



## NUTRITION NIGER

### Saving lives with milk paste!

**A**n enriched, ready-to-eat milk paste is revolutionizing the treatment of acute malnutrition. Tens of millions of children in poor countries under the age of 5 suffer from this illness, and several millions die from it each year for lack of effective treatment—but today it is possible to prevent a large number of these deaths. Saving lives by giving milk in paste form? It's an obvious step that is worth taking, by ensuring access to this new therapeutic product.

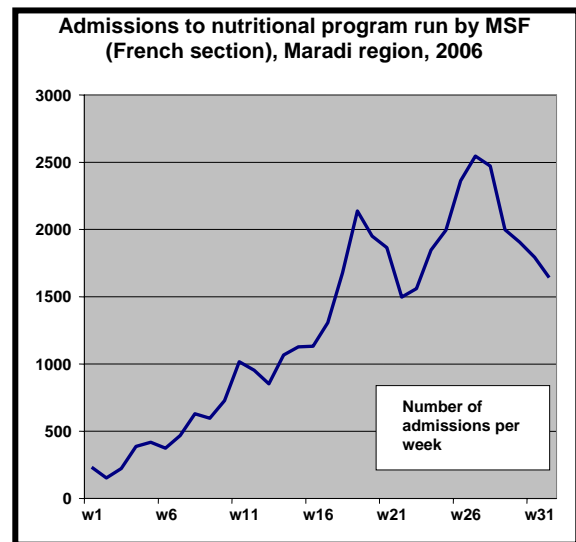
Dr. Jean-Hervé Bradol, President of the French section of Médecins Sans Frontières explains the potential of this medical advance. He insists on the importance of a mobilization of governments, NGOs and international organizations to expand the use of an effective treatment against malnutrition.

#### Why is Médecins Sans Frontières mobilizing now to step up the fight against acute malnutrition?

Because, thanks to medical research, there is a new therapeutic product based on a simple, yet revolutionary, concept: milk in the form of an enriched, ready-to-eat paste. We've been using the paste—developed in 1998 for several years (in Darfur, Nigeria, and Chad, among other places). We used it in Niger in 2005—and are continuing to use it this year—on a large scale, with excellent results. With this type of product and a mobilization of the organizations concerned, we could massively reduce the number of deaths linked to acute malnutrition. This undertaking is, ultimately, part of the same basic strategy as our ACT campaign for malaria patients: to expand the use of a new treatment that works!

#### What makes this milk-based energy paste a significant medical advance?

It is obvious that, in order to meet their nutritional needs, we have to give young

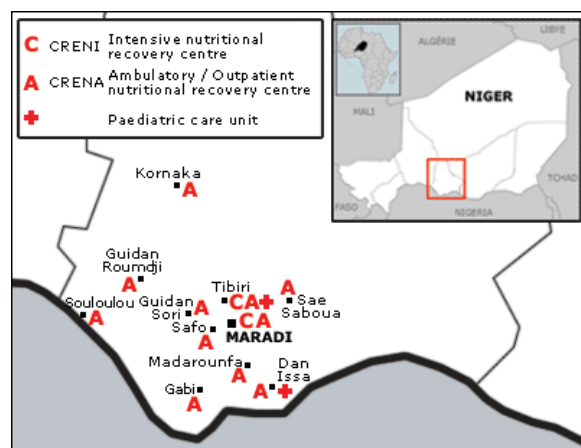


#### Week 32 Figures

- 1,642 admissions – 1,571 suffer from moderate acute malnutrition (95.7%) and 71 from severe acute malnutrition (4.3%)
- 8,443 children were present in the program

#### Our results (Week 1-32)

- 40,902 admissions
  - o 90.2% admitted directly in ambulatory centre
  - o 92.3% are acutely moderately malnourished
- 33,922 children discharged
  - o 95.5% cured
  - o 0.8% died
  - o 3.1% defaulted
  - o 0.5% transferred



For more information, please go to the special dossier on our website [www.msf.fr](http://www.msf.fr) or contact Bénédicte Jeannerod on 00 33 1 40 21 28 49 ([bjeannerod@msf.org](mailto:bjeannerod@msf.org)).

children milk. But until very recently, we didn't know how to do this in precarious settings. Animal milks don't meet a malnourished child's need for micronutrients and energy. Poor countries don't have the necessary storage conditions, and bacterial contamination is common. All these weaknesses make milk poorly-suited to treating severely malnourished children outside the hospital.

Energy- and micronutrient-enriched milk pastes remedy all these shortcomings, and come ready-to-eat, besides. There's no preparation work for mothers. There's no need for water or a bottle—the child can simply eat the product, as it is, from the package. While we may not be able to eradicate world hunger, by making these enriched milk pastes accessible to children in poor countries, we can reduce malnutrition-related infant mortality quite significantly.

**Simply having a suitable product isn't enough. How can it be used on a large scale?**

The product has already had a major impact on the ground. In Niger, Médecins Sans Frontières treated more than 60,000 severely malnourished children in 2005, and this year, in two departments in the Maradi region, we are treating children suffering from acute malnutrition, both severe and moderate. In terms of risk to the individual, malnutrition-related excess mortality is higher among cases of severe acute malnutrition. But in terms of the total number of deaths, it is greater among the many more numerous cases of moderate acute malnutrition. To reduce the number of children who die from malnutrition, we administer this new treatment right at the start of acute malnutrition.

Treatment with this new product is much simpler and—provided a little time is devoted to educating her about it—it is the mother who provides the care, at home. The vast majority of patients, including severe cases, now follow the entire treatment without ever being hospitalized. As a result, we can treat tens of thousands of children, rather than just thousands, with decidedly better recovery rates. More than nine out of ten children complete the treatment, after a month, having recovered. The results from acute malnutrition treatment programs in Niger demonstrate *in situ* that, thanks to these new products, it is

possible to prevent a very large number of children from dying each year.

While they have proven effective on a large scale, there is still a major obstacle to their widespread use—the price. The single unit price is 2.5 to 3 euros per kilo, but potential beneficiaries number in the hundreds of thousands, or millions, of individuals affected by severe poverty... Neither the families nor the public health services of the countries involved can meet their needs at such a high price.

**Is it possible to bring the price down?**

Médecins Sans Frontières is currently using Plumpy'nut®, produced by Nutriset®—still the only producer to offer milk paste tested in the field with good results. So Nutriset® has a monopoly, and has filed patents. But that's not what explains the high selling price; nearly half of that depends on the cost of raw materials. "Generic" production would face the same market prices for milk, sugar, and peanuts. Obviously, more widespread use of these products would require that the raw materials needed for producing them be freed from the logic of the market—on the grounds that the millions of deaths due to early childhood malnutrition each year constitute a public health catastrophe—and be given special status, so that they can be obtained gratis.

Today, the governments of the hardest-hit countries, donors, UN agencies, and NGOs have an historic opportunity to join together in taking decisive action to save a very large number of young children who, in the past, would have faced certain death for lack of an effective treatment.

*If you wish to contribute to the debate, send an email to the following address: [treatmalnutrition@msf.org](mailto:treatmalnutrition@msf.org)*