What You Need to Know About Anemia and Diabetes

by AFRA WILLMORE

The Connection Between Anemia and Diabetes

Lost your appetite? Feel dizzy or lightheaded? Have a rapid heartbeat or shortness of breath? Well unless George Clooney, Halle Berry or insert gorgeous celebrity of choice is nearby your symptoms may well be down to anemia — especially if you have diabetes.

Diabetics who develop anemia generally do so because of kidney disease related to their condition. Kidney disease is a common complication of diabetes. It's estimated that in the U.S. alone around 25 percent of type 1 and type 2 diabetics have anemia – and there may well be more undiagnosed, as the symptoms of anemia can be very similar to those of diabetes!

For instance, people with anemia may feel weak, become tired easily, and have problems carrying out everyday tasks – just like some people with diabetes.

Other symptoms of anemia include:

- Pale skin
- Chest pain
- Irritability
- Numbness or coldness in the hands and feet
- A fast heartbeat
- Shortness of breath with activity
- Headaches

Of course, these are also symptoms of a variety of other conditions, ranging from heart attack to hangover!

How Do I Know It's Anemia?

So how can you tell if your symptoms are being caused by anemia? Firstly, let me explain what anemia is, and how diabetes, or more strictly speaking kidney disease, can cause it.

When diabetes affects your kidneys (known as diabetic nephropathy), they may not be able to produce enough erythropoietin, a hormone that controls the production of red blood cells. With anemia, there are fewer red blood cells than normal.

Red blood cells carry oxygen to your body's cells so if there are fewer healthy red blood cells, there is less oxygen being transported. The lack of oxygen may be causing the symptoms listed above.

Normally when you develop anemia your body tries to correct the situation by producing more erythropoietin, but with diabetic nephropathy, as part of the equation, this might not be possible, as your kidneys might not be able to

do this efficiently.

Anemia can also be caused by certain medications used to treat diabetes and related conditions. Thiazolidinediones, as well as metformin (Glucophage), can increase the risk of developing anemia. In particular, metformin may interfere with vitamin B12 absorption, and some doctors advise diabetics taking this medication to take a multivitamin as well.

So why do you need to worry about developing anemia? Well, studies show that diabetics with anemia are more likely to develop eye disease and suffer a heart attack or stroke.

It sounds grim, but luckily it's very simple to find out if you have anemia and to treat it.

It's time to visit the vampire – your doctor will be able to arrange blood tests to check if you are anemic, and how low your red blood cell count is.

Your healthcare provider should arrange a complete blood count looking particularly at your levels of hemoglobin and hematocrit. Hemoglobin is the part of red blood cells which carries oxygen to your organs, hematocrit shows the percentage of red blood cells in your blood.

Treatments

If it transpires that you are anemic there are a variety of treatments depending on what your doctor thinks is causing it – it's not necessarily down to your kidneys!

Iron or vitamin supplements may be recommended, or if the condition is thought to be down to diabetic nephropathy you may be prescribed erythropoiesis-stimulating agents (ESAs) that stimulate red blood cell production.

You can also help treat or prevent anemia by making a few simple lifestyle changes. Studies have shown that diabetics who have good control of their blood glucose and blood pressure have a much lower risk of developing kidney disease. Cutting the risk of kidney disease cuts the risk of anemia.

What you eat or drink can make a difference too. Eating a nutritious diet high in iron, vitamin B12 and folic acid can really help. Here are some suggestions if you are not sure what sort of diet is best.

When heading to the grocery store choose dark-green leafy vegetables, such as watercress and curly kale, iron-fortified cereals or bread, brown rice, pulses and beans, nuts and seeds, white and red meat, fish, tofu, eggs and dried fruit, including dried apricots, prunes and raisins.

What you drink while you are eating can also affect iron intake – I very rarely drink tea or coffee with meals as I know they can inhibit iron intake. I only just learned, however, that milk can also limit iron absorption, so choose drinks containing Vitamin C like fresh orange juice instead.

You will find both iron AND vitamin C in broccoli and brussels sprouts – great news for me as they are my favorite vegetables.

Sorting out anemia with diet and/or medications might mean you lose that "pale and interesting" look, but on the plus side you will have more energy, improved quality of life and are much less likely to have to spend time in a hospital or die early.

So what are you waiting for? If you even suspect you might be anemic, make an appointment to get blood taken right now.