
Book Review

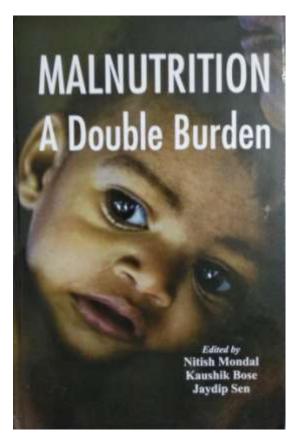
Malnutrition: A Double Burden

Edited by: Nitish Mondal, Kaushik Bose and Jaydip Sen. ISBN 9789387587427. pp xvi +351. Hardback B.R. Publishing Corporation, Delhi. 2018.

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forms is a global problem."

It is an established fact that good nutrition is the key to a healthy life. Nutrition is not something which becomes a reality as it is wished. A whole set of socio political structures is involved in determining the earning capacity of the people. In the poor and developing nations even if the people work hard and with honesty they can't hope to earn as much to support their family and provide nutritious food as is required and thus suffer from malnutrition. If the food is inadequate or far from being a balanced one, the net result would be growth retardation among children. and even child deaths. But the affluent nations on the other hand with unlimited resources have a problem of overweight and obesity.

World Health Organization and FAO realised this and therefore Dr. Francesco Branca, Director of Nutrition for Health and Development, WHO, and Anna Lartey, Director of Nutrition Division, FAO emphasized that "It's not as simple as hunger affecting people in poor countries, or obesity being an issue for people in rich countries – malnutrition in all its

In the light of the above statement, the present book "Malnutrition: A Double Burden" edited by Nitish Mondal, Kaushik Bose and Jaydip Sen extends the horizon of the problem of malnutrition and its alleviation. It is a compendium of 19 research papers by leading International researchers touching upon various facets of malnutrition in different countries, populations and tribes and how each one them is tackling this problem with their own schemes and policies.

The first paper by Kishawi et al. introduces different forms of malnutrition, its causes and how it affects the children. On one side is the nutritional deficiency while on the other is overnutrition leading to obesity and overweight. Transition of societies and urbanisation being factors responsible, efforts to reduce this burden of malnutrition has been suggested and the action plans for this have been laid out.

Second paper by Pradeepa et al. has focussed on obesity in the Indian context. A state-wise comparison of childhood, adolescent and adult obesity reflects a growing risk among urban children and adults equally. Specific causes include lack of physical activity and novel risk factors have also been discussed

Kirchengast and Hartmann demonstrated how maternal malnutrition affects the fetal growth which is reflected in the birth outcome. Newborns of malnourished mothers during pregnancy tend to be smaller and of low birth weight. Their own study indicated a prominent effect of malnutrition onthe fetal growth especially during the third trimester of pregnancy.

Sinha and Pati in their paper discuss the measures to face the challenge of malnutrition in India. Their recommendation is the proper use of primary care and public health services by the affected children. Driving home the gravity of the problem among children they have used the data from NFHS-4 and NFHS-5 and with the help of various indicators of malnutrition. They have mentioned the role of various governmental schemes like ICDS, NHM, mid -day meal schemes roped in to tackle the menace of malnutrition.

Wickramasinghe discussed various indicators and criteria used to designate malnutrition and suggested the primary care to be strengthened. Programmes enhancing the diet of pregnant mothers, improving the food of the infants are some of the steps which must be undertaken to tackle malnutrition. Growth monitoring of the infant and young child for stunting and wasting would bring to focus those children who need help.

Addressing the issue of hunger affecting the nutrition among children and adults, Arlappa has highlighted the nutritional requirements especially the micronutrients. The study has shown deficiency of almost every nutrient in the diet of young children. Programme of fortification of food and supplementation must be strengthened and a change in the mindset of people is required. Arlappa also elaborated on stunting among children in the Indian context presumably because of malnutrition. Children born to working mothers had a greater tendency for stunting. The mothers with lower BMI during pregnancy and lower weight gain during pregnancy gave birth to stunted children. Data were provided from NFHS-3 to highlight stunting among children in different states of India. Time trends in the proportion of stunted children show a drastic reduction from 1970s onwards.

Nwak-Szczepanska et al. describe the problem of malnutrition among Polish children. Polish surveys conducted between 1966 and 2012 showed a clear reduction in the proportion of malnourished boys and girls thus reducing the burden to almost half. The secular changes in this parameter reflected an overall betterment of the environment. While the burden of underweight decreased, however, the overweight and obesity increased during this period.

Permyakova and Godina observed that the hypokinetic urban children spent less time outdoor and consumed more calories. The more the calories consumed the more the accumulated fat over the body was. This trend is relatively of latest origin and quite common elsewhere also which is a result of better life style and availability of excess food.

Patil and Aneesh discussed various factors influencing malnutrition. Among various factors responsible for underweight are poverty, lack of parental education and health services. Lack of physical activity, junk food and altered diet and overall change in the life style of people resulted in overweight and obesity in India. Aneesh and Patil touched upon another

aspect of the Indian scenario of a thrifty genotype responsible for disease in later life. Taking a cue from thin-fat babies the risk of disease increases because of altered metabolism.

Roy et al. investigated underweight and overweight among children of different Indian States. They found that the proportion of underweight, stunted and wasting among urban children was significantly lower than their rural counterparts. Illiteracy emerged as a strong factor resulting in malnutrition among children. India is facing a double whammy of undernutrition and overnutrition.

Kshatriya and Acharya studied tribal populations of India for blood pressure and found that in spite of suffering malnutrition, 9% of these tribals were hypertensive. Many tribal populations eat more of fats, oil and sugar but lesser quantities of vegetables.

In a longitudinal study, Mithun Das observed that during the last decade due to changes in the life style among Totos, an original population of India, there has been a significant increase in body weight, per cent of body fat, waist circumference and waist hip ratio. It shows an increased risk profile of this population. Mithun Sikdar in his paper highlighted the global scenario of undernutrition and obesity with the help of maps and focussed on the plight of Mising tribal children of North East India who are stunted and stunted but overweight. Nutrigenomics holds the potential for removing the dual burden of malnutrition.

Mondal et al. in their paper found the proportion of undernutrition and overweight and obesity in different states of India. Commenting on this dual burden of malnutrition, the authors emphasized the causes' and the ways to combat this malady.

Ghosh and Biswas described nutritional sensors and indicators for the assessment of malnutrition and how nutritional surveys are conducted. Role of various anthropometric and biochemical indicators has been discussed and how these can be applied to investigate the situation of a community regarding malnutrition.

Debnath et al. focussed their attention on the prevalence of double burden of malnutrition in Indian children and the indicators used to evaluate it. The role of governmental policies and agencies is discussed along with the future recommendations. While the undernutrition is rampant, the problem of overweight and obesity is just emerging and is being tackled right away.

Randhawa et al. in their specific study on obese and non-obese females found that metabolic syndrome is very rampant among these women. Using 5 different International criteria to assess metabolic syndrome among these women majority of them gave similar inferences. The non-obese females have lower risk of metabolic syndromes than the obese but due to higher levels of abdominal obesity they are at a higher risk.

The authors of various papers seem to have done their home work meticulously to come up with detailed criteria for assessing malnutrition, informing us of the gravity of the situation in different counties and states by letting us know the proportions of children and adults suffering from malnutrition, placing before us what the governmental agencies and NGOs are doing to confront the menace of malnutrition and the role of International agencies including the WHO, FAO and UNESCO for pressing the governments into action. The book is a goldmine of data on different global situations and painstakingly compiled by the editors and

should adorn the bookshelves of researchers the world over, the teachers, researchers and students of anthropology, public health and national policy. It is a welcome addition to the already existing information on "dual burden" of malnutrition.