

ALMOST 42 % OF ALL PREGNANT WOMEN WORLDWIDE ARE THOUGHT TO BE IRON DEFICIENT²²

Children in the first 5 years of life are especially vulnerable to iron deficiency²

Almost 42 % of South African children are iron deficient²³

Globally, 47 % of children under 5 years are anaemic²⁴

WHO 1993-2005 study

50 % of anaemia cases are due to iron deficiency²⁴



Iron 50 mg per 5 ml syrup
Iron 100 mg per D.S. chewable tablet
Iron 50 mg & folic acid 150 µg per capsule

Ferrimed
Iron polymaltose

TAKE CONTROL OF YOUR IRON WITH FERRIMED® S.A.'S #1 PRESCRIBED IRON TREATMENT^{8,25-28}

- Formulated to not overload the iron transport system and therefore it has a favourable side effect profile²⁷
- Is clinically proven to be effective in correcting iron levels, with fewer and milder side effects compared to ferrous iron supplements²⁵⁻²⁸



IF YOU ARE IRON DEFICIENT SPEAK TO YOUR PHARMACIST ABOUT FERRIMED®.

Available without a prescription.

Iron deficiency needs to be confirmed by laboratory tests

References: 1. Mayo Clinic. Iron deficiency anemia. [Serial online] 2016 [cited 2021 Feb 12]. Available from: <https://www.mayoclinic.org/diseases-conditions/iron-deficiency-anemia/symptoms-causes/syc-20355034?pg=1>. 2. World Health Organisation. Iron deficiency anaemia. Assessment, prevention and control. [Serial online] 2001 [cited 2017 Aug 1]. Available from: http://www.who.int/nutrition/publications/micronutrients/anaemia_iron_deficiency/WHO_NHD_01.3/en/. 3. Peeling P, Dawson B, Goodman C, et al. Athletic induced iron deficiency: new insights into the role of inflammation, cytokines and hormones. *Eur J Appl Physiol*. 2008;**103**:381-391. 4. Auerbach M, Adamson JW. How we diagnose and treat iron deficiency anemia. *Am J Hematol*. 2016;**91**(1):31-38. 5. Scully C, Shotts R. ABC of oral health: Mouth ulcers and other causes of orofacial soreness and pain. *BMJ*. 2000;**321**(7254):162-165. 6. Radlowski EC, Johnson RM. Perinatal iron deficiency and neurocognitive development. *Front Hum Neurosci*. 2013;**7**:1-11. 7. Cashman MW, Sloan SB. Nutrition and nail disease. *Clin Dermatol*. 2010;**28**(4):420-425. 8. Ferrimed® Impact Rx. Jan 2021. 9. Phatlhane DV, Zemlin AE, Matsha TE, Hoffman M, Naidoo N, Ichihara K, et al. The iron status of a healthy South African adult population. *Clinica Chimica Acta*. 2016;**460**:240-245. 10. UCSF Health. Hemoglobin and Functions of Iron. [Serial online] [cited 15 Mar 2021]. Available from: <https://www.ucsfhealth.org/education/hemoglobin-and-functions-of-iron?pg=1>. 11. Pourcelot E, Lénon M, Mobilia N, Cahn J-Y, Arnaud J, Fanchon E, et al. Iron for proliferation of cell lines and hematopoietic progenitors: Nailing down the intracellular functional iron concentration. *Biochimica et Biophysica Acta*. 2015;**1853**:1596-1605. 12. Abbaspour N, Hurrell R, Kelishadi R. Review on iron and its importance for human health. *J Res Med Sci*. 2014;**19**(2):164-174. 13. Breymann C. Iron deficiency anemia in pregnancy. *Expert Rev Obstet Gynecol*. 2013;**8**(6):587-596. 14. Millman N. Postpartum anemia: definition, prevalence, causes, and consequences. *Ann Hematol*. 2011;**90**:1247-1253. 15. Tussing-Humphreys L, Putacioglu C, Nemeth E, et al. Rethinking iron regulation and assessment in iron deficiency, anemia of chronic disease, and obesity. *Introducing hepcidin*. *J Acad Nutr Diet*. 2012;**112**(3):391-400. 16. World Health Organization. Preventing and controlling iron deficiency anaemia through primary health care - A guide for health administrators and programme managers. [Serial online] 2001 [2021 Feb 17]. Available from: <https://apps.who.int/iris/handle/10665/99849>. 17. Miller JL. Iron deficiency anemia: a common and curable disease. *Cold Spring Harb Perspect Med*. 2013;**3**(7):1-13. 18. Short MW, Domagalski JE. Iron deficiency anemia: evaluation and management. *Am Fam Physician*. 2013;**87**(2):98-104. 19. Pavord S, Myers B, Robinson S, Allard S, Strong J, Oppenheimer C on behalf of the British Committee for Standards in Haematology. UK guidelines on the management of iron deficiency in pregnancy. *Br J Haematol*. 2012;**155**:588-600. 20. Ning S, Zeller MP. Management of iron deficiency. *Hematology Am Soc Educ Program*. 2019;**2019**(1):215-222. 21. Aili N, Vaughan J, Patel M. Anaemia: Approach to diagnosis. *S Afr Med J*. 2017;**107**(1):23-27. 22. Pasricha SR. Anaemia in Pregnancy - Not Just Iron Deficiency. *Acta Haematol*. 2013;**130**:279-280. 23. Muriuki JM, Mentzer AJ, Webb EL, Morovat A, Kimita W, Ndungu FM, et al. Estimating the burden of iron deficiency among African children. *BMC Medicine*. 2020;**18**(3):1-14. 24. de Benoist B, McLean E, Egli I, Cogswell M. Worldwide prevalence of anaemia 1995-2005. WHO Global Database on Anaemia. [serial online] 1995-2005 [2021 June 2]. Available from: https://www.who.int/nutrition/publications/micronutrients/anaemia_iron_deficiency/9789241596657/en/. 25. Geisser P. Safety and efficacy of iron (III)-hydroxide Polymaltose Complex. *Arzneimittel-Forschung*. 2007;**57**(6a):439-452. 26. Ortiz R, Tobili JE, Romero JD, Monterrosa B, Frer C, Macagno E, et al. Efficacy and safety of oral iron (III) polymaltose complex versus ferrous sulfate in pregnant women with iron-deficiency anemia: a multicenter, randomized, controlled study. *J Matern Fetal Neonatal Med*. 2011;**24**(11):1347-1352. 27. Vaea B, Agaghi L, Unuvar E. Efficacy, Tolerability and Acceptability of Iron Hydroxide Polymaltose Complex versus Ferrous Sulfate: A Randomized Trial in Pediatric Patients with Iron Deficiency Anemia. *Int J Pediatr*. 2011. Article ID 524520. doi:10.1155/2011/524520. 28. Borbolla JR, Cicero RE, Dibildox MM, Sotres DR, Gutiérrez RG. Iron hydroxide polymaltose complex vs iron sulphate in the treatment of iron deficiency anaemia in infants. *Rev Mexicana de Pediatr*. 2000;**57**(2):63-67.

[1] FERRIMED® Syrup. Ref. No.: H842 (Act 101 of 1965). Each 5 ml contains 50 mg elemental iron as iron (III)-hydroxide polymaltose complex. [2] FERRIMED® Capsules. Ref. No.: H840 (Act 101 of 1965). Each capsule contains 50 mg elemental iron as iron (III)-hydroxide polymaltose complex and 150 µg folic acid. [3] FERRIMED® D.S. Chewable Tablets. Ref. No.: L/8/3/201. Each tablet contains 100 mg elemental iron as iron (III)-hydroxide polymaltose complex. Trademarks are owned by or licensed to the Aspen Group of companies. © 2021 Aspen Group of companies or its licensor. All rights reserved. Pharmicare Limited. Co. Reg. No.: 1898/000252/06. Healthcare Park, Woodlands Drive, Woodmead, 2191. ZAR-IFF-02-21-00002 07/2021



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ARE YOU EXPERIENCING ANY OF THE FOLLOWING SIGNS OR SYMPTOMS?



Shortness of breath¹



Cold intolerance²



Unusual cravings for non-food items such as dirt and ice¹



Decreased exercise performance³



Restless leg syndrome⁴



Paleness¹



Ulcers in your mouth⁵



Hair loss⁴



Dizziness, irritability and loss of concentration^{1,6}



Fatigue^{1,4}



Headaches¹



Brittle or spoon-shaped nails^{4,7}

Speak to your doctor. Iron deficiency needs to be diagnosed by a blood test. If you experience any of these signs or symptoms you may be suffering from iron deficiency (ID)

FERRIMED® - S.A.'S #1 PRESCRIBED IRON TREATMENT⁸

Iron 50 mg per 5 ml syrup
Iron 100 mg per D.S. chewable tablet
Iron 50 mg & folic acid 150 µg per capsule

Ferrimed
Iron polymaltose

1 IN 2 SOUTH AFRICAN WOMEN ARE IRON DEFICIENT⁹

A lack of iron could leave you feeling tired

Your body needs iron to produce a substance called haemoglobin.¹⁰ Haemoglobin is formed in your red blood cells and carries oxygen to your organs.¹¹ If your body has a lack of oxygen, you can feel tired and out of breath.^{1,5} Iron is also important for the production of energy in cells and as a component of enzymes.⁹⁻¹¹

Causes of iron deficiency (ID) include:

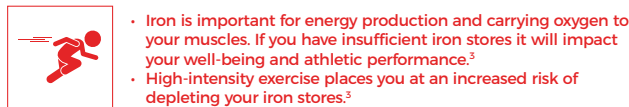


If you fall within any of these groups, you may be iron deficient

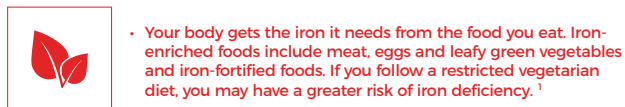
Women of reproductive age



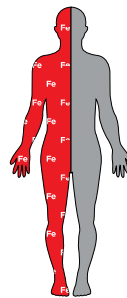
People living active lifestyles



Lack of iron in diet

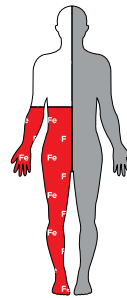


WHAT IS THE DIFFERENCE BETWEEN IRON DEFICIENCY AND IRON DEFICIENCY ANAEMIA?



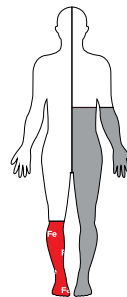
Normal
Iron stores full
Haemoglobin levels normal

Fe Iron stores
Hb Haemoglobin levels



Iron deficiency
When your body does not have enough iron to meet its daily needs and it starts using its iron stores.^{15,16}
Iron stores low
Haemoglobin levels normal

Fe Iron stores
Hb Haemoglobin levels



Iron deficiency anaemia
When your body's iron stores are depleted and your body is unable to produce the haemoglobin that carries oxygen to the rest of your body.^{15,17}
Iron stores depleted
Haemoglobin levels low

Fe Iron stores
Hb Haemoglobin levels

adapted from Tussing-Humphreys, et al.

Iron deficiency can cause symptoms and impair quality of life, even when fully developed anaemia is not yet present.⁴

TREATMENT VS. SUPPLEMENT IN THE MANAGEMENT OF IRON DEFICIENCY AND IRON DEFICIENCY ANAEMIA

The underlying cause of ID and IDA should be treated to prevent further iron loss.

*Guidelines recommend a dose of 100 - 200 mg elemental iron daily for the treatment of iron deficiency and iron deficiency anaemia*¹⁸⁻²¹

Supplements contain 24 mg or less of elemental iron



Ferrimed® Capsules

- Sugar-free 50 mg elemental iron as iron(III)-hydroxide polymaltose complex and 150 µg folic acid



Ferrimed® D.S. Chewable Tablets

- Sugar free 100 mg elemental iron as iron(III)-hydroxide polymaltose complex



Ferrimed® Syrup

- Each 5 ml contains 50 mg elemental iron as iron(III)-hydroxide polymaltose complex

Suitable for:

- Low birth weight infants
- Infants and children ≤ 12 years
- Adults who cannot tolerate capsules or tablets

*A review of US, UK, Canada and SA Guidelines

Speak to your healthcare provider about Ferrimed® - S.A.'s #1 prescribed iron treatment.⁸

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Iron polymaltose