

iron disorders...

include any condition of Iron-Out-of-Balance™ or a state of abnormal iron levels. Iron Disorders Institute (IDI) specializes in the detection and management of iron levels, not the diseases and conditions of the heart, liver, pancreas, bones & joints and endocrine system that can result from iron imbalances. IDI provides diagnostic algorithms and clinical evaluation and management guidelines for physicians and patients covering hereditary hemochromatosis, dysmetabolic iron overload syndrome, African siderosis, acquired and transfusional iron overload; and for iron deficiency with or without anemia, iron avidity and anemia of inflammatory response.

hereditary hemochromatosis (HHC–type 1)...



...is an inherited metabolic disorder. Most at risk are adult white women who do not menstruate or men. HHC is more prominent among people of Scottish or Irish descent. With HHC, excess iron is absorbed from the diet. If allowed to accumulate, the excess iron damages vital

organs resulting in chronic diseases such as diabetes mellitus, osteo-arthritis, osteoporosis, cirrhosis, liver cancer, hypothyroidism, hypogonadism, impotence, infertility, depression or premature death. Detection is made with specific blood tests. Management includes blood donation (phlebotomy) and diet modification.

Juvenile hemochromatosis (JH–type 2)...

...is an inherited condition similar to type 1, except symptoms, disease onset and death—generally due to multi-organ failure—occur prior to the age of 30. Detection is made with specific blood tests. Management includes blood donation (phlebotomy), and diet modification.



important: *management of an iron disorder may include the use of medications or other types of therapy depending upon the types of diseases that have developed.*

African siderosis (AS)...



...is believed to be an inherited metabolic disorder similar to HHC. Most at risk are adult black women who do not menstruate or men. Iron accumulates to excess levels and consequential diseases are the same as for HHC, except the disease onset and premature death is at an earlier age.

Detection is made with specific blood tests. Management includes blood donation (phlebotomy) and diet modification.

dysmetabolic iron overload syndrome (DIOS)...



...is a condition often seen in people who are overweight with fatty liver disease, abnormal lipids or blood sugar levels. Most at risk are adults. DIOS is detected with blood tests

and managed with diet, exercise, medications and judicious use of phlebotomy.

transfusional iron overload (TIO)...

...is an acquired condition for patients who are transfusion dependent. Most at risk are children with inherited hemoglobin diseases (sickle cell, thalassemia) who need blood transfusions to survive or individuals with conditions treated with multiple blood transfusions. Treatment for the majority of patients is removal of iron with pharmaceuticals formulated to specifically chelate iron.



rare conditions resulting in iron overload...

...conditions of faulty red cell production or management, enzyme deficiencies, metal transport protein abnormalities can result in excess body iron. A complete list can be found on our website.

anemia of inflammatory response (ARS)...

...is a transient condition. The body withholds iron as a defense mechanism when inflammation is present. Most at risk are individuals with an illness that triggers inflammation. This condition can mimic iron deficiency anemia (IDA). Detection is made with specific blood tests. Management includes curing the underlying cause of inflammation.



iron avidity (IA)...



... is a condition where the body steps up iron absorption but does not transport the extra iron to storage. This condition mimics iron overload, but phlebotomy is not warranted in cases of IA. Most at risk are people with mutations of *HFE*, especially those undergoing frequently phlebotomies. Detection is made with specific blood tests.

Management is similar to iron deficiency.

iron deficiency with or without anemia...

...is a condition of inadequate amounts of iron to meet the demand. A person can be iron deficient with or without anemia. Most at risk are children, women of childbearing age, the elderly and anyone experiencing chronic blood loss. Detection is made with specific tests. Management may include iron replenishment with oral or infused iron, along with increased consumption of iron-rich foods, while avoiding foods and substances that inhibit iron absorption.



Learn more about Iron-Out-of-Balance™ & chronic disease.

www.irondisorders.org
www.hemochromatosis.org

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*NOTE: List is from 2011; some details have changed.

The Iron Disorders Institute (IDI) educational products are developed in collaboration with the IDI Medical & Scientific Advisory Board Members, who are known experts in the field of iron and blood disorders.



Iron Disorders Institute (IDI) exists so that any person with an iron disorder receives an early, accurate (complete) diagnosis, appropriate therapy and be equipped with the knowledge to live in good health.



More than 90 million Americans have an iron disorder.

Knowledge is the cure.

www.irondisorders.org
www.hemochromatosis.org

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Learn more about iron disorders...

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