Effect of Enriched Snacks (Moringa oleifera) on Neurobehavioral Outcomes among 3-4 year old children in Malolos Day Care Centers

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Malnutrition is still a problem in the Philippines

- 8th National Nutrition Survey
 - Underweight -19.9% (from 20.2%)
 - Wasting -7.9% (from 7.3%)
 - Stunting 30.3% (from 33.6%)
- Highest rates of underweight and stunting at 3-4 years of age



Long Term Effects of Malnutrition

- Decreased cognitive capacity
- Decreased scholastic achievement
- Reduction of the human capital
- Reduction in the gross domestic product of the country (\$6.6B/year or 6% of the GDP)



Early Malnutrition and IQ

- Undernutrition at an early age affects brain growth and IQ
- Malnutrition at 3 years old associated with
 - poor neurophysiologic performance at 11 years old
 - IQ deficit as high as 15.3 points



Improvement in nutrition in early childhood

- Increase in adult size
- Increase schooling among women
- Increased reading comprehension and intelligence in both genders
- Economic productivity
- Wages increase among men by 46%



IQ scores of the Filipino Child

- In a study by Ostrea, Reyes, Uy, et al (2013):
 - IQ score of 4-6 years old were 1 SD from the norm (83.6 & 83.9 at 4 and 6 years old)
- Based on the Flynn effect, the IQ score of a country should increase by 2 pts every 10 years
- In the Philippines, IQ scores in
 - 1970- 86
 - 2013- 83.9



Effect of School/Community Feeding

- Guatemalan 25-year cohort
 - Food supplementation program up to 2 years of age
 - Protein and iron supplement vs. fortified supplement
 - Results
 - Higher reading comprehension
 - Higher grade attainment



Effect of School/Community Feeding

- COHORTS study (Brazil, Guatemala, Philippines, India and South Africa)
 - Higher grade attainment
 - Higher linear growth
- Association does not hold true for later ages (>2-4 years old) EXCEPT in the Philippines which has upper limit of 8 years old



Proposed food fortification strategy

- Provide 1/3 RENI of Protein and Iron
- Source of iron: Malunggay (Moringa oleifera)
 - Ubiquitous, tropical plant
 - 100 grams of dried malunggay leaves will have
 - 206 calories
 - 27 grams protein
 - 28.2 mg iron



Objective:

- To determine if snacks primarily fortified with malunggay for 10 months in children in day care centers will lead to an:
 - increase in their physical growth.
 - improvement in their neurobehavioral functions,
 - improvement in their hematocrit, hemoglobin,
 total serum protein and serum albumin.

Study Population

- The study population will consist of 3-4 year old children in the barangay day care centers of Malolos, Bulacan
- Rationale for age group:
 - Age group not frequently seen by health provide for well baby check ups since their primary immunizations already completed.
 - Age group often do not meet adequate nutritional needs
 - More standardized neurodevelopmental tests can be administered
 - Barangay daycare centers provide a stable location where the children can be monitored & assessed for a longer duration



Study Design

- Single Blind Randomized Controlled Trial
- Sample size:
 - To achieve a 95% level of significance and power of 80%, change in IQ by 4 points, effect size of 1.5 and drop out rate of 5%
 - 222 per group
- Sampling Design: Cluster Sampling
 - Randomized 8 daycare centers to either the treatment (T) or control group (C).



Intervention

- T group
 - 1/3 RENI for iron and protein
 - <u>9</u> grams of dried malunggay powder & 38 g protein in their snacks during school days
 - Received DSWD funded snack prepared by teachers and parents
- C group
 - Receive the DSWD funded snack prepared by teachers and parents







Baseline Characteristics	Control (212)	Treatment (216)	p-value
Age	4.2 ±.46	3.9 ±.48	0.00
Male Sex	49.1%	49.7%	0.88
Weight	16.3±3.92	15.4±2.85	0.006
Height	101.7±5.29	100.0±5.48	0.002
Head Circumference	49.4±1.71	49.4±1.40	0.658
Serum lead levels	1.84±5.14	7.57±15.3	0.00
Mother's Age	30.4±16.70	28.5±19.73	0.59
Socio-economic status score*	2.09±.533	2.13±.533	0.42

* SES: 1 – lowest to 5 - highest

ANTHROPOMETRY Comparison of PRETEST VALUES <u>between</u> CONTROL & TREATMENT groups





ANTHROPOMETRY Comparison of PRETEST VALUES <u>between</u> CONTROL & TREATMENT groups



<u>At the start:</u> Children in the Control group were significantly heavier (1 kg) and taller (1.6 cm) than the treatment group.



<u>At the end of the study</u>, there was no significant difference in weight. Still, the control group was taller (2 cm) than the Tx group.

ANTHROPOMETRY Comparison of PRE- and POST-TEST within Control & Treatment groups



There was a significant increase in weight, height and HC <u>among control group</u> <u>at the start and end of the study.</u>

ANTHROPOMETRY Comparison of PRE- and POSTTEST within Control & Treatment groups



There was also a significant increase in weight, height and HC <u>among Tx group</u> <u>at the start and end of the study.</u>

ANTHROPOMETRY Comparison of MEAN CHANGE <u>between</u> Control & Treatment groups

CONTROL-Pretest



The mean increase in weight was significantly higher among Tx group

LABORATORY RESULTS Comparison <u>between</u> CONTROL & TREATMENT groups



LABORATORY RESULTS Comparison of POSTTEST VALUES <u>between</u> CONTROL & TREATMENT groups



<u>At the start of the study</u>, there was no difference in H/H but at the end of the study, the TX group has a significantly higher Hct (2 pts). Tx group has higher levels in TPAG at the start and end of study.

LABORATORY RESULTS Comparison of PRETEST & POSTTEST within CONTROL & TREATMENT groups



Comparing pre and post study values within groups, the TX group has a significantly higher Hct at the end of the study.

LABORATORY RESULTS Comparison of MEAN CHANGE <u>between</u> CONTROL & TREATMENT groups



With regards mean change, there was a significantly higher mean increase in H/Hct in the TX group.

COMPOSITE IQ SCORES (WPPSI-III) Comparison of PRETEST VALUES <u>between</u> the CONTROL & TREATMENT GROUP



<u>At the start of the study,</u> the control group has a significantly higher composite scores for performance and processing speed as well as the full IQ score (92.03 vs 88.76).

COMPOSITE IQ SCORES (WPPSI-III) Comparison of POSTTEST VALUES <u>between</u> the CONTROL & TREATMENT GROUP



<u>At the end of the study</u>, there were no significantly difference in the verbal, performance and processing speed composite scores <u>but a significantly higher language and</u> <u>full IQ scores (91.88 vs 94.09) in the treatment group compared with the control group.</u>

COMPOSITE SCORES (WPPSI-III) Comparison of PRE- & POST-TEST within the CONTROL & TREATMENT groups



- Comparing pre and post study values, only the processing speed significantly Increased in the control group. TX group has a <u>significant increase in performance</u>, <u>processing speed and full IQ (88.76 to 94.08)</u>

- Reduction in scores in Language in both group may mean no change in raw scores but was divided by higher denominator – age).

COMPOSITE SCORES (WPPSI-IV) Comparison of Mean Change <u>between</u> CONTROL & TREATMENT



- Comparing the mean changes between the TX and control group, there was a <u>significantly higher mean increase in the performance</u>, processing and Full IQ scores in the TX group.

- The mean reduction of scores in the Verbal and Language scores were significantly larger in the Control group.

Adverse effects

- Snacks were all consumed
- No reported food intolerance or diarrhea during the study period



Summary of Results

- At baseline, the control group were significantly
 - Older (4.2 vs 3.9 years old)
 - Heavier (16.3 vs 15.4 kg)
 - Taller (101.7 vs 101 cm)
 - Lower Blood lead levels (1.84 vs 7.57)
- Anthropometric measurements:
 - Control group still taller than treatment group
 - Anthropometric measurements at end of the study were significantly higher from baseline in both groups
 - Rate of rise of weight significantly higher among treatment group compared to control group

Summary of Results

- Laboratory Results:
 - No difference Hb/Hct and TPAG between the 2 groups at the start of the study
 - At the end of the study:
 - HB/HCT significantly higher among the treatment group
 - TPAG levels higher in treatment group

Summary of Results

Baseline IQ scores

- No significant difference between the 2 groups
 - Verbal
 - Language

- <u>Control group</u> significantly higher
 - Performance
 - Processing speed
 - Full IQ

At the end of the study

- No significant differences
 between the 2 groups
 - Verbal
 - Performance
 - Processing Speed
- <u>Treatment group</u> significantly higher
 - Language
 - Full IQ (5.33 points increase)

Discussion

- After 10 month enriched snacks,
 - There were already significant improvement in the treatment group
 - Weight
 - Hemoglobin
 - IQ





Discussion

- Economic analyses in the US suggest:
 - Increasing the IQ by 1 point -increases lifetime earnings by 1.8–2.4%.
- A recent modelling exercise in the UK postulated that a 2-point difference in IQ would increase lifetime earnings by between £35 000 and £72 000.







Source: Potrafke (forthcoming).

Nutrition is <u>only one</u> of the variables affecting IQ

- Early feeding- breastfeeding
- Socio-economic status
- Maternal IQ
- Parental educational attainment
- Nurturing environment
- Environmental toxins
- Etc.



Conclusion

- Enrichment of snacks with iron (*Moringa*) and protein among daycare center children led to:
 - Significant increase in IQ (5.3286 vs -0.012)
 - Significant increase in weight (1.59 vs 1.18kg)
 - Significant increase in Hct (0.046 vs 0.022)

