

This treatment table accompanies the Iron Deficiency Anemia Bottom Line Recommendations, a short summary of the latest knowledge related to the diagnosis and management of iron deficiency anemia.

	FORMULATION & SUPPLIED	DOSE	CONSIDERATIONS
ORAL IRON	<b>Ferrous sulfate</b> <i>(most commonly used pediatric iron formulation)</i> Tablet: 300 mg (60 mg elemental iron) Suspension: 30 mg/mL (6 mg elemental iron/mL) Drops: 75 mg/mL (15 mg elemental iron/mL)	<b>3 – 6 mg elemental iron/kg/day</b> <b>PO divided in 1 – 3 doses</b>  Usual MAX: 60 mg elemental iron/dose PO tid	Lower (3 mg elemental iron/kg) doses are effective in young children. <sup>7</sup>  Alternate-day dosing in adolescents may increase adherence and decrease side effects. <sup>8</sup>  Side effects: GI upset, dark stools, constipation. Liquid preparations may stain teeth.
	<b>Ferrous fumarate</b> Tablet: 300 mg (100 mg elemental iron) Suspension: 60 mg/mL (20 mg elemental iron/mL)	Same as sulfate above. Usual MAX: 100 mg elemental iron/dose PO bid	Time to Hb response (by at least 10 g/L): 2 weeks  Max doses vary slightly depending on formulation for ease of dosing.
	<b>Ferrous gluconate</b> Tablet: 300 mg (35 mg elemental iron)	Same as sulfate above. Usual MAX: 70 mg elemental iron/dose PO tid	
	<b>Polysaccharide-iron complex (PIC)</b> Capsule: 150 mg (150 mg elemental iron) Powder: 60 mg/5 mL (60 mg elemental iron/5 mL)	Same as sulfate above. Usual MAX: - Capsule: 150 mg elemental iron/dose PO once daily - Powder: 60 mg elemental iron/dose PO tid	
INTRAVENOUS IRON	<b>Iron sucrose (Venofer®)</b> Injection: 20 mg elemental iron/mL	7 mg elemental iron/kg/dose IV MAX: 300 mg elemental iron/dose	
	<b>Iron isomaltoside (Monoferric®)</b> Injection: 100 mg elemental iron/mL	20 mg elemental iron/kg/dose IV MAX: 1000 mg elemental iron/dose Dosing based on expert opinion. Has been used in ages 2 years and older.	
TRANSFUSION	<b>Packed RBCs</b>	5 mL/kg aliquots IV over 2-4 hrs Assess for symptom resolution and signs of fluid overload.	Side effects: alloimmunization, anaphylaxis, TACO, infection, hemolysis. Time to Hb response (by at least 10 g/L): immediate when 10 mL/kg given.

Scan or click the QR code to learn more and to see a full list of references and development team members



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