



# RUTF

Concerns, Questions, Trends, Judgements

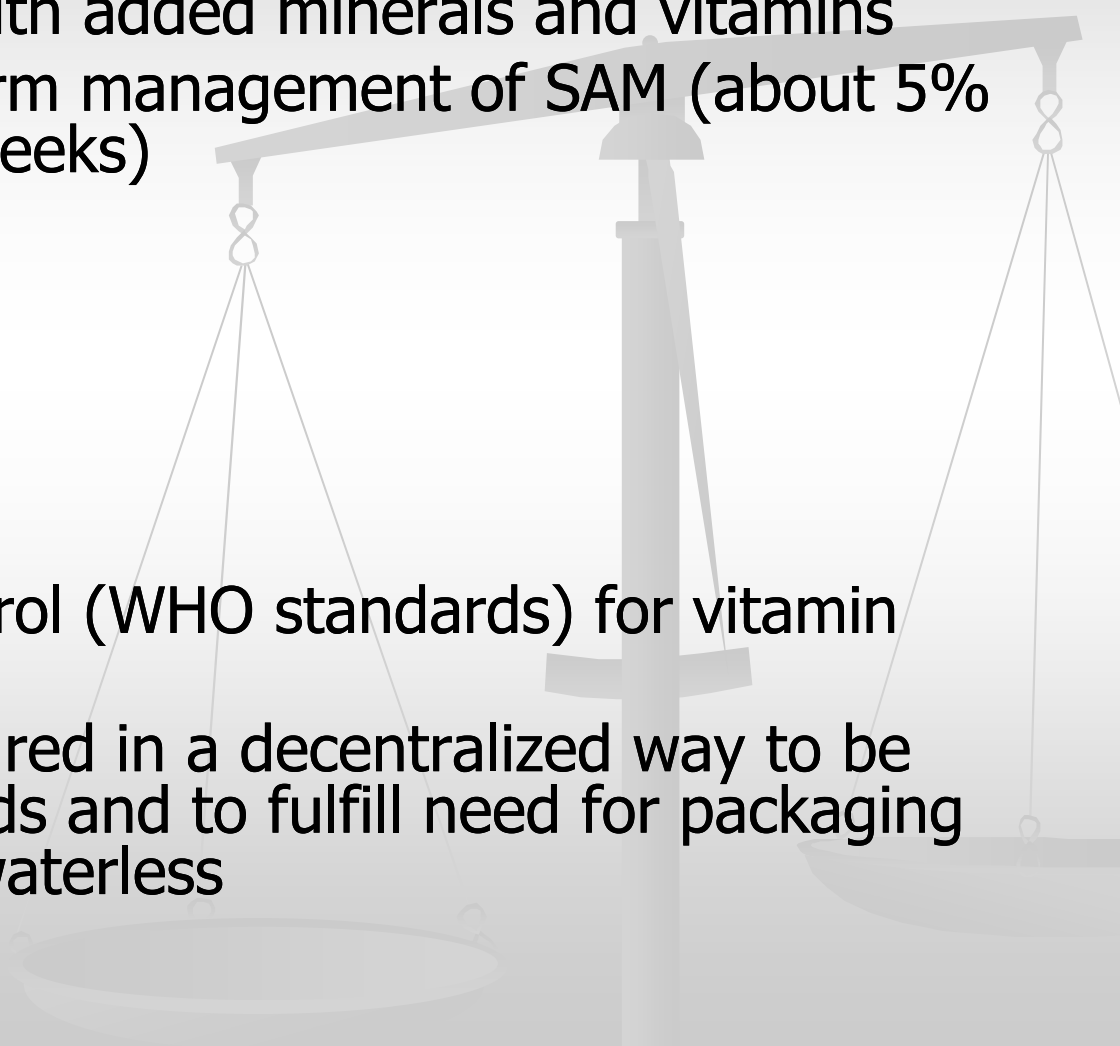
Dr Vandana Prasad  
Community Pediatrician  
National Convenor, Public Health Resource Network

# The good things

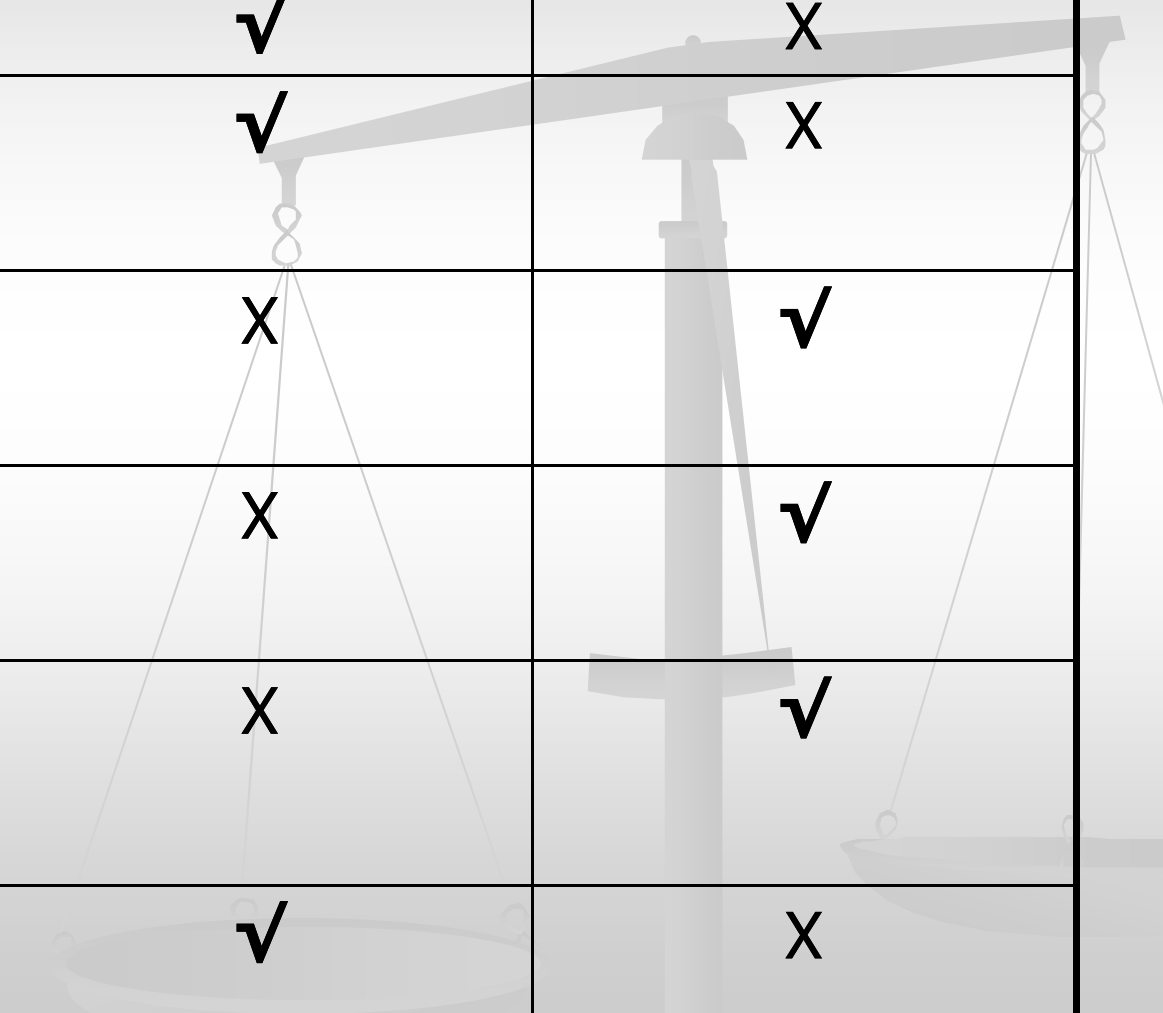


- No doubt that much more needs to be done for SAM
- No doubt that calorie dense food (RUTF) is entirely necessary and desirable
- No doubt that as compared to many other technological choices in malnutrition such as GM foods, fortification, it is not of dubious but true value
- No doubt that it saves women time and energy

# What We Are Told About RUTF

- Energy dense food with added minerals and vitamins
  - Required for short term management of SAM (about 5% children, about 6-8 weeks)
  - Community use
  - Safe
  - Ad lib administration
  - Sterile
  - Waterless
  - Rigorous quality control (WHO standards) for vitamin and minerals
  - Cannot be manufactured in a decentralized way to be able to meet standards and to fulfill need for packaging to make sterile and waterless
- 

# The Food Drug Confusion



	food	drug
safe	✓	X
ad lib	✓	X
stringent quality control	X	✓
exclusively for children with SAM	X	✓
only for short duration	X	✓
Can be used without strict supervision	✓	X

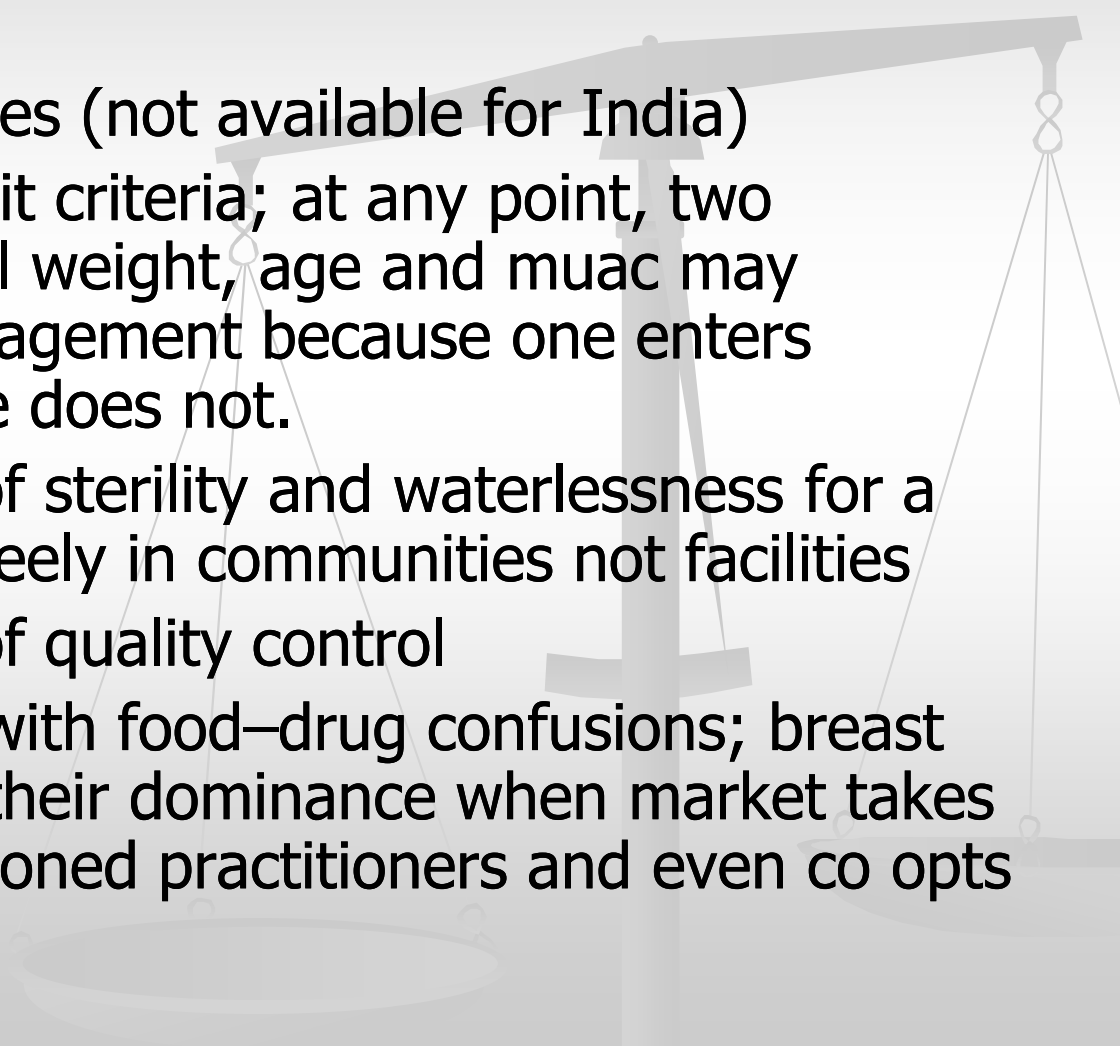
# End Result



Use freely and distribute as food but manufacture as drug. Universalised market, monopolised production

'only for SAM' and 'only for brief period' is not consistent with the statement above, probably added to overcome resistance, enlist support and accommodate critics (watch this space...)

# Other concerns

- Process of introduction
  - Lack of required research on alternatives (single product advocacy)
  - Inflation of SAM figures (not available for India)
  - Confusion in entry-exit criteria; at any point, two children with identical weight, age and muac may getting different management because one enters through SAM and one does not.
  - Over-play on issues of sterility and waterlessness for a product to be used freely in communities not facilities
  - Over-play on issues of quality control
  - Previous experience with food–drug confusions; breast milk substitutes and their dominance when market takes over from well intentioned practitioners and even co opts them.
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# Nutriset has many other nutritional products already...

## ■ MODERATE MALNUTRITION

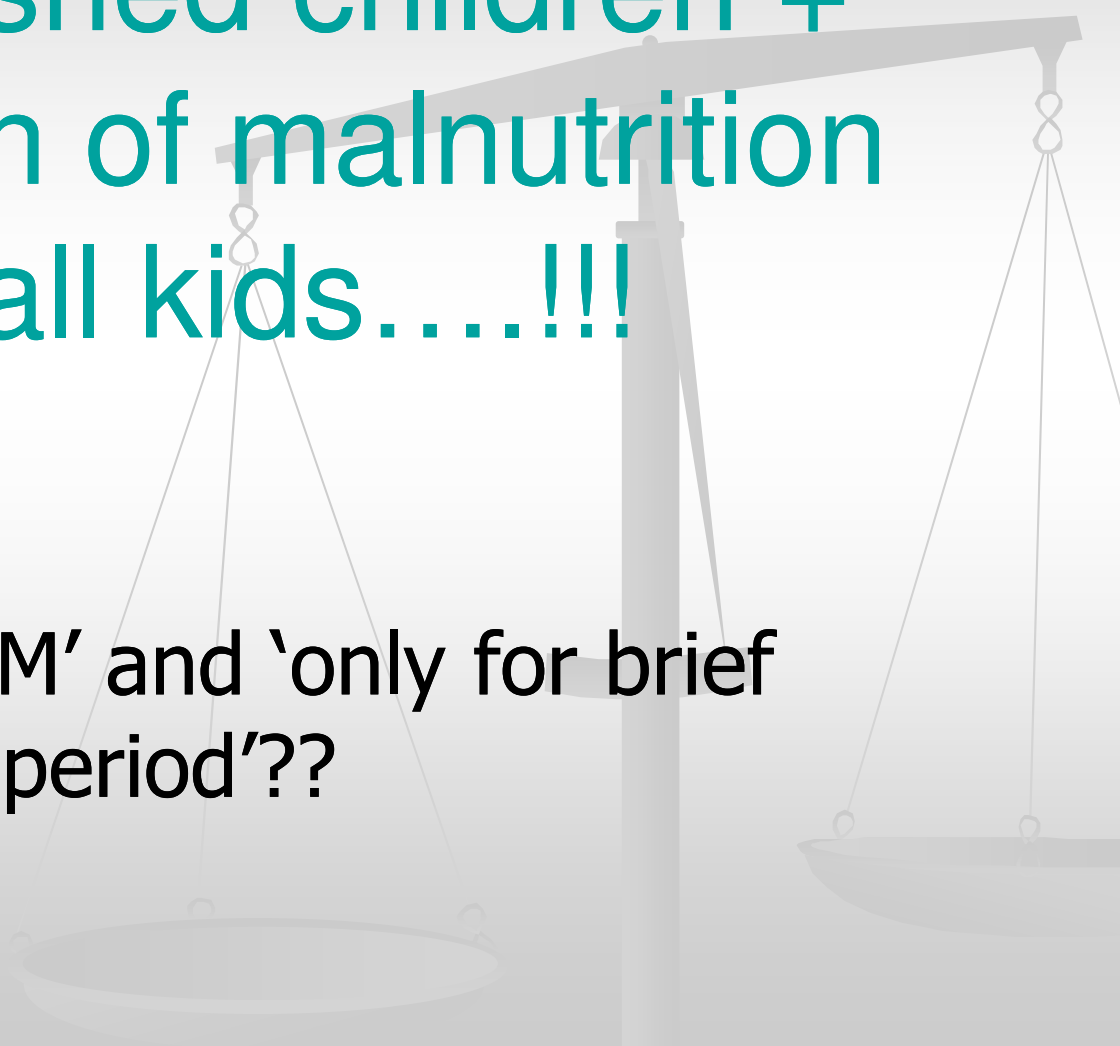
- All the products below are designed to enhance the nutritional status of vulnerable groups.
- Each product is though adapted to very specific nutritional needs.
- To receive further information on supplementary feeding of vulnerable groups, please do not hesitate to [contact us](#).

[Plumpy'doz](#) There is no translation available, please select a different language.

- **Plumpy'doz®** est un supplément nutritionnel de l'enfant en croissance (RUSF = Ready-to-Use Supplementary Food). Il réduit l'incidence de la malnutrition chronique, traite la malnutrition aiguë modérée et apporte les nutriments essentiels. Convient aux enfants de 6 à 36 mois.
- [Supplementary Plumpy'](#)
- **Supplementary plumpy®** is a ready to Use Supplementary food (RUSF) and high energy nutritional supplement suitable for anyone (from 1 year upwards).
- [QBmix](#)
- Qbmix® is a food supplement designed to prevent nutritional deficiencies in emergency situations, especially Vitamin C deficiency (scurvy) and Niacin deficiency (pellagra). [Delphia infant milk](#)
- Dietetic milk food for infants aged 0-12 month when traditional feeding is impossible. [Unimix](#) Unimix, WSB, CSB [SP450](#) SP 450, preparation for high nutritional value porridge for adults and children.

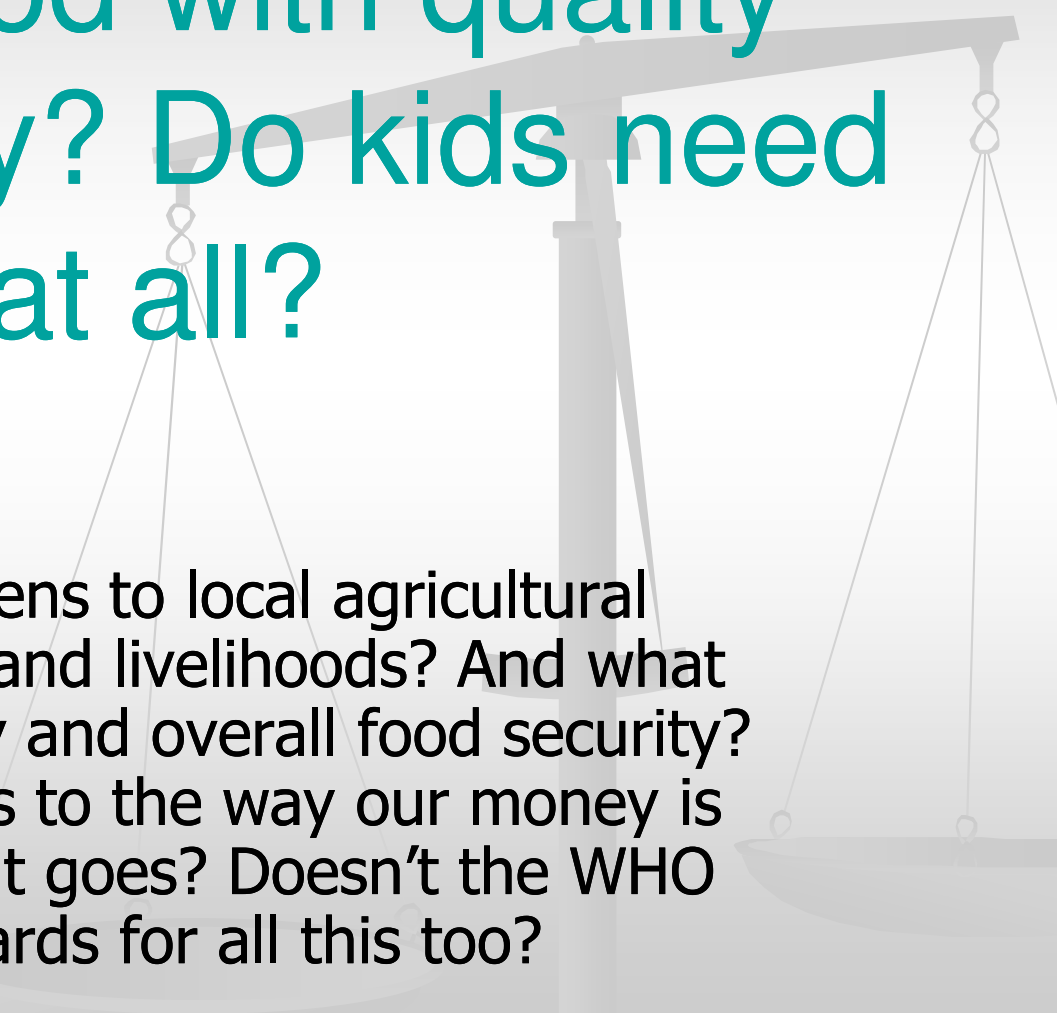
# Unicef and MSF are using them already in Africa; not only to treat, but to prevent

- As we move on to a new year in our fight against global poverty and hunger, **UNICEF** is introducing an innovative food supplement — “Plumpy’Doz” — to very young children in Somalia.
- The brown paste supplement is made from vegetable fat, peanut butter, sugar, milk, and other nutrients, and is designed to taste good to kid. Critically, it also has a longer shelf life than previous diet supplements and doesn’t need to be mixed with water.
- Three teaspoons of Plumpy’Doz three times a day provides each young child with additional energy, including fats, high-quality protein and all the essential minerals and vitamins required to ensure growth and a healthy immune system.
- Other partners, such as the World Food Programme and Doctors Without Borders, have already been using the supplement, but: “this is the first time that Plumpy’Doz will be distributed on such a large scale. UNICEF is working with partners to take proactive action to not only treat but prevent malnutrition,” said Christian Balslev-Olesen, said UNICEF Somalia Representative. “By adopting this new approach, we aim to reach children before they become malnourished.”



SAM +Moderately  
malnourished children +  
prevention of malnutrition  
=.....all kids.....!!!

'only for SAM' and 'only for brief  
period'??



So what happens to freshly  
cooked food with quality  
and diversity? Do kids need  
it at all?

And what happens to local agricultural  
practices, culture and livelihoods? And what  
happens to poverty and overall food security?  
And what happens to the way our money is  
spent and where it goes? Doesn't the WHO  
have standards for all this too?

# Recommendations

- Overall system of prevention through provision of good adequate diverse nutrition, comprehensive care and health care is a non negotiable for introduction of RUTF
- RUTF cannot work in absence of adult care and overall food security. Important but small part of larger requirement with its own limitations.
- RUTF itself should be as good a product as can be produced in a decentralised way (district or sub distt level) from locally available foods. This is our prescription for all processed food...
- The vitamin-mineral mix is the drug component and can be manufactured like a drug as is being done currently
- Zero tolerance for conflicts of interest in policy making

# Conclusions

- We must judge technological interventions by the touchstones of decentralisation, empowerment, community control, sustainability, safety and long term impact along with efficacy
- We must have a healthy distrust of market based solutions and avoid them as far as possible
- It seems entirely possible to do so for RUTF and standards for production should not hold us back (cholera vaccine in vietnam...).



**SAY “NO” TO BRANDED  
INTERVENTIONS IN  
FOOD**