

# **REKAM JEJAK DIGITAL**

## **Prevalence of Iron Deficiency Anemia and Reference Range of Complete Blood Count, Reticulocyte Parameters in Infants Aged 9–11 Months**

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**INTERNATIONAL JOURNAL OF GENERAL MEDICINE**

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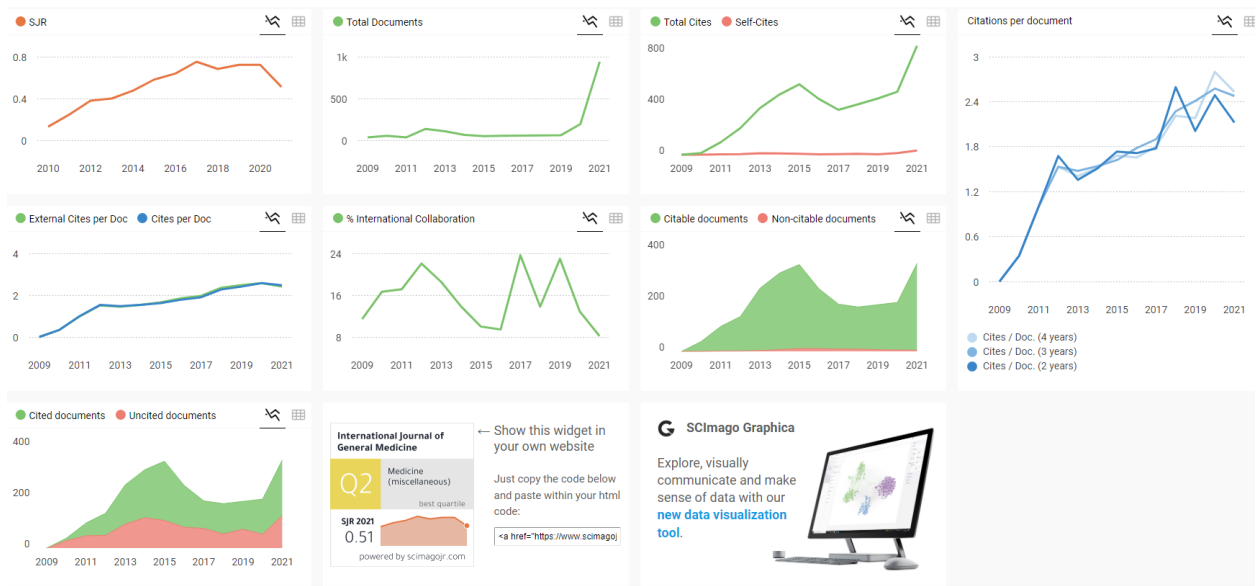
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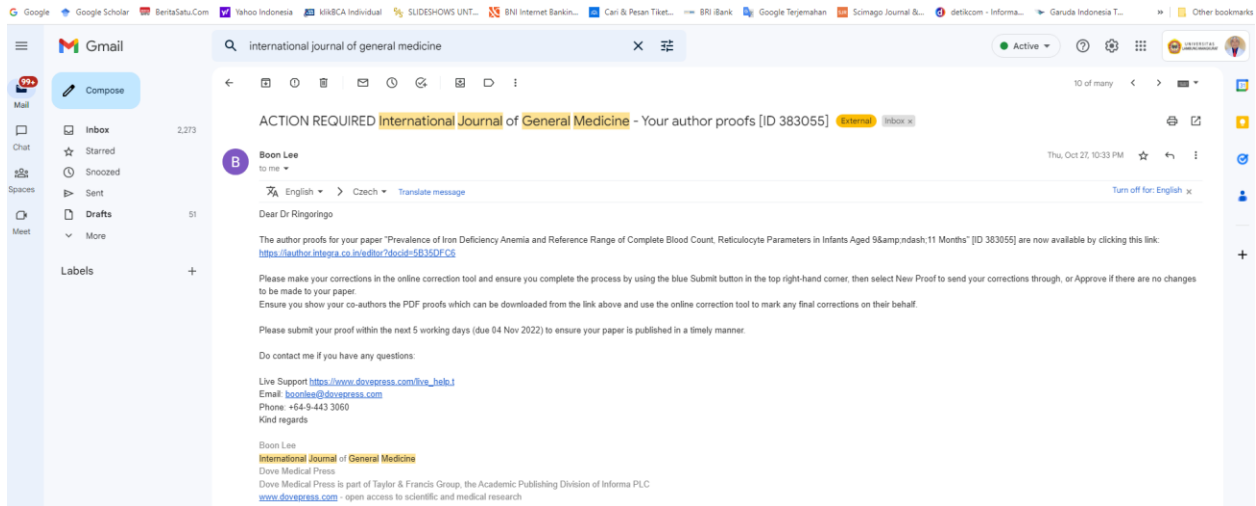
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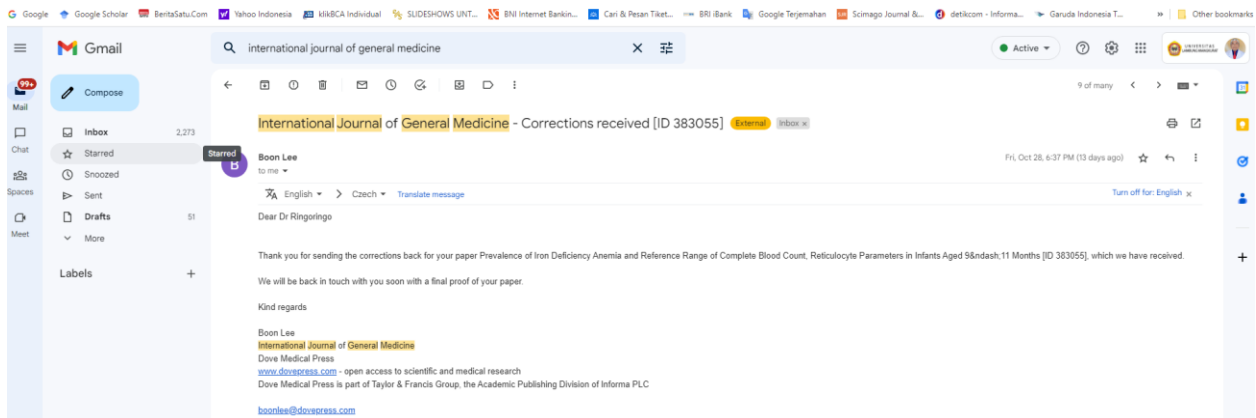
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# Prevalence of Iron Deficiency Anemia and Reference Range of Complete Blood Count, Reticulocyte Parameters in Infants Aged 9–11 Months

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**Background:** Iron deficiency anemia (IDA) is still a major global health problem. Determination of reference ranges for complete blood count (CBC), reticulocyte hemoglobin content (Ret-He), immature reticulocyte fraction (IRF), and reticulocyte production index (RPI) are essential to help diagnose a disease.

**Purpose:** The study aims to know the prevalence of IDA, risk factors that influence it, and set a reference range for CBC and reticulocyte parameters in infants aged 9–11 months in Indonesia.

**Patients and Methods:** The study was conducted prospectively at 10 Community Health Centers in Banjarbaru, South Kalimantan, Indonesia, from August 2020 to August 2021.

**Results:** This study recruited 100 healthy infants (47% boys, 53% girls) aged 9–11 months. The prevalence of IDA was 32%. There is a range for reticulocyte parameters.

**Conclusion:** The reference range of CBC, Ret-He, IRF, and RPI for healthy infants aged 9–11 months in this study can be used as a benchmark.

**Keywords:** reference range, anemia, complete blood count, Ret-He, IRF, RPI, infant

## Introduction

All ages anemia prevalence was 22.8% globally in 2019. The prevalence was highest among children under five years, 39.7%, with the most contributing cause being dietary iron deficiency (ID).<sup>1</sup> Iron deficiency anemia (IDA) is still one of the leading global health problems. So, the early diagnosis and prompt treatment of IDA is critical to prevent the long-term effects of brain iron deficiency that cause cognitive, behavioral, and neurodevelopment deterioration.<sup>2–7</sup> Some causes of IDA are low iron stores at birth, not being given iron supplementation, the baby's rapid growth rate, and inadequate iron intake. In addition, the mother's education and occupation, parity, family income, and infant nutritional status contribute to insufficient iron intake.

Reference range data for complete blood count (CBC), reticulocyte hemoglobin content (Ret-He), immature reticulocyte fraction (IRF), and reticulocyte production index (RPI) for infants 9–11 months old are limited. So then, establishing the reference range of CBC, Ret He, IRF, and RPI in infants 9–11 months is helpful to determine whether an infant is an iron deficiency with or without anemia. Combining several parameters, hemoglobin (Hb), mean corpuscular volume (MCV), mean corpuscular hemoglobin (MCH), red cell distribution with (RDW), Mentzer index (MI), reticulocyte count, Ret-He, IRF, and RPI will undoubtedly make it easier to determine if an infant has ID or IDA and monitor oral iron therapy.

Received: 20 July 2022  
Accepted: 25 October 2022  
Published: 2 November 2022

International Journal of General Medicine 2022;15:8017–8024

8017



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