ANAEMIA

Compiler by

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IMPORTANT

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Introduction

Anaemia is a shortage of the oxygen-carrying pigment (haemoglobin) in red blood cells. This condition may be the result of the body losing too much haemoglobin, or the body manufacturing insufficient amounts of haemoglobin:

- lack of iron in the diet
- blood loss
- chronic illness
- a genetic or acquired disease or defect
- a side effect of medication
- Menstruation
- Pregnancy and breastfeeding
- Elderly, children with poor diets
- Alcohol excess
- Iron, folic acid, vitamin B12 deficiencies
- Malabsorption syndromes (e.g. coeliac disease, Crohn's disease)
- Chronic disease states (e.g. rheumatoid arthritis, inflammatory bowel disease, kidney failure, cancer)
- Inherited anomalies (e.g. thalassemia)
- Gastrointestinal blood loss (e.g. ulcers, aspirin-like drugs, cancer, parasites)
- Overt blood loss (e.g. after surgery or regular blood donations)
- Oxidant drugs (e.g. antibiotics, antimalarials, analgesics, chemotherapy agents)
There are many different types of anaemia which can be distinguished by the shape and size of the red blood cell under the microscope.

These include:

- Iron-deficiency anaemia, anaemia of chronic disease, thalassaemia
- Pernicious anaemia (vitamin B12 deficiency), folic acid deficiency-induced anaemia, myelodysplastic anemias (from cancer chemotherapy), anaemia of liver disease (e.g. alcoholism)
- Anaemia of acute blood loss, sickle-cell anaemia, anaemias related to kidney failure and bone marrow disease.

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Symptoms

Symptoms include:

- Fainting
- Weakness
- Fatigue
- Headache
- Lethargy
- Paleness
- Breathlessness.
- Palpitations and angina
- Increased frequency of infections
- Pica (cravings for strange foods or substances such as chalk or dirt)
- Koilonychia (thin, concave nails)
- Sore, swollen, cracked tongue, cracked lips

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Tissue Salts

Calc Phos (2), Ferrum Phos (4), (Optional Kali Phos (6)) - 4 x tabs of each, every 2 hours

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Dietary Supplements

For iron-deficiency anaemia, chelated iron is the most readily absorbed.

Organic iron exists in the following compounds:

- Ferrous Gluconate
- Ferrous Fumarate
- Ferrous Citrate
- Ferrous Peptonate
Avoid the inorganic preparation, Ferrous Sulphate, which can destroy Vit E.

Dosage

300 mg, 3 x daily of a chelated iron preparation

Also take the following supplements:

- Vit C, 1,000 mg of, 2 x Daily
- B-Complex, 100 mg, daily
- Folic Acid, 400 micrograms (0.4 mg), daily

Sickle Cell anaemia sometimes responds to 400 iu, Vit E, daily

Diet

Cut out, or at least cut back on, Sugar, Alcohol, and Caffeine.

A good diet for the treatment of iron-deficiency anaemia would include some of the following iron-rich foods:

- Pork-liver
- Beef-kidney
- Heart
- Liver
- Egg-yokes
- Oysters
- Raw Clams
- Nuts, esp:
  - Pistachios
  - Pecans
  - Almonds
- Beans
- Soybeans
- Asparagus
- Molasses
- Oatmeal
- Dried Peaches
- Barley
- Oats
- Peas
- Seeds, esp:
- Sesame seeds
- Sunflower seeds
- Vegetables, esp:
  - Leafy Green Vegetables
  - Swiss Chard
  - Kale

A diet for someone with pernicious anaemia (due to dietary deficiency, not lack of intrinsic factor) would include?

- *Liver
- *Kidney
- *Eggs
- *Milk
- *Cheese

Note: *All these are sources of Vit B12

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**Raw Juice Therapy**

Fresh spinach juice, mixed with carrot, nettle, and a little horse radish - 250 ml, 4 x daily.

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**Other**

Molasses taken as a supplement is also therapeutic as it contains riboflavin, pyridoxine, and iron - take 1 x dessertspoon, 2 x daily.

Also Pollen, taken in high-potency form is reported to help anaemia.

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