

# UC Berkeley

## UC Berkeley Previously Published Works

**Title**

The new vicious circle of malnutrition and nutraceuticals

**Permalink**

<https://escholarship.org/uc/item/47d9252q>

**Journal**

BMJ, 345

**Author**

Bhurtyal, Ashok

**Publication Date**

2015-01-23

## LETTERS

## BAD MEDICINE: MEDICAL NUTRITION

## The new vicious circle of malnutrition and nutraceuticals

Ashok Bhurtyal *public health professional*

People's Health Initiative, Sandol, Gokarneshwar, Kathmandu, Nepal

I agree with Spence that nutritious local foods are better than medicated foods.<sup>1</sup>

In developing countries such as Nepal a high proportion of children and women continue to have protein-energy malnutrition and micronutrient deficiencies. Obesity and related chronic conditions are increasing, probably because of the growing number of “junk” foods that are aggressively marketed, often with questionable claims about their nutrient content.

Programmatic responses by governments and donors focus mainly on reducing prevalence statistics through targeted interventions that fix the symptoms of undernutrition but not the social inequalities that cause them. For more than a decade Nepal's Ministry of Health has been supplementing foods with vitamin A, iodine, iron, folic acid, and other micronutrients as recommended by international organisations that fund such activities.

Children with “wasting” currently receive ready to use therapeutic foods. Similarly, multiple micronutrient powders are distributed to children in a bid to control anaemia.

Organisations that provide money for these interventions fund studies that report a reduction in the occurrence of “wasting” and anaemia.

The use of locally produced foods that are known to be rich in nutrients is not being actively promoted.<sup>2</sup> Consequently, people with malnutrition have to rely on ready made foods provided by international aid. Without a conscientious effort to prevent and manage malnutrition through optimal use of nutritious local foods, international efforts may, unintentionally, produce sustained dependence.

Competing interests: None declared.

1 Spence D. Bad medicine: medical nutrition. *BMJ* 2012;344:e451.

2 Department of Food technology and Quality Control. Food composition table for Nepal. Ministry of Agriculture Development, 2012.

Cite this as: *BMJ* 2012;345:e7808

© BMJ Publishing Group Ltd 2012