean. However, says Dr. Parkin, “many people aren’t aware that IDA is an issue in Canada.”

Excessive consumption of cow’s milk

“Canada may not have a [widespread] problem with food security, but that



doesn’t mean there aren’t problems with nutrition,” she says. Studies have shown that children who have monotonous diets are at risk for iron deficiency, she adds.

Children who are fed too much cow’s milk in their first years of life may also be at risk of IDA. Cow’s milk, while filling, is deficient in absorbable iron.

The CPS recommends exclusive breastfeeding for six months, followed by the introduction of iron-containing complementary foods. The CPS recommends the introduction of cow’s milk after 9 months of age (between 9 and 12 months of age). These recommendations were based on the observed association between enteric loss of blood and resulting IDA, specifically in infants who received cow’s milk at an age earlier than is recommended. The CPS also notes that breastfeeding may continue up to 2 years of age. These recommendations should prevent anemia from developing in most full-term infants.

Information to help prevent IDA

The CPSP study will help to determine if the CPS recommendation on milk consumption is being followed. In addition, investigators will track the ethnicity of infants and toddlers presenting with severe IDA, determine

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the health complications of the disorder (such as the need for blood transfusion), and gather relevant demographic and medical information.

Information generated through the CPSP study will be useful for identifying risk factors and developing appropriate policy interventions.

“Severe IDA is an entirely preventable condition,” says Dr. Parkin, adding that once the burden of health and risk factors are clearly understood, it will be easier to take effective action to ensure no children in Canada suffer with severe IDA. 🌱

New CPS statements on ADHD

Routine ECG assessment of attention deficit hyperactivity disorder (ADHD) patients prior to starting medication is not supported by evidence and is not recommended, according to a joint statement issued by the Canadian Cardiovascular Society, the Canadian Paediatric Society and the Canadian Academy of Child and Adolescent Psychiatry, *Cardiac risk assessment before the use of stimulant medication in children and youth*. This does not mean that drugs to treat ADHD are without risk, particularly in children and youth with pre-existing heart disease, according to the statement. However, in those patients without clear risk factors, assessment by their paediatrician or a primary care physician is appropriate and sufficient.

The CPS has also released a statement on extended release (XR) medications, recommending that these drugs be the first choice in ADHD therapy because of their effectiveness and because they are less likely to be misused. The statement, *Extended release medications for children and adolescents with attention-deficit hyperactivity disorder*, says that XR medications can be cost prohibitive for lower-income families. The position statement calls on industry, private health insurance companies and government to work together to make XR medications more accessible to all children and youth with ADHD.

The full statements are published in the November 2009 issue of *Paediatrics & Child Health*. They are also available on the CPS website at www.cps.ca. 🌱

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