

Screening for Iron Deficiency Anemia in Young Children

The U.S. Preventive Services Task Force (Task Force) has issued a **final recommendation statement** on *Screening for Iron Deficiency Anemia in Young Children*.

This final recommendation statement applies to children ages 6 months to 2 years old who do not have signs or symptoms of iron deficiency or iron deficiency anemia (IDA). It does not apply to younger or older children, children who may have symptoms of anemia, children who are malnourished, or

children who were born early or who were born with a low birth weight.

The Task Force reviewed research studies on routine screening for IDA in young children. The final recommendation statement summarizes what the Task Force learned about its potential benefits and harms: Based on available evidence, there is not enough information to recommend for or against it.

What is iron deficiency anemia?

Iron deficiency anemia is a condition in which the body does not have enough iron to build healthy red blood cells. Red blood cells are needed to carry oxygen throughout the body.

Facts about Iron Deficiency Anemia

Iron plays an important role in keeping a person healthy. Red blood cells need iron to be able to carry oxygen throughout the body. Most people get enough iron from a healthy diet.

At certain times—such as during infancy and early childhood, when children are growing rapidly—the body needs more iron than usual. Often, the body can get the extra iron it needs by increasing the amount of iron absorbed from food or a child's diet can be changed to include more iron-rich foods.

IDA happens when the body does not have enough iron and blood cannot carry oxygen throughout the body as efficiently.

Several factors may increase the chances that an infant or young child may develop IDA. These include:

- Being born early or with low birth weight
- Not having iron-rich foods added to their diet after 6 months of age, especially if they are not receiving formula containing added iron
- Drinking cow's milk or formula without added iron during the first year of life

Screening for Iron Deficiency Anemia in Young Children

The goal of screening young children is to detect IDA so it can be treated. Screening is generally done with a blood test. If IDA is found, it is often recommended that a child be given more iron-rich foods or liquid iron supplements.

The Task Force looked for evidence on how screening for IDA in young children with no symptoms affects long-term health outcomes, such as growth or mental or physical function. They did not find any studies to help them understand if routine screening would improve these outcomes in children ages 6 months to 2 years in the U.S. The Task Force also found no studies on the harms of routine IDA screening.

The Final Recommendation on Screening for Iron Deficiency Anemia in Young Children: What Does It Mean?

Here is the Task Force's final recommendation on routine screening for IDA in young children. Recommendation statements have letter grades. The grades are based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When there is not enough evidence to weigh benefits and harms, the Task Force does not make a recommendation for or against—it issues an **I Statement**. The Notes explain key ideas.

Visit the Task Force Web site to read the full [final recommendation statement](#). The statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence document](#) provides more detail about the studies the Task Force reviewed.

1 The Task Force concludes that the *current evidence is insufficient* to assess the balance of benefits and harms of *screening for iron deficiency anemia* in children 6 to 24 months. **I Statement**

Notes

1 *current evidence is insufficient*
The Task Force did not find enough information to make a recommendation for or against IDA screening in this population.
screening for iron deficiency anemia
Ordering a blood test to determine if a child is likely to have IDA.

Should Your Child be Screened for Iron Deficiency Anemia?

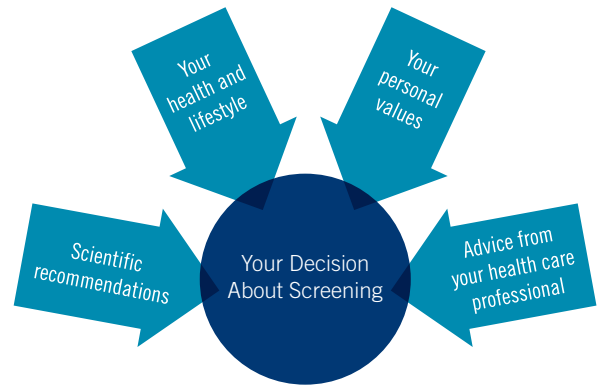
Getting the best health care means making smart decisions about what screening tests, counseling services, and preventive medicines to get and when to get them. Many people don't get the tests or counseling they need. Others get tests or counseling they don't need or that may be harmful to them.

Task Force recommendations can help you learn about screening tests, counseling services, and preventive medicines. These services can keep you healthy and prevent disease. The Task Force recommendations do not cover diagnosis (tests to find out why you are sick) or treatment of disease. Task Force recommendations also apply to some groups but not others. For example, this recommendation applies only to infants and children ages 6 months to 2 years old.

Deciding Whether Your Child Should Be Screened for Iron Deficiency Anemia

Eating a healthy diet that contains iron-rich foods can help prevent iron deficiency.

If you are concerned about your child’s diet or that your child may be at risk for IDA, talk with your doctor or nurse about your concerns. In deciding whether your child should be screened for IDA, consider your family’s health and lifestyle. Think about your personal beliefs and preferences for health care. And consider scientific recommendations, like this one from the Task Force.





What is the U.S. Preventive Services Task Force?

The Task Force is an independent, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the **final recommendation statement**. To learn more, visit the [Task Force Web site](#).

Click Here to Learn More About Iron Deficiency Anemia

-  **Iron-Deficiency Anemia**
(National Heart, Lung, and Blood Institute, National Institutes of Health)
-  **Anemia Caused by Low Iron—Children**
(MedlinePlus)

USPSTF Recommendation Grades	
Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient’s situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.