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ABSTRACT BOOK

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WED & THU

11 & 12 SEPT 2024



TIME

8:00AM - 5:00PM



VENUE

AC HOTEL BY MARRIOTT KUANTAN, PAHANG, MALAYSIA

C005

Navigating Iron Deficiency Anaemia in Pre-Menopausal Women: Beyond Nutritional and Menstrual Paradigms

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Introduction: Iron deficiency anaemia (IDA) is a common condition that affects a significant number of premenopausal women globally. There are various factors that can contribute to this condition, such as menstruation, pregnancy, insufficient iron intake, malabsorption, intravascular haemolysis, and gastrointestinal blood loss. Premenopausal women often attribute it to menstrual blood loss. As a result, referrals for gastrointestinal evaluations of premenopausal women are rare. Case report: A 45-year-old woman presented to the primary care clinic with worsening lethargy and a reduced appetite for two months. She has an underlying iron deficiency anaemia on regular haematinics and is under primary care follow-up. The haemoglobin level ranges from 8.5 to 11.5 g/dl. She underwent two admissions for symptomatic anaemia, each time receiving a blood transfusion. There is no palpitation, shortness of breath, rectal bleeding, altered bowel habits, or constipation. She also has no family history of malignancy. Her menses were regular, and she follows a high-iron diet. Fecal stool-occult blood was negative. Her worsening symptoms prompted a referral for a colonoscopy due to an unexplained IDA, potentially indicating colon cancer. Colonoscopy showed a splenic flexure tumor, and HPE revealed splenic flexure adenocarcinoma. She then underwent a laparoscopic left hemicolectomy. Conclusion: When dealing with unexplained IDA, one should apply a high index of suspicion, and malignancy is likely one of the main causes, especially in premenopausal age.

Keywords: Anaemia; iron deficiency; pre-menopausal; colorectal cancer