## **Letter to the Editor**

# Malnutrition Situation Aspects from Asian Young Dietitians, Perspective

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#### Dear Editor:

Malnutrition (refer to undernutrition) is public health issue, characterized by lower than z score in children and low body mass index (BMI < 18.5 kg/m²) in adult. Consequences of malnutrition not only damage individual health, but also poor immunity, delay development and growth, lower IQ in child, reduce quality of life and effect on higher of health care cost.

According to the Young Dietitian Workshop in the Asian Congress of Dietetics (ACD) 2022, we reported Asian situation of malnutrition across public health, health care community, and hospital.

For the public health data, we found that in infant and young children had 21.8% of stunting and 8.9% of wasting, which was improved more than 10% over the past 20 years. Among child and adolescent, the prevalence of thinness was 17.2% and 12.5% in boys and girls respectively, which quite constancy during 10 years. Food, nutrition insecurity and infection are considered as predisposing factors for malnutrition in children especially in the Covid situation. In some area, school lunch meal may save children from hungry.

Moreover, in some countries happened with other serious problem of nutrition such as anemia. Prevalence of anemia among children in each country was India 53.4%, Pakistan 53.0%, Myanmar 49.6%, Lao PDR 41.4%, Indonesia 38.4%, Thailand 24.9%, Vietnam 22.9%, and Japan 16.7%. Anemia in children may cause from poor intake of dietary or supplement iron and maternal anemia.

Among the Asian adult community, 13.0% of females and 11.5% of males had low BMI. Low BMI healthy adults were more at risk of malnutrition when they got sick. Additionally, when we discussed the issue of a low BMI cutoff point, we found that many low BMI populations still had normal function and health. There was a big question of whether to investigate BMI criteria in Asian populations.

Hospital malnutrition was other setting and aspect of malnutrition. Disease, stress and inflammation also drove on nutrition status of patient consequence to low dietary intake and weight loss, which brought poor outcomes. Nutrition screening tools were used to early detection of malnutrition, which variety across country such as Nutrition Risk Screening (NRS) 2002, Malnutrition Universal Screening Tool (MUST), Mini Nutrition Assessment – short form (MNA-SF), or Subjective Global Assessment (SGA). And some country uses their own development of screening and

assessment tools such as Thailand, applying SPENT Screening for screening tools and Nutrition Alert Form (NAF) or Nutrition Triage (NT) as assessment tools.

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Prevalence of hospital malnutrition was varied from 20% to 50% depend on the assessment tools and patient characteristics, such as critically ill, cancer, multi-comorbid disease.

Nutrition intervention for hospital malnutrition patient was one of medical treatment demonstrated to improve better outcomes, decrease infection rate and length of stay. Most country has developed their own strategies to improve patients intake such as modified texture foods, combined traditional Chinese medicine with hospital diet, hospital-made high energy and protein smoothie.

Through our discussion with young dietitians, we shared a lot of useful experiences and knowledge and recognized that there are still many responsibilities and roles of dietitians to be explored and developed especially in the community and hospital nutrition fields. Considering that some Asian countries still suffer from malnutrition. We hope to find an effective way to assess nutrition status as well as prevention and treatment of malnutrition across the lifespan, including patients in hospitals, in order to improve their quality of life.

#### **ACKNOWLEDGEMENT**

The authors would like to thank other members of the Young Dietitian Workshop for joining the discussion online almost 5 months before the congress. Our gratitude goes to Prof. Dr. Shigeru Yamamoto, our advisor, and the committee of ACD 2022 for their kind support.

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