RECOMMENDATIONS FOR PEOPLE WITH ANAEMIA AND THEIR CARERS

- Be aware that anaemia is common, treatments are possible and that addressing anaemia may reduce postoperative complications.
- Be aware that there are many causes for anaemia. You are likely to have tests to discover the type of anaemia. Your surgery may be delayed for investigation or treatment of anaemia.
- Many people have anaemia due to low intake of essential nutrients.
 Please try to

improve this:

- Iron is found in: red meat, beans and nuts
- B12 is found in: meat, fish, cheese or eggs
- Folate is found in: green leafy vegetables, broccoli, brussel sprouts, asparagus, peas, chickpeas, brown rice and liver.
- Be aware that some patients are treated with blood products and your medical team may discuss this with you.
- Prepare for surgery or other treatment in good time. This may include:
 - increasing your physical activity/exercise, stopping smoking, preparing psychologically and practically. These interventions are proven to improve outcomes from surgery. There is more information on <u>cpoc.org.uk/patients</u>.
 Exercise should include: fitness, strength and balance – try sit-to-stand exercises.
- There are often different ways of investigating or treating anaemia. Patients are encouraged to ask questions, eg BRAN: 'what are the Benefits, Risks, Alternatives and what if Nothing is done'. Work out what matters to you. This is Shared Decision Making.
- If you are given oral iron:
 - note that the dose for treating anaemia is several times higher than for health supplements
 - it is best to take iron tablets on an empty stomach (ie one hour before or two hours after eating). Absorption can reduce by up 75% if taken with food
 - taking iron tablets with vitamin C does not seem to increase absorption⁵
 - taking iron tablets on alternate days will improve iron absorption and may minimise side effects
 - avoid taking iron with tea or with phytates (found in beans, seeds, nuts or grains) as this limits absorption
 - if you get diarrhoea or constipation, try taking iron on alternate days
 - if side effects are bad, ask the perioperative team if there is another treatment option.

Detailed explanations about reducing the reliance on blood transfusion

Iron deficiency in pregnancy – a matter of public health For patients: High Spec Blood



BRAN









Iron in your diet (NHS BT)



Anaemia Patient Information (NHS BT)



BRAN leaflet (CWUK)