

SA Researcher Proud Recipient of NNIA Award for the Best Scientific Publication

Dr Siyazi Mda, paediatrician and senior lecturer at the University of Limpopo, has won the prestigious Nestlé Nutrition Institute of Africa (NNIA) Award for the best peer-reviewed scientific publication in the field of nutrition for 2010.

NNIA chairman and former chair of paediatrics at the Princess Marina Hospital, Prof Gabriel Anabwani, presented the award at Nestlé SA's head offices in Bryanston in March.

Dr Mda's groundbreaking scientific report entitled, Short-term micronutrient supplementation

reduces the duration of pneumonia and diarrhoeal episodes in HIV-infected children, is featured in the *Journal of Nutrition* (2010;140:969-974).

The study shows a significant reduction in disease episodes and hospital stay in HIV-infected children aged four to 24 months, who participated in the multimicronutrient supplementation programme as part of their treatment regimen during hospitalisation due to pneumonia and diarrhoea.

In his acceptance speech, Dr Mda stated that most common diagnosis for paediatric admis-

sions in South African hospitals is pneumonia and diarrhoea.

"These diseases are more severe in HIV-positive children, who comprise 60% of paediatric admissions in SA. The children are often micronutrient deficient and we know that micronutrient deficiencies result in increased infection rates, even for pneumonia and diarrhoea," said Dr Mda.

Dr Mda's research intends to break this cycle, which is compromising children's potential for recovery. The results also showed that hospitalisation was reduced by 1.6 days and 1.9 days for

children admitted for diarrhoea and pneumonia, respectively.

Prof Anabwani confirmed that the institute is committed to sharing knowledge in the area of nutrition and acknowledged the contribution that scientific publications make in advancing common understanding of nutrition in Africa.

"We reviewed a number of academic articles and Dr Mda's work stood out," added Prof Anabwani, who has extensive leadership experience in paediatric HIV/AIDS care, treatment and clinical research in Africa.



Prof Gabriel Anabwani, presented the NNIA award to Dr Siyazi Mda at Nestlé SA's head offices in Bryanston

Abstract of Prof Mda's paper Short-term Micronutrient Supplementation Reduces the Duration of Pneumonia and Diarrheal Episodes in HIV-infected Children

The duration of pneumonia and of diarrhoea is reported to be longer in HIV-infected than in uninfected children. The researchers assessed the effect of a multimicronutrient supplement on the duration of hospitalisation in HIV-infected children.

In a double-blind, randomised trial, HIV-infected children (four to 24 months) who were hospitalised with diarrhoea or pneumonia were enrolled (n=118) and given a daily dose of a multimicronutrient supplement (containing vitamins A, B complex, C, D, E, and folic acid, as well as copper, iron and zinc at levels based on recommended daily allowances) or a placebo until discharge from the hospital.

Children's weights and heights were measured after enrolment and micronutrient concentrations were measured before discharge. On recovery from diarrhoea or pneumonia, the children were discharged and the duration of hospitalisation was noted.

Anthropometric indices and micronutrient concentrations did not differ between children who received supplements and those who received placebos. Overall, the duration of hospitalisation was shorter ($p < 0.05$) among children who were receiving supplements (7.3 ± 3.9 days) than in children who were receiving placebos (9 ± 4.9). This was independent of admission diagnosis.

In children admitted with diarrhoea, the duration of hospitalisation was 1.6 days (19%) shorter among children receiving supplements than in those receiving placebos, and hospitalisation for pneumonia was 1.9 days (20%) shorter among children receiving supplements.

Short-term multimicronutrient supplementation significantly reduced the duration of pneumonia or diarrhoea in HIV-infected children who were not yet receiving antiretroviral therapy and who remained alive during hospitalisation (*J Nutr* 2010;140: 969-74).