FOLATE (FOLIC ACID) SUPPLEMENTS



WHAT IS FOLATE?

Folate is a **type of vitamin B (vitamin B9)** that your body uses in many different ways including (1) **making DNA and RNA**, (2) helping make **red blood cells**, (3) help turn **food into fuel**, (4) help your **nervous system function**, and (5) to **prevent neural tube defects** in offspring when pregnant.



You may see vitamins, foods, and more that are labelled as containing 'folic acid'. This is considered a folate supplement, as folic acid is converted into folate in your body.

IMPORTANCE OF FOLATE DURING PREGNANCY

Folate deficiency in pregnancy can impact the health of the birthing parent (e.g., anemia (low blood count), nerve issues) and the health of your baby (e.g., neural tube defects), certain congenital heart issues, urinary tract defects, oral facial clefts and limb-reduction abnormalities).

SOURCES OF FOLATE

While you're pregnant, you should try to eat a lot of folate-rich foods. These can include:



dark, leafy green vegetables (e.g., spinach, kale)



corn



broccoli



lentils



peas



oranges

However, all pregnant people need to take a folate (folic acid) supplement, ideally starting 3 months prior to conception. Getting folate from your diet alone is not enough to support your baby's brain and nerve development.



Taking folate (folic acid) supplements during pregnancy is **safe and effective** for you and your baby.

DOSING OF FOLATE (FOLIC ACID) SUPPLEMENTS

The amount of folate supplementation you need during pregnancy depends on:

- 1) your risk for folate-related birth issues,
- 2) your risk of folate deficiency
- 3) your baby's other parent's risk for folate-related birth issues.

Your health care provider will take all of this into account, and recommend the dose of folate you should take.





Dosing of folate (folic acid) supplements:

Risk of Folate- Related Birth Issues	Dose & Duration
Low	O.4mg: every day of your pregnancy, 4-6 weeks postpartum, and until you finish breastfeeding
Moderate	 1mg: first 12 weeks of pregnancy 0.4mg: the rest of your pregnancy, 4-6 weeks postpartum, and until you finish breastfeeding
High	 4-5mg*: first 12 weeks of pregnancy 0.4-1mg*: the rest of your pregnancy, 4-6 weeks postpartum, and until you finish breastfeeding your health care provider will determine the exact dose you need

WHERE TO FIND FOLATE (FOLIC ACID) SUPPLEMENTS

You can find folate (folic acid) in **prenatal multivitamins**. Prenatal multivitamins come in **different formulations** that have **different amounts of folic acid**, so you can choose the one that has **the dose you need**. It is important that the prenatal multivitamin you choose has vitamin B12 and iron, as well.

Prenatal multivitamins are **sold at pharmacies**. Some brands are sold over-the-counter while others are dispensed through a prescription. **You can discuss the different options with your health care provider and see our handout "Prenatal Vitamins" for more information.**



HELPFUL TIP

Folate is the most important part of your prenatal vitamin, especially in early pregnancy. If your prenatal vitamin is causing severe nausea and vomiting, it may be appropriate to substitute it for just folic acid supplementation! Speak to your health care provider to see if this is a good option for you.

HOW TO TAKE YOUR SUPPLEMENT

- If you can, start at least 3 months before pregnancy.
- Take your supplement every day.
- You can take your supplement with or without food.
- Do not take more than your recommended dose.
- Take your supplement at the scheduled time you discussed with your health care provider, as some medications can block the absorption of folate.

References

Wilson RD, O'Connor DL. Guideline No. 427: Folic Acid and Multivitamin Supplementation for Prevention of Folic Acid-Sensitive Congenital Anomalies. J Obstet Gynaecol Can. 2022;44(6):707-719. This material is intended for use by Canadian residents only. It is solely intended for informational and educational purposes. The information presented in these handouts is not to be used as a substitute for medical advice, independent judgement, or proper clinical assessment by a physician. The context of

these handouts is not to be used as a substitute for medical advice, independent judgement, or proper clinical assessment by a physician. The context of each case and individual needs differ between patients and this material cannot be applied without consultation with a trained doctor. This information handout is not intended for the diagnosis of health concerns or to take the place of the care of a medical professional. This material reflects the information available at the time of preparation.

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