Global policy and update: translating evidence to action

Parul Christian
MMS Stakeholder Consultation
Washington DC, Feb 5-6, 2020
Update on current global antenatal (ANC) guidelines

- WHO released new ANC recommendations in 2016
- Process based on systematic reviews
- Technical Working and Steering Group
WHO ANC RECOMMENDATIONS FOR NUTRITION

- Dietary Counseling for Healthy Eating and Appropriate Weight Gain & Diet
- Supplementation with Iron-Folic Acid (30-60 mg, 400 ug)
- Multiple Micronutrient Supplementation—Not Recommended
- Balanced Protein and Energy Supplementation in Undernourished Population
- High Dose Calcium (1.5-2 g) Supplementation in Low Intake Populations

Maternal Health and Survival

Birth Outcomes (SGA, PTB, Stillbirth, Infant Mortality)
## Evidence for maternal interventions

<table>
<thead>
<tr>
<th></th>
<th>Low Birthweight</th>
<th>Preterm Birth</th>
<th>SGA</th>
<th>Neonatal Death</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>RR (95% CI)</td>
<td>N</td>
<td>RR (95% CI)</td>
</tr>
<tr>
<td><strong>Iron-Folic Acid</strong></td>
<td></td>
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<tr>
<td>Pena-Rosas 2015</td>
<td>11</td>
<td>0.84 (0.69 to 1.03)</td>
<td>13</td>
<td>0.93 (0.84 to 1.03)</td>
</tr>
<tr>
<td>Haider 2013</td>
<td>13</td>
<td>0.81 (0.71 to 0.93)</td>
<td>12</td>
<td>0.84 (0.68 to 1.03)</td>
</tr>
<tr>
<td><strong>Multiple Micronutrients</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Haider 2017</td>
<td>15</td>
<td>0.88 (0.85 to 0.91)</td>
<td>15</td>
<td>0.96 (0.90 to 1.03)</td>
</tr>
<tr>
<td>Smith 2017</td>
<td>17</td>
<td>0.86 (0.81 to 0.92)</td>
<td>16</td>
<td>0.93 (0.87 to 0.98)</td>
</tr>
<tr>
<td><strong>Balanced Energy and Protein</strong></td>
<td></td>
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<tr>
<td>Ota E 2015</td>
<td>11</td>
<td>41 g, (4.7 to 77.3)*</td>
<td>5</td>
<td>0.96 (0.80 to 1.16)</td>
</tr>
<tr>
<td><strong>Calcium (high dose)</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Hofmeyr 2018</td>
<td>13</td>
<td>0.45 (0.31 to 0.65)</td>
<td>11</td>
<td>0.76 (0.60 to 0.97)</td>
</tr>
</tbody>
</table>

*birth weight
Recommendation on MMS

• Current Situation: Countries have policy for daily iron-folic acid use in pregnancy also recommended by the WHO
• WHO recommendation A.6: Multiple micronutrient supplementation is not recommended for pregnant women to improve maternal and perinatal outcomes
  – evidence, cost, acceptability, harm, were concerns
• Clause: .. policymakers in populations with a high prevalence of nutritional deficiencies might consider the benefits of MMN supplements on maternal health to outweigh the disadvantages and may choose to give MMN supplements that include iron and folic acid.
Translating recommendation for impact

Activities Following 2016:

- Task Force: Review evidence and create decision making guidance for countries (NYAS)
- Annals of the New York Academy of Sciences Supplement (online)
- Implementing MMS & Policy Change in 4 countries (UNICEF)
- Technical Advisory Group (NYAS)
- BMGF’s Goal Keepers Event: MNF leads the accelerator with partners
New synthesis of evidence

Review of the evidence regarding the use of antenatal multiple micronutrient supplementation in low- and middle-income countries


The upper level: examining the risk of excess micronutrient intake in pregnancy from antenatal supplements

Alison D. Gernand

Department of Nutritional Sciences, the Pennsylvania State University, University Park, Pennsylvania

Address for correspondence: Alison D. Gernand, Department of Nutritional Sciences, the Pennsylvania State University, 110 Chandlee Laboratory, University Park, PA 16801. adg14@psu.edu

Antenal multiple micronutrient supplementation: call to action for change in recommendation

ANC Platform: Opportunities and Gaps

<table>
<thead>
<tr>
<th>Indicators</th>
<th>NFHS-4 (2015-16)</th>
<th>NFHS-3 (2005-06)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal and Child Health</td>
<td>Urban</td>
<td>Rural</td>
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<tr>
<td>Maternity Care (for last birth in the 5 years before the survey)</td>
<td></td>
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<tr>
<td>32. Mothers who had antenatal check-up in the first trimester (%)</td>
<td>69.1</td>
<td>54.2</td>
</tr>
<tr>
<td>33. Mothers who had at least 4 antenatal care visits (%)</td>
<td>66.4</td>
<td>44.8</td>
</tr>
<tr>
<td>34. Mothers whose last birth was protected against neonatal tetanus (%)</td>
<td>89.9</td>
<td>88.6</td>
</tr>
<tr>
<td>35. Mothers who consumed iron folic acid for 100 days or more when they were pregnant (%)</td>
<td>40.8</td>
<td>25.9</td>
</tr>
<tr>
<td>36. Mothers who had full antenatal care (%)</td>
<td>31.1</td>
<td>16.7</td>
</tr>
</tbody>
</table>

NFHS-4 DATA – INDIA (2015-16)
Opportunity

Nutrition guidance for pregnancy exists but implementation lags and “nutrition-quality” in ANC needs attention.
Maternal nutrition: opportunity

Policy: WHO Recommendations

Nutrition Counseling & Interventions

Diagnostics & Risk Stratification

Platform: Health Systems

ANC Systems Strengthening

Nutrition-quality of ANC

Enabling Context

Food Systems [Fortification, Private Sector]

Effectiveness, Implementation Science, Focused-Geographies for Scale up

Policy, Advocacy, Communications