

## Task force concludes that evidence is lacking for iron deficiency screening in pregnancy

February 27 2024, by Elana Gotkine



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The U.S. Preventive Services Task Force concludes there is currently insufficient evidence regarding screening and supplementation for iron deficiency anemia (IDA) during pregnancy. These findings form the basis of a <u>draft recommendation statement</u> published online Feb. 27.



Amy Cantor, M.D., M.P.H., from the Pacific Northwest Evidence-Based Practice Center at the Oregon Health & Science University in Portland, and colleagues conducted a <u>systematic review</u> on screening and supplementation for IDA and ID without anemia in pregnancy. Seventeen trials of routine maternal iron supplementation that reported outcomes for pregnant persons and infants were included in the review.

The researchers found that compared with placebo, prenatal iron supplementation resulted in no differences in maternal quality of life, rates of gestational diabetes, or rates of maternal hemorrhage. Maternal iron supplementation also had no effect on rates of hypertensive disorders of pregnancy, cesarean delivery, <u>preterm birth</u>, infant low birth weight, or infants small for gestational age. No studies examined the benefits or harms of screening for ID or IDA during pregnancy.

Based on these findings, the USPSTF concludes that the current evidence is insufficient for assessing the balance of benefits and harms of screening asymptomatic pregnant adolescents and adults for ID and IDA to prevent adverse maternal and infant health outcomes (I statement). Furthermore, the evidence is insufficient for assessing the balance of benefits and harms of routine iron supplementation in pregnancy for preventing adverse maternal and infant health outcomes (I statement).

The draft recommendation statement and evidence review have been posted for public comment. Comments can be submitted from Feb. 27 through March 25.

More information: <u>Draft Evidence Review</u>

<u>Draft Recommendation Statement</u>

Comment on Recommendation Statement



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