

Anemia

- Important nutrients for anemia (these may be a sign of anemia: low ferritin, hemoglobin under 10.5g/dL, hematocrit under 30%, MCV may be low or high)
- Important nutrients outside of heme iron: zinc, B12, folate, B6, choline (hello eggs! 2 per day at least)
- Are you taking antacids? May need more B12 (antacids interfere so stop taking if you can)
- Decrease RAW greens intake (such as spinach, cabbage, kale, swiss chard) and BLANCH them before eating instead to decrease oxalates.
- Difficult and maybe impossible to increase ferritin in third trimester (address before then)
- Baby absorbs 5-8mg of iron per day from mom in third trimester
- Best type of iron to absorb especially in pregnancy is HEME IRON (from meat sources)
- Vitamin C helps absorption (think peppers, citrus fruits, strawberries, broccoli, Brussel sprouts, potatoes), also marinating meat in a vinegar based marinade, adding ground meat to tomato sauce
- Need 27 mg per day in pregnancy of iron (try to get this from meat sources primarily) Amount of iron per 3 oz portion from Lily Nichols: Chicken Liver 9.9mg, Oysters 5.7mg, Beef Liver 5.6mg, Venison 3.8mg, Sardines 2.4mg, Ground Beef 2.3mg, Ground Turkey 1.7mg, Chicken Breast 0.9mg, Salmon 0.5mg.
- Cook in cast iron skillet (helps add iron to foods)
- Supplement with iron bisglycinate if needed (this is the best kind to absorb but watch for side effects such as constipation supplements affect us all differently).
- You need adequate protein, carbohydrates, and calories to make new blood cells. Just supplements aren't enough. You need a well balanced diet. Refer to the Brewer Diet for pregnancy as it ensures proper intake of calories and macronutrients.
- NORMAL pregnant values:
 - HGB 110-140g/L (11.0-14g/dL)
 - o Hct 32-36
 - o RBC 3.5-4.75
 - o WBC 10.5-20
 - o Platlets 187-300
 - o MCV 79-97
 - Ferritin 12-156
- Information compiled from Lily Nichols RDN, Sara Thomspon, and Gail Hart, midwife.