

Skeehchooash

Pequot for Grasses, Herbs, Medicines

PEQUOT PHARMACEUTICAL NETWORK • PHARMACY NEWSLETTER

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ORAL IRON SUPPLEMENTS

Oral iron supplements are commonly used to prevent and treat iron deficiency and iron-deficiency anemia. The most common products used are ferrous sulfate, ferrous fumarate, and ferrous gluconate. Contact your healthcare provider to determine the right dose for you. Adverse reactions with iron supplements are: abdominal pain/discomfort, constipation, dark stools, diarrhea, nausea/vomiting, and metallic taste.

IRON ABSORPTION & MEDICATIONS

- Iron supplements **may decrease the absorption of certain medications:** bisphosphonates, dolutegravir, entacapone, levodopa/methyldopa, levothyroxine, penicillamine, quinolones, tetracyclines
- Certain medications **may decrease the absorption of iron supplements:** calcium-, aluminum- or magnesium-containing antacids, h2-blockers, proton pump inhibitors

IRON ABSORPTION & FOOD

- Certain foods and drinks **inhibit** iron absorption (e.g., tea, coffee, milk, eggs, cheese, yogurt, spinach). Avoid these within one hour before or two hours after oral iron supplements.
- Vitamin C is added to some products to enhance iron absorption; however, most formulations do not contain enough vitamin C to significantly affect absorption; 200 mg of vitamin C (e.g., about 8 oz of orange juice) only increases absorption of 30 mg of elemental iron by about 10%
- Iron-rich foods can be used to increase iron levels. These include: red meat, pork, poultry, seafood, beans, dried fruits (e.g., raisins, apricots), iron-fortified foods (e.g., cereals, breads, pasta).

Tips on Taking Iron Supplements

- Taking iron on an empty stomach maximizes absorption; however, taking with food reduces gastrointestinal adverse effects
- Separate the administration of iron from antacids by as much time as possible.
- Absorption of sustained-release or enteric-coated products may be reduced compared to immediate-release products.
- Consider these strategies to reduce adverse gastrointestinal effects:
 - Start with a low dose and increase gradually over four or five days to a therapeutic dose.
 - Switch to a product with less elemental iron.
 - Switch to a liquid formulation in order to allow for smaller increases in dose. Mix liquid iron formulations with water or juice to decrease risk of tooth staining.

Iron safety

- Keep out of sight and reach of children to avoid accidental ingestion/overdose.
- Ask your healthcare provider if taking iron is right for you. Always follow up with your provider for lab work to check hemoglobin and iron stores to help determine if dosage changes are needed.

<https://pharmacist.therapeuticresearch.com/Content/Segments/PRL/2008/Aug/Oral-Iron-Supplements-Comparison-and-Practical-Considerations-for-Use-1076>

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