Appendix C: Algorithm for investigation of iron deficiency in non-anemic adults

This Appendix is a supplement to the BC Guideline Iron Deficiency – Investigation and Management.

This algorithm does not address patients with active inflammation, infection or chronic conditions. Refer to page 4.

Ferritin values occur on a continuum. Cut-offs are suggested and clinical interpretation is required. The likelihood of iron deficiency increases with lower ferritin concentrations, including those that overlap with the normal reference interval. The normal reference interval is derived from healthy outpatients without signs of iron deficiency or chronic illness.

*Iron replacement therapy should begin as soon as iron deficiency is detected, whether or not anemia is also present. The exception is: patients with microcytic anemia should not be given iron supplements until iron deficiency is confirmed by testing ferritin. Low MCV in the setting of normal ferritin may indicate hemoglobinopathies such as thalassemia. Long term iron therapy is harmful for these patients.