Introduction

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Iron deficiency anaemia is one of the most common deficiency diseases in children in developed countries. It affect particularly those living in poor socioeconomic circumstances, and children of immigrant communities for example; those from Asian communities are commonly affected. The deficiency is in most cases of dietary origin, and probably results from inadequate weaning. Many affected toddlers take diets consisting of starchy solids and large amounts of whole cow's milk, which reduces their intake of iron containing foods. A further factor may be that gastrointestinal bleeding may be caused by whole cow's milk when introduced to children under the age of 6 months. Iron fortified formula milk is likely to protect against iron deficiency anamia.

Breast milk contains iron in a highly bioaveulable form, and provides the infant's iron requirement for the first six months.

Early introduction of cow's milk predisposes to iron deficiency; cow's milk is a poor source of iron and it may cause gastrointestinal bleeding particulary in immature gut. Other factors may include the length of time for which formula milk was given before changing to cow's milk and the quality of weaning solids given to those who started cow's milk at an early age, [*Mills, 1990*].

Fomon and Stranss, (1978) have recommended iron supplement in breast fed infants from an early age even for full term infants.

In exclusively breast fed infants it is safe to shift the starting age for iron supplementation to 6 months or even older. This iron supplement may be needed some-what earlier in breast fed infants given solid food [*Siimes et al., 1984*].

Infants on marcrobiotic diet have lower Fe. and Vitamin B_{12} concentration in the blood than do omnivorous infants and these difference are reflected by differences in blood cell indices [*Dagnellie et al., 1989*].

Prolonged breast feeding and early introduction of cow's milk are associated with anaemia, and the continued use of formula milk protect against anaemia [*Mills, 1990*]. The aim of this work is to study the effect of type of feeding on hemostat of infants at early life.