

## **MALNUTRITION IN PEDIATRIC AGE MAIN CAUSE FOR IRON DEFICIENCY ANEMIA**

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### **Abstract**

Malnutrition especially in the pediatric age 5 years by not feeding children with adequate food products such as meat juices, eggs and meat and dairy products and vegetables cause anemia with decrease of hemoglobin or iron deficiency anemia. The presence of this anemia in varying degrees especially when hemoglobin is below 10 g is a factor of risk for not raising the child and their lack of resistance, especially the sickness often their respiratory tract infections, gastrointestinal infections, etc. especially for children under 4 -5 years.

**Key words:** *Malnutrition, iron deficiency anemia, bronchopneumonia*

### **Introduction**

Hypochrome anemia or iron deficit is among the most prevalent in world. It affects more children from lack of food or malnutrition and this is more pronounced in poor countries and developing dominated by low socio-economic level and a lack of community culture. In developing countries anemia from iron deficit has a prevalence that ranges up to 60 % while in developed countries fluctuates below 15 %. Our country ranks in developing countries and is among the countries with low level of socio - economic. The presence of iron deficiency anemia is responsible for underdevelopment and delay the growth of children and reduce the resistance of these children and that is associated with often sickness. Despite increasing development and socio- economic level of our country phenomenon malnutrition is a major problem especially under the age of 2 years where children eat more saturated foods, carbohydrates, liquids such as Ivi or Suko and with very little animal protein foods. According to various studies, it is among the main causes of Iron Deficiency Anemia in children of our country.

### **Aim of study/research**

The goals of the study are the evaluation of the performance of the Iron Deficiency Anemia morbidity, study the cases of Iron Deficiency Anemia and connection of this anemia with the way of nutrition.

## Scientific methods

During our retrospective study over a period of 2 years were analyzed and studied all admissions made in Elbasan pediatrics. From all admissions are studied cases with various pathologies that had anemia with hemoglobin below 10 g / dl and associated with reduction of sideremia. Cases with anemia hypochrome have been studied following epidemiological criteria as age, ways of feeding, township, number of admissions, infections that have gone etc.

## Findings

In total there were 2896 hospitalized children with various diseases such as respiratory, digestive tract infections and viruses etc. From all hospitalized cases with pathologies, the cases of iron deficiency anemia are 1,186 with a prevalence 40.8% .

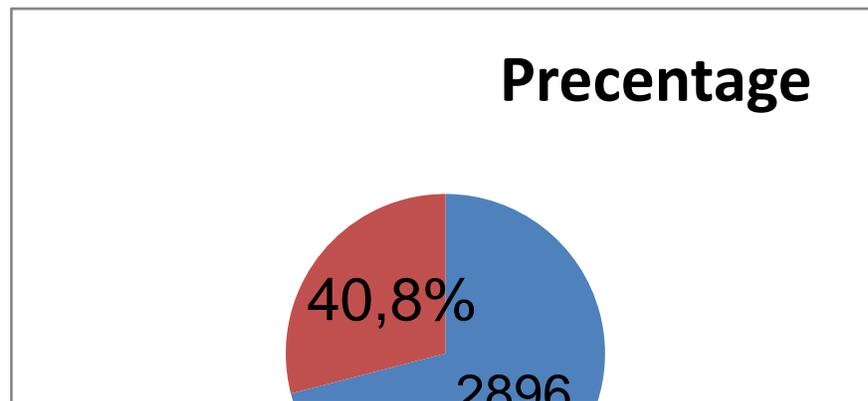


Figure 1. Cases of anemia associated with hypochrome

Our survey that was done with parents who have had children breast fed or food artificial showed that over 70% of them indicated that they have been fed with artificial milk until the end of the first year of life and 50% of children with artificial food were fed with cow milk in village.

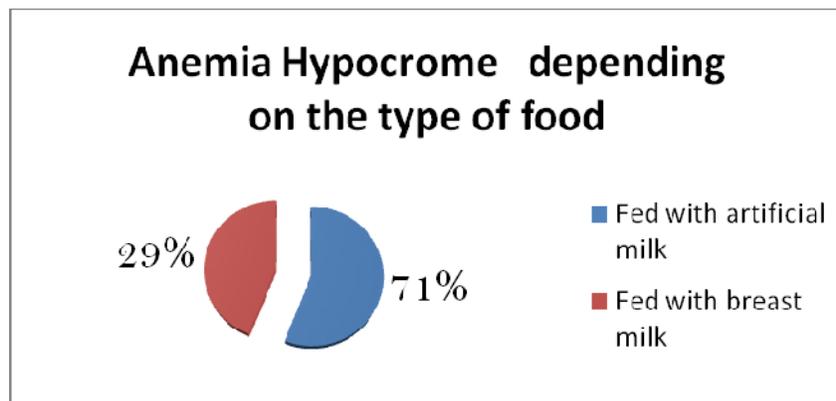


Figure 2. Cases of iron deficiency anemia depending on the type Food

Another important result is that 65% of paved cases that had iron deficiency anemia were from rural areas and had more denominated figures of anemia.

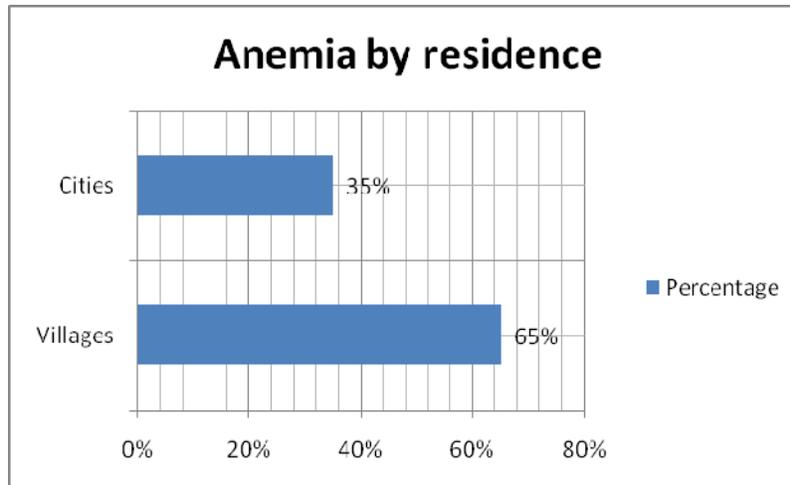


Figure 3. Anemia by residence

In our study emerges that frequent diseases in pediatric age respiratory tract infections and disorders of the gastro- intestinal tract, virosis and urinary tract infections are associated with iron deficiency anemia where hemoglobin is below 10 g / dl. (Bekteshi, 1974), (Bebeci 2006). In this paper the resulting that iron deficiency anemia has a prevalence up to 40.8 %. Comparing the extent that this anemia in developed countries and higher welfare prevalence of iron deficiency anemia varies between 13-15 % while in the underdeveloped countries and ranges up to 55 %. Regarding the extension of the age group it is found that anemia on ages 0-1 years and 1-4 years constitute the majority with 39 and 28 % (6). This is more than explainable that children aged under 4 years and especially under one year have expressed initially malnutrition of pregnant mothers who during pregnancy and especially in the last 3 months of pregnancy not take iron preparations and vitamins to meet the needs of iron and other elements for the next fetus . Another reason for the cause of Iron Deficiency Anemia is malnutrition. Small children not receiving appropriate values even in the rural areas continue to feed on cow milk and porridge with starch. We have study results in patients who have been fed with artificial food 71% of all children with iron deficiency, where 50% are fed with cow milk. By studying anemia depending on residence conclude that cases coming from rural areas already occupied 65%.This is an indication that anemia is caused mainly by malnutrition of premature children (Rasmussen, 2001) and other factors like diarrhea extended, parasite etc.. Our practice is concluded that repeated instances of our admissions service with pulmonary or gastrointestinal disease and anemia have been hypcrome with hemoglobin in 8-9GR dl.

## Conclusions

Our data clearly showed that Iron Deficiency Anemia is a factor of risk for the most frequent pathologies in pediatric age are diseases of the respiratory system followed by diseases and gastro-intestinal disorders. The prevalence of Iron Deficiency Anemia is up to 40.8%. More affected ages from Iron Deficiency Anemia are 0-1 year's old age group, followed by 1-4 years of age and children with food artificial occupy 71%. In our study was found that Iron Deficiency Anemia is expressed in children in rural areas to 65%.

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