

Iron / Ferritin Levels

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Although it isn't a commonly accepted belief within the medical community, iron depletion is *extremely* common with distance runners. Whether or not you are currently experiencing the symptoms (see below), it is worthwhile to get your levels checked to at least establish a baseline. Heavy training will deplete your levels, so keep that in mind when analyzing the results. It is often suggested to get tested both when the training load is low and high. That way, you know your body's rested iron levels and how much they drop during extended hard training.

You must specify to your doctor that you want a FERRITIN test and need the number back, not just a "good or bad" result. Otherwise, all you will get is the total iron number, which is of little use for typical iron depletion. The consensus is a bit lacking as to what a safe range is, but here are some ballpark figures:

- **Normal:** 30-200 for women, 30-300 for men
- **Moderately Low:** 11-30
- **"Dangerously" Low:** Less than 11

If you are hovering around 30, you should either supplement your iron intake or eat more iron-rich foods. If you're below 20, and especially below 11, you need to aggressively supplement with liquid iron (much more effective than the tablet variety), also known as ferrous sulfate or ferrous gluconate, available over the counter at many pharmacies.

Symptoms of iron depletion in runners include:

- Sluggishness / Fatigue / Exhaustion
- Slow Recovery
- Prone to Illness and Injury (over-use injuries increase 2-3x with low ferritin levels)
- Erratic or Declining Performances
- Heavy Legs and Tight Muscles

Ways to improve iron absorption:

- Eat 3 ounces of lean red meat or dark poultry a couple of times per week.
- No coffee, tea, or caffeinated and carbonated beverages with meals, as they reduce iron absorption.
- Eat or drink Vitamin C-rich foods with meals (increases iron absorption). Orange juice, cranberry juice, and green algae foods are excellent sources.
- Use cast-iron cookware (particularly for acidic foods like spaghetti sauce).

Calcium also inhibits iron absorption. Obviously, people also need to keep their calcium intake up to maintain strong bones, so here is a recommendation for balancing the two programs:

- Calcium mid-morning, between breakfast and lunch.
- Iron at night, one hour after dinner.

Heavy use of anti-inflammatories (ibuprofen, Advil, etc.) can also block iron absorption, as can diets high in soy protein. If you fit either bill, iron supplementation may be necessary.

Sources:

Jeff Hess, <http://www.trackandfieldnews.com/hs/coachscorner/20051215.html>

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Pete Pfitzinger, <http://www.copacabanarunners.net/iron-runners.html>

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