

MUAC-only protocols: drawbacks on SAM and MAM targeting and programmatic aspects

Analysis of anthropometric data from population-representative
nutritional SMART surveys

CDC/ACF – France/AAH – Canada

What do we mean by...

SAM and MAM targeting:

- SAM: WHZ<-3 AND/OR MUAC<115mm AND/OR oedema
- MAM: <-3 WHZ <-2 AND/OR 115mm <MUAC<125mm

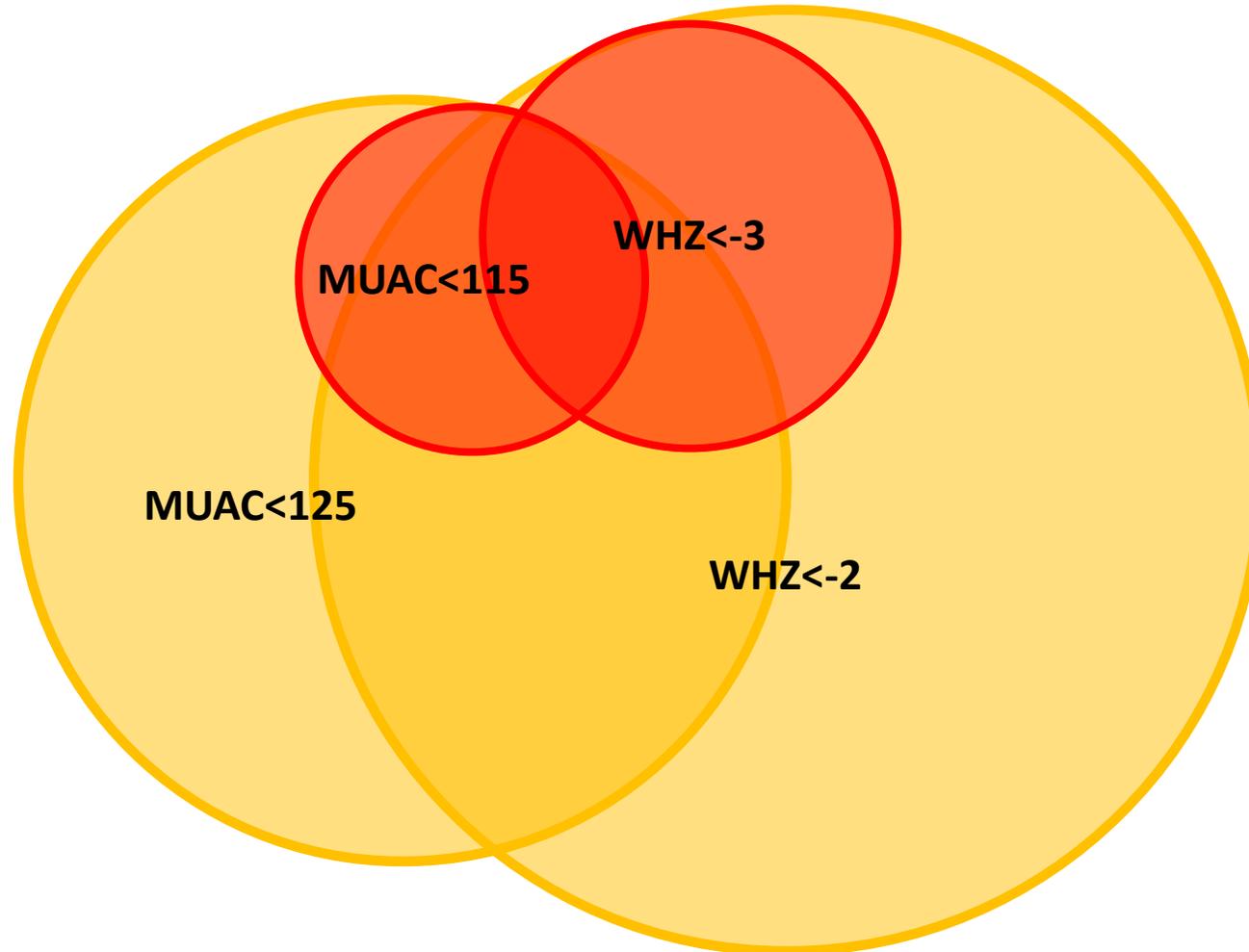
MUAC-only approaches

- MUAC measurement or oedema as sole criteria for detection, admission and discharge
- Expanded MUAC criteria of screening & admission and triage of cases based on MUAC cut-off of <125mm and with different dosage of RUTF

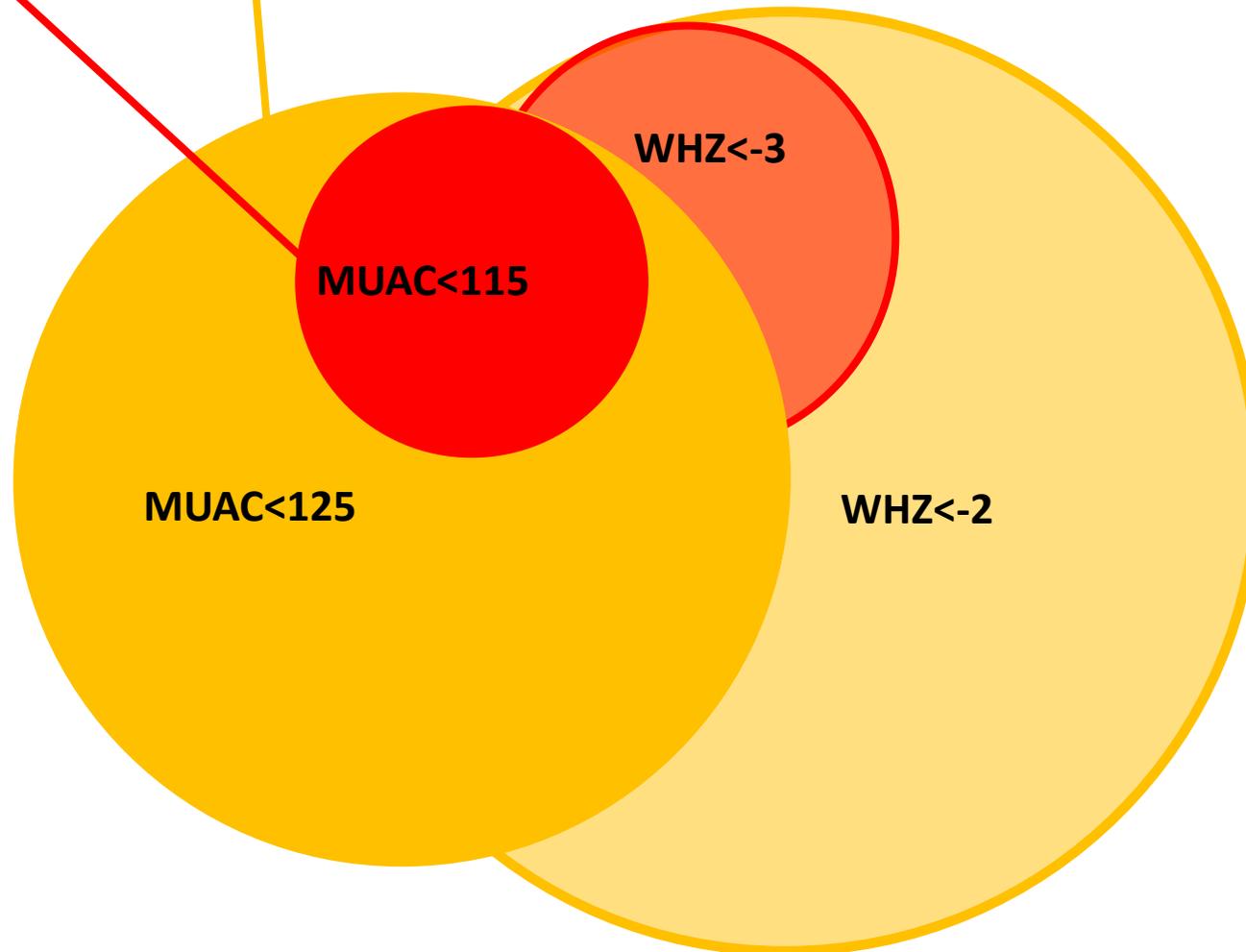
TERMINOLOGY

1. **Excluded** : not detected and not admitted for treatment
2. **Undertreated** : SAM children treated will be treated as MAM
3. **Ignored risk** : SAM children with both low MUAC and low WHZ detected and treated but their specific need/risks will be ignored
4. **Correctly treated** : detected and treated according to standard WHO recommendations

We retrieved **SAM** and **MAM** (UN definition) from 550 surveys in 22 countries

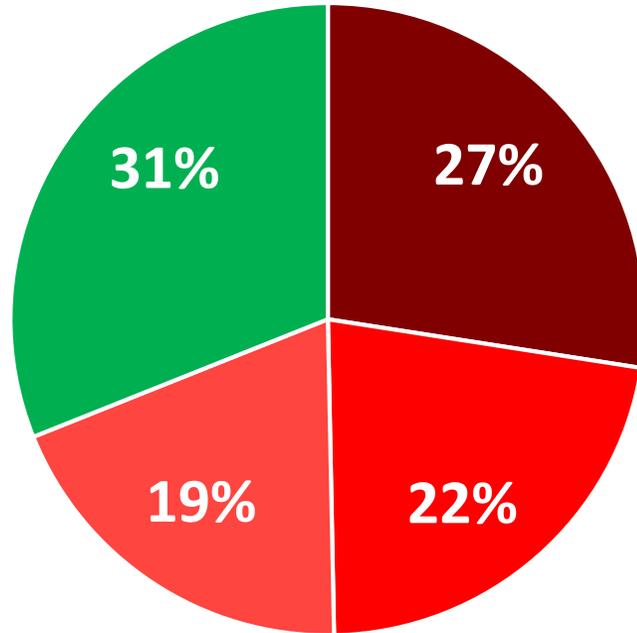


SAM and **MAM** targeted by MUAC-only approaches

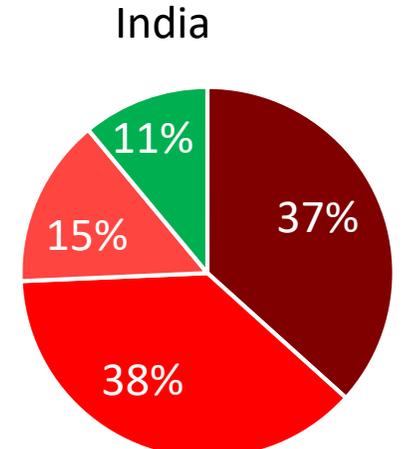
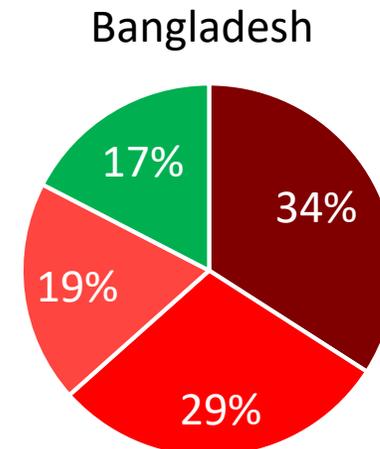
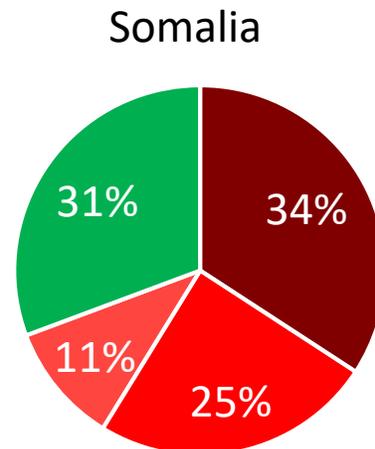
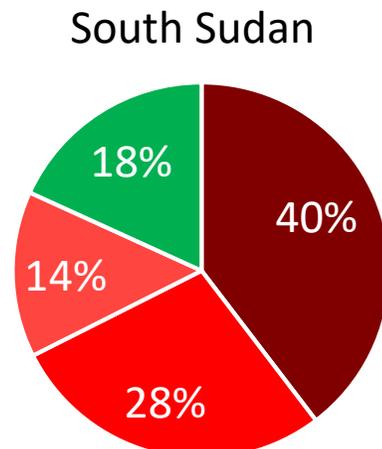
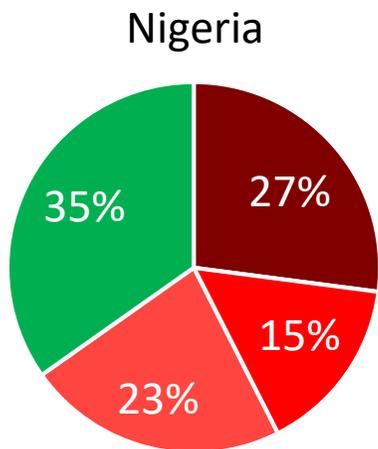


MESSAGE 1: DRAWBACK ON SAM TARGETING (2/2)

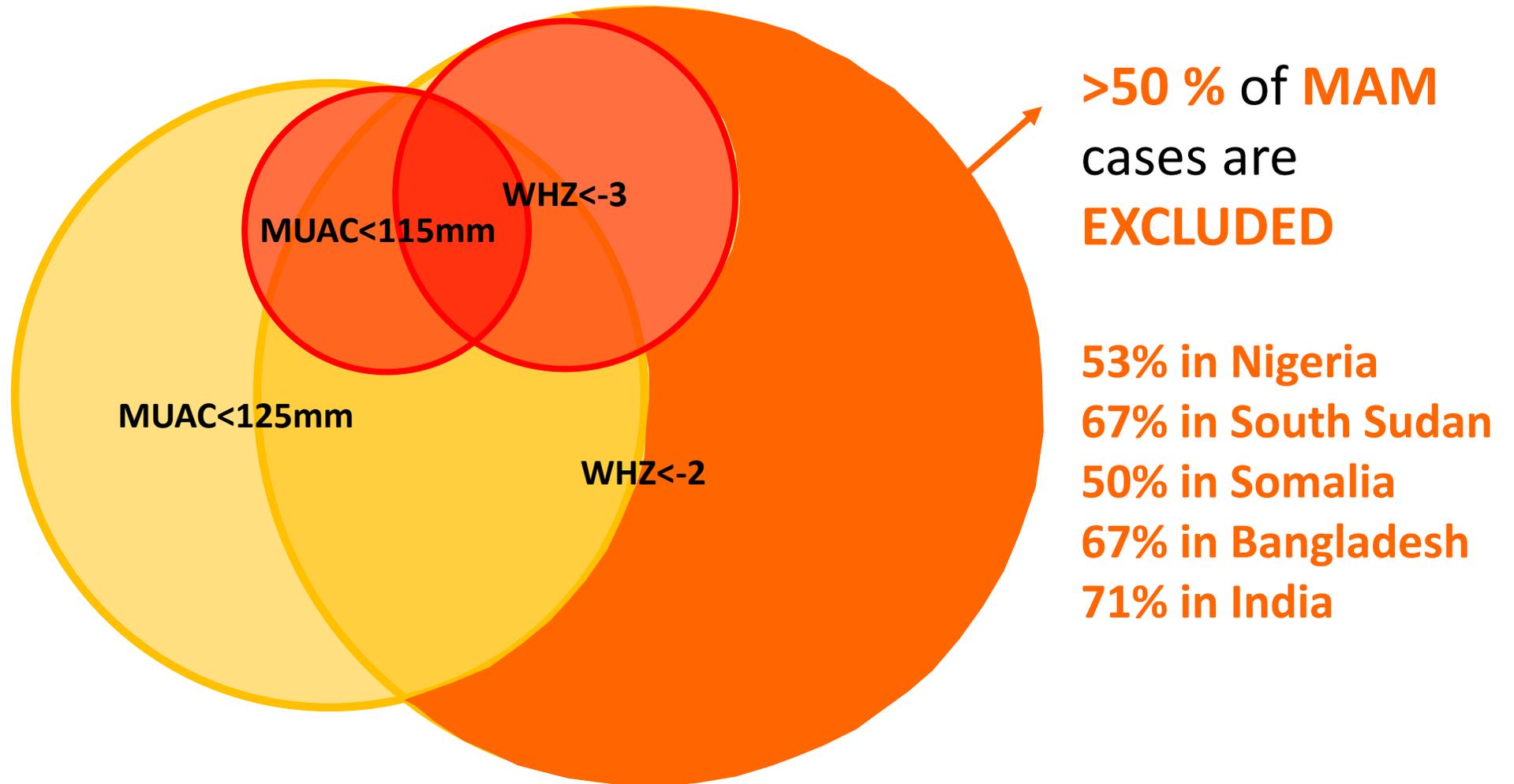
- Excluded
- Undertreated
- Ignored risk
- Correctly targeted



50% of the SAM caseload excluded or undertreated



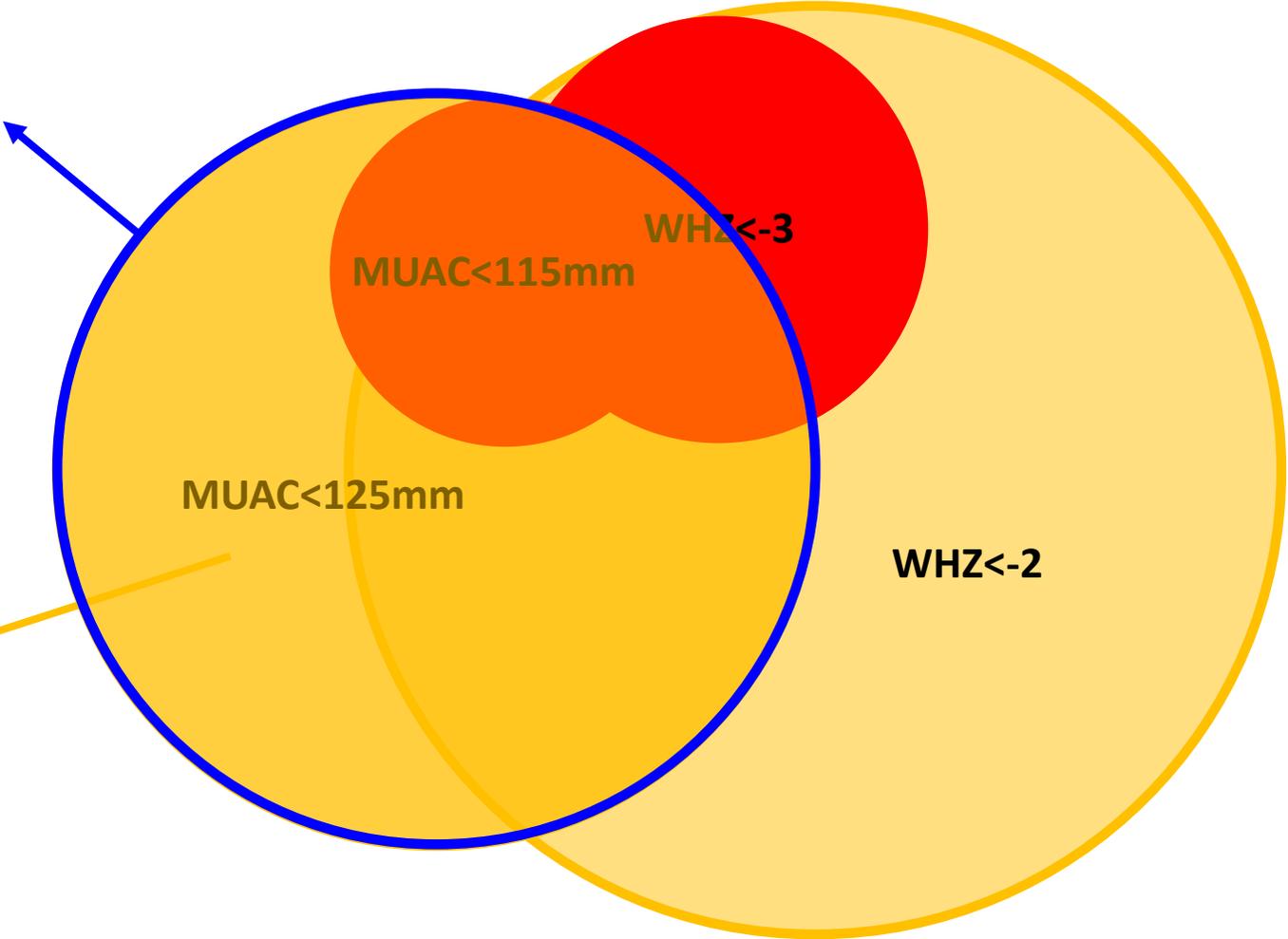
MESSAGE 2: DRAWBACK ON MAM TARGETING



MESSAGE 3: DRAWBACK ON PROGRAMMATIC ASPECTS

2.4 times more children

70% of target are MAM



CONCLUSIONS

Our findings indicate large restriction of SAM and MAM target that will not receive treatment as per WHO recos under MUAC-only and expanded MUAC protocols.

Our findings suggest that programs target increase while programmatic costs are likely to be directed towards the less severely affected children.

DO WE EXPLORE ALL POSSIBLE SOLUTIONS?

- Using digitalization: Photo & 3D imaging diagnosis
- Targeting beyond anthropometry only: Anthropometry + recent history (morbidity, weight loss, IYCF practices), Bio-markers
- Targeting integrated in existing service packages: Health delivery platforms: IMCI (AleDia), reproductive health, neonatal care; Revisiting Growth monitoring and promotion?
- Linking with other sectors activities: Maximizing targeting at each contact point (WASH, food aid, cash etc. together with health) ex. WASH'NUTRITION
- Comprehensive piloting to adapt acute malnutrition targeting and treatment to what current health services can bear and deliver upon: Pilots in West Africa

THANKS