



## Factors associated with dietary iron intakes among pregnant women in Ifako-Ijaiye, Lagos, Nigeria

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Iron deficiency anaemia (IDA) in pregnancy is a significant public health problem worldwide, but little is known about factors associated with dietary iron intake among pregnant women especially from low- and middle-income countries<sup>(3)</sup>. This study assessed factors associated with dietary iron intake among pregnant women attending primary health centres in Ifako-Ijaiye Lagos, Nigeria. Sociodemographic information and dietary intakes were elicited from 432 apparently healthy singleton pregnant women using a pre-tested questionnaire and 24 hour- dietary recall, respectively. Dietary iron intakes was estimated from foods and drinks reported using the West African Food Composition Table and adjusted for energy intakes using the residual method<sup>(1)</sup>. Chi-square test and one-way ANOVA was used to compare categorical and continuous variables respectively by tertiles of energy-adjusted dietary iron intakes at a two-sided  $P < 0.05$ <sup>(2)</sup>. Mean age and dietary iron intake was  $28.5 \pm 4.6$  years and  $20.3 \pm 3.3$  mg/day, respectively for all respondents. Energy-adjusted iron intakes by tertiles of energy-adjusted dietary intakes were;  $16.6 \pm 1.4$  mg/day for the first tertile,  $19.7 \pm 1.0$  mg/day for the second tertile and  $23.7 \pm 2.0$  mg/day for the third tertile. Age, gestational age, parity, education, marital status, and income differed insignificantly by tertiles of energy-adjusted dietary iron intakes. Current evidence suggests a statistically insignificant association between sociodemographic factors and dietary iron intakes in this sample, but further studies are vital for designing culturally relevant interventions to promote the consumption of iron-rich foods among women in this population.

**Keywords:** diet; iron intakes; maternal health; Nigeria

### Ethics Declaration

Yes

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### References

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2. WHO Geneva, Switzerland: WHO; 2017. 96 p.
3. WHO1993-2005: WHO. Geneva; 2008. <https://apps.who.int/iris/handle/10665/43894>