2 Pernicious Anemia

Patient name: _____ **Admission:** _____

DATE | NRS INITIAL

I. The client/caregiver can define pernicious anemia.

A. It is a decreased absorption of vitamin B12 caused by a deficiency of an intrinsic factor.
B. This causes cell destruction and low hemoglobin levels.
C. Vitamin B12 is necessary for gastric, intestinal, and nervous system functioning.

II. The client/caregiver can list factors that may increase risk of pernicious anemia.

A. Age (it typically affects people over 50 years old)
B. Race (it typically affects those of Scandinavian origin with blue eyes)
C. Autoimmune diseases
D. Diet insufficient in folic acid
E. Familial history
F. Malabsorption syndromes
G. Strict vegetarian diet without B12 supplements
H. Pregnancy due to increased need in third trimester
I. Surgical removal of the stomach
J. Celiac disease
K. Metabolic disorders
L. Alcoholism

III. The client/caregiver can recognize signs and symptoms of pernicious anemia.

A. Smooth, sore, red tongue and bleeding gums
B. Impaired sense of smell
C. Loss of appetite
D. Abdominal pain
E. Decreased sensation in hands and feet
F. Fatigue and weakness
G. Shortness of breath
H. Constipation or diarrhea
I. A lack of coordination and difficulty walking
J. Nausea and vomiting
K. Poor memory

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IV. The client/caregiver can list measures to control pernicious anemia.

A. Take medications as prescribed. Injections of B12 are the treatment of choice. Oral supplements of vitamin B12 can be added. Vitamin B12 can be administered intranasally.
B. Eat a well-balanced diet that is high in vitamin B12 (i.e., eggs, fish, meat, and milk).
C. Avoid injury due to decreased sensations in hands and feet.
D. Perform good oral and personal hygiene.
E. Exercise regularly with regular rest periods.
F. Keep follow-up appointments with physician and laboratory.
G. Report signs and symptoms of infection or any reoccurrence to physician.

V. The client/caregiver is aware of possible complications of untreated disease.

A. Heart failure
B. Increased risk for gastric polyps and gastric cancer
C. Persistent neurological defects if treatment is delayed

RESOURCE

Nutritionist or dietitian

REFERENCES

Ackley, B. J., & Ladwig, G. B. (2006). *Nursing diagnosis handbook: A guide to planning care*. St. Louis: Mosby Elsevier.

Cohen, B. J., & Taylor, J. J. (2005). *Memmler's the human body in health and disease* (10th ed.). Philadelphia: Lippincott Williams & Wilkins.

Lutz, C., & Przytulski, K. (2001). *Nutrition and diet therapy*. Philadelphia: F. A. Davis Company.

Nutrition made incredibly easy. (2003). Philadelphia: Lippincott Williams & Wilkins.

Taylor, C., Lillis, C., & LeMone, P. (2005). *Fundamentals of nursing*. Philadelphia: Lippincott, Williams & Wilkins.

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