

## **The Missed Opportunities to Diagnose and Treat Iron Deficiency in Patients Hospitalized with Heart Failure**

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### **Introduction:**

Iron Deficiency (ID) is common in heart failure (HF), and is an independent contributor to mortality and morbidity.

We examined whether patients with previously known HF who were recently hospitalized, had previous treatment for ID, were investigated for it at the time of hospitalization, and, if ID was found, were prescribed iron on discharge.

### **Methods:**

We examined the records of 76 consecutive patients admitted to our hospital medical wards with a primary diagnosis of HF.

### **Results:**

Anemia (Hb <12g /dl) was found in 42/76 patients (55.3%). In 55/76 patients (72.4%) there was no iron workup, in 6 (7.9%) an incomplete iron workup with serum iron, transferrin or ferritin lacking and in 15/76 (19.7%) a complete iron workup.

If ID was defined as either a serum ferritin of <100ug/l or a serum ferritin of 100-299 ug/l and a %Transferrin Saturation of <20% it was found in 12/15 (80%) of those with a complete workup; in 9 of 10 (90%) of the anemic patients and in 3 of 5 (60%) of those non-anemic patients.

At discharge 11/15 (73.3%) of those with a complete iron workup were given iron, 10 orally and 1 IV. In those 6 with an incomplete workup 2 were started on oral iron (33.3%) and in those without any workup, 1 of 55 (1.8%) was given oral iron.

### **Conclusions:**

ID is common in hospitalized HF patients but is usually not sought after by physicians at the time of admission. However if detected the physicians usually treated it.