Investigating Sustainable Options for Treating Malnutrition among People Living with HIV in Vietnam

Approximately 400,000 people are living with HIV in Vietnam, and according to a 2013–2014 study by Vietnam's National Institute of Nutrition (NIN), about 26% of adults living with HIV are malnourished, some of whom suffer from severe acute malnutrition. An effective way to help treat severe acute malnutrition among people living with HIV is the provision of ready-to-use therapeutic food (RUTF).

In 2009, NIN, the Institut de recherche pour le développement (IRD), and UNICEF collaborated to formulate a rice/soy/mung bean-based RUTF that could be produced in Vietnam. The result, called High-Energy Bar for Integrated Management of Acute Malnutrition (HEBI), was developed as an alternative to the imported peanut-based RUTF, Plumpy'Nut.

With funding from the U.S. President's Emergency Plan for AIDS Relief (PEPFAR)/ Vietnam and technical support from the Food and Nutrition Technical Assistance III Project (FANTA), IRD collaborated with NIN in 2011 to assess the comparative acceptability of Plumpy'Nut and the locally produced HEBI among children and adults with HIV. The study focused on the products' acceptability and organoleptic properties such as taste and texture. Two studies were conducted simultaneously, one with 80 HIV-positive children 3–7 years of age attending the National Pediatric Hospital in Hanoi and one with 80 HIV-positive adults attending the Hospital for Tropical Diseases in Ho Chi Minh City. FANTA provided technical assistance for sampling, training of data collectors, and data analysis.

The Link between Malnutrition and HIV

Weight loss and malnutrition are associated with HIV, and low body mass index at diagnosis of HIV infection significantly increases the risk of mortality. Chronic weight loss occurs in around 20 percent of patients with HIV, and severe weight loss is one of the strongest indicators associated with morbidity and reduced survival, even with antiretroviral therapy. Evidence has shown that macronutrient supplementation has positive effects on weight gain and adherence to medication in people living with HIV.

Findings

Both HEBI and Plumpy'Nut were acceptable to the sample of children and adults living with HIV who were included in the study. Children tended to prefer HEBI over Plumpy'Nut, and adults indicated a strong preference for HEBI. Results also showed significantly higher weight gain over the 4-week study period in both the children and adults who received RUTF, compared with those randomly assigned to the control group who did not receive RUTF.

Next Steps

In 2012 UNICEF conducted a General Manufacturing Practices inspection of NINFOOD, which produces HEBI, and based on the results, accepted the product for use in Vietnam. FANTA has since worked with USAID/Vietnam's SMART TA Project and NIN to estimate quantities of HEBI needed to treat severe acute malnutrition in people living with HIV in the country's nine PEPFAR-supported provinces. NIN is advocating with the National Assembly and Ministry of Health to include HEBI in the list of medicines that are covered by health insurance and to integrate the product into programs to treat severe acute malnutrition.

Learn More

Visit **www.fantaproject.org** to access the research report: *Acceptability of Two Ready-to-Use Therapeutic Foods among HIV-Positive Patients in Vietnam.*

Locally produced HEBI was approved for use in Vietnam by UNICEF as an alternative to imported Plumpy'Nut.

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