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ID and IDA in Postmenopausal Women

Announcer:

Welcome to CME on ReachMD. This episode is part of our MinuteCME curriculum.

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Dr. Munro:

This is CME on ReachMD, and I am Dr. Malcolm Munro from UCLA, and I'm here with Dr. Michael Auerbach, a hematologist from Georgetown and a clinical professor there.

Michael, the average woman lives at least a third of her life after menopause. And so this creates this unique circumstance in an individual who is no longer bleeding, although I might say that those who are early menopausal may still have carryover from their heavy menstrual bleeding, but in general, they don't have bleeding. How do you approach the woman who is postmenopausal differently, perhaps, than the younger individual?

Dr. Auerbach:

The postmenopausal woman who has unexplained iron deficiency is the same as a man with iron deficiency, and you must exclude malignancy. So the first thing you say to yourself is that iron deficiency in a postmenopausal woman is cancer until proven otherwise. There aren't too many other causes other than gastrointestinal blood loss. Malabsorption is certainly one. We rarely see nutritional iron deficiency in the United States. So I think that a clinician who sees a woman who is no longer menstruating and no longer in reproductive years must take it as his or her responsibility to elucidate the cause.

Dr. Munro:

The primary care physician may already know that up front, but what should they do or who should they involve to help them sort this out, including that search for malignancy?

Dr. Auerbach:

Well, Malcolm, we're talking about iron deficiency here. So if someone has chronic kidney disease, they're not necessarily iron deficient. Inflammatory bowel disease, usually a disease of younger people, tends to cause iron deficiency because of blood loss and malabsorption. So iron deficiency unto itself, with or without chronic kidney disease, with or without inflammatory bowel disease, must be defined by etiology. I think with IBD, inflammatory bowel disease, you don't have to look further. A patient with chronic kidney disease with iron deficiency is not excluded from having a workup to identify the cause.

Dr. Munro:

Very important to not assume that this is related to menstrual bleeding and to be very careful to investigate her differently from perhaps the younger woman.

So this has been a brief but great discussion. Unfortunately, our time is up. Thanks for tuning in.

Announcer:

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