

Clarification on Dietary Risk 427.4

427 Inappropriate Nutrition Practices for Women

Description

427.4 Inadequate vitamin/mineral supplementation recognized as essential by national public health policy.

- Consumption of less than 27 mg of supplemental iron per day by pregnant woman.
 - Consumption of less than 150 μ g of supplemental iodine per day by pregnant and breastfeeding women.
 - Consumption of less than 400 mcg of folic acid from fortified foods and/or supplements daily by non-pregnant woman.
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Clarification

As described in the Justification portion of 427.4, the American Thyroid Association recommends prenatal women take 150 μ g of supplemental iodine/day. Due to the fact that supplements are not regulated, not all prenatal supplements contain iodine. Even though iodine is not a standard component of prenatal vitamins, it can't be assumed that every woman is deficient and thus should be assigned this risk. The intent of risk #427 was to highlight this issue, encourage the woman to discuss it with her doctor and when appropriate, assign the risk.

It is only appropriate to assign the risk if you have the information. If the participant, when asked, knows the supplement she takes does not contain iodine (or that the amount is inadequate), or reports she does not take supplements at all, staff should assign the risk.

Conversely, if you don't have the information then the risk cannot be assigned. If the pregnant women reports she does take a prenatal supplement but does not know (or isn't sure) of the iodine content, then staff should not assign the risk (you can't assume inadequacy).

In both cases (unless it is known that iodine supplementation is adequate), the appropriate follow-up is to "advise the participant to review the iodine content of their vitamin and discuss the adequacy of iodine supplementation with their health care provider" – as is stated in the justification of #427.4.