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Karnataka Paediatric Journal

Editorial

Bye Bye anaemia – Raise your hands for blood health

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Received: 27 February 2025
Accepted: 27 February 2025
Published: 22 March 2025

DOI
10.25259/KPJ_10_2025

Quick Response Code:

Dear Readers,

Anaemia is a significant public health issue in India, affecting many people, especially women and children. Iron deficiency is a significant nutritional deficiency that affects individuals all over the world, particularly in developing countries. Iron deficiency anaemia has been the main cause of health burden in India for the past decade, based on a review of previous Global Burden of Disease surveys. Poverty, illiteracy and poor sanitation are the principal reasons for anaemia in India. As per the Global Nutrition Assessment 2016, India is among the countries with the highest rates of iron deficiency, placing 170th out of 180 for women's anaemia. Anaemia caused by an abnormal iron metabolism is connected with poverty and malnutrition.

Iron needs are higher for expectant mothers, new-borns, children and teenagers who are at the potential of becoming iron deficient. Low iron bioavailability in food is the most prevalent cause of iron deficiency in developing countries. A shortage of iron causes iron deficiency anaemia, which affects roughly 4–5 million individuals each year. It affects people of all ages, but the most vulnerable are children, pregnant or menstrual women and those who need renal dialysis. The concept which describes a condition in which the body's iron stores are depleted and there is evidence of a decreased iron transport to tissues is 'iron deficiency'. Anaemia caused by an abnormal iron metabolism is the most common micronutrient deficiency in the world, influencing the human health and economic well-being of countless men, women and children. As per the World Health Organization, anaemia caused by an abnormal iron metabolism is a significant community health issue that demands immediate attention from governments, researchers and healthcare practitioners.

Prevalence of anaemia in India – according to the National Family Health Survey-5, 57% of women aged 15–49 and 25% of men aged 15–49 in India have anaemia. It is more common in women and children in most states and union territories. Anaemia is more common in poorer women, and the prevalence decreases with increased education and wealth. It is more common in adolescent girls and pregnant women. Anaemia is more common in the eastern, north-eastern and central regions of India.

The government of India has implemented a number of initiatives to reduce anaemia:

- Strengthening the supply chain and logistics
- Developing training modules for healthcare providers
- Working with other departments and ministries
- Engaging the National Centre of Excellence and Advanced Research on Anaemia Control at AIIMS, Delhi.

The country's present health data infrastructure should be combined with a constant monitoring and assessment methodology. Although there are still significant technological hurdles in detecting anaemia in the general population, identifying its occurrence and severity is crucial. Studies are being conducted to produce a procedure that is relatively precise, quick and inexpensive, and that can be administered with equipment that is not easily broken and does not rely on power.

The government of India has set out Rs. 36,707 crore toward nutritional programs, including National Health Mission's Integrated Child Development Scheme. This might be $700 million less than the estimated needs, according to a nutrition evaluation. Other dietary programs, such as the welfare schemes and the Mahatma Gandhi Rural Employment Guarantee Act, receive about Rs. 2.07 lakh crore from the government; however, the system has serious flaws. According to a report published in January 2016, over half of the food given never reached its intended recipients.

Another program to combat this situation is the 'National Nutrition Anemia Prophylaxis Programme'. The purpose of the initiative, which started in 1970, was to avoid nutritional anaemia in mothers and children. Expectant and nursing mothers, as well as birth control users, are given one iron and folacin capsule containing 60 mg elementary iron, which has also been doubled to 100 mg elementary iron, but the folacin dose has not changed. This program is overseen by the Ministry of Health and Family Welfare's Maternal and Child Health Division. It is now part of the Reproductive and Child Health initiative. The program follows few actions to have a change. The following are the actions done to combat anaemia as part of the National Health Mission:

In 2018, Anaemia Mukt Bharat (AMB) was launched as part of the Strengthened Nationwide Iron Plus Initiative Project to lower anaemia rates by one to three percentage points each year. Children aged 6–59 months, 5–9 years, teenagers aged 19 years, reproductive age group women (15–49 years), expecting women and breastfeeding women are the target demographics for AMB.

The Weekly Iron and Folic Acid Supplementation (WIFS) Program is conducted to address problems of teenage girls and boys having a great due to the rising prevalence of anaemia. The WIFS approach entails 52 weeks of weekly iron-folic acid (IFA) tablet distribution under supervision (a single IFA tablet consists of 100 mg elemental iron and 500 g folic acid). A health information system and a mother-infant surveillance system are being implemented to identify and track cases of anaemic and extremely anaemic pregnant women.

Most interventions rely on people's active engagement to succeed. Because iron deficiency is widespread, it is critical to inform and educate the public, particularly through social mobilisation initiatives. As a public, professional strategy, it should be planned with the people that we are dealing with and other aspects in mind. Many nations have long-standing programs aimed at preventing and controlling iron deficiency anaemia, but only a handful have a well-coordinated plan to address the disease. In many countries, the expansion of primary health care has provided a valuable chance to control iron deficiency anaemia by using an approach that is direct, economical and easy. Food fortification is incredibly successful, but it can only be done in places with the necessary industrial infrastructure. It is usually not a good idea to base any anaemia management strategy just on any of those methods; it is unlikely to be effective enough on its own.

World Anaemia Awareness Day is observed globally to raise awareness about anaemia, its cause, prevention and treatment. The day highlights the importance of addressing anaemia, particularly among women, children and vulnerable populations, as it significantly impacts public health, productivity and quality of life. The theme for World Anaemia Awareness Day in 2025 is 'Raise Your Hands for Blood Health'.

Key points about the 2025 theme:
Focus on the action: The theme emphasises the importance of taking proactive steps to maintain good blood health.

Slogan: 'Know Your Number, Break the Silence on Anaemia' is often used alongside this theme.

World Anaemia Awareness Day was created in 2022 in response to the global issues of anaemia and iron deficiency, mainly affecting women and children. It is marked on 13 February as 13, representing the ideal haemoglobin number for optimal blood health. The 2024 global campaign successfully reached an audience of over 50 million. The campaign focus is to keep the problem of anaemia and iron deficiency in the spotlight. It is especially for the general public as it is a problem often overlooked by medical professionals. World Anaemia Awareness Day aims to be a platform for raising awareness of anaemia and iron deficiency and a global driver to promote the importance of preventative action to support blood health. Central Indian Academy of Pediatrics (IAP) and IAP Karnataka have done commendable work in this regard by conducting awareness programs across the country. Let's join hands to achieve the goal of anaemia free India.

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How to cite this article: Shenoy B. Bye Bye anaemia – Raise your hands for blood health. Karnataka Paediatr J. 2025;40:1-2. doi: 10.25259/KPJ_10_2025