



en-net summary

En-net¹ is a free, open resource for frontline nutrition practitioners to gain access to prompt technical advice for operational challenges where answers are not readily accessible. This article summarises some of the key en-net posts and debates between September 2022 and February 2023.

Over the past six months, 53 questions have been posted on en-net. The management of acute malnutrition/wasting was the most active forum area (with 16 questions posted), followed by assessment and surveillance (13) and infant and young child feeding (11).

The question that generated the most discussion on en-net focused on concern about non-evidence-based guidance regarding breastfeeding and cholera.² Breastfeeding is protective against cholera because it boosts an infant's immune system and eliminates the risks of contaminated water, both directly and when mixed with formula, and breastfeeding is advised during cholera treatment and recovery. Some guidance advised mothers with cholera to wash their breasts with soap and warm water or even disinfectant before breastfeeding. The discussion has resulted in an update to the Interim Technical Note for Treatment of Cholera in Pregnant Women,³ which reiterates that breastfeeding should always be encouraged and, for mothers with cholera who are in a treatment centre with a neonate, to wash their breasts if there is reason to believe they have come into contact with stool or vomit. The update also warns that any erecting of barriers to breastfeeding should be evidence-based and applied only on a case-by-case basis, given the overwhelming importance of breastfeeding for child health and development. Similarly, a large number of responses were posted to a question seeking evidence of donations of breastmilk substitutes during the

2023 Türkiye Syria earthquake response, with en-net users sharing numerous examples.⁴

A concern was raised on en-net regarding the short-term and medium-term consequences of consuming ready-to-use therapeutic food for healthy infants.⁵ En-net users shared evidence on the post-discharge body composition of children treated for wasting, which broadly showed that ready-to-use therapeutic food does not lead to excessive fat gain (Binns & Myatt, 2018; Lelijveld et al, 2021; Fabiansen et al 2017). A similar discussion was had on whether rapid rehabilitation of severe wasting increased the risk of non-communicable diseases in later life,⁶ sparked by a study based on the care of wasted children before the invention of ready-to-use therapeutic food. En-net users shared research that found that children with severe wasting did not deposit excess fat following treatment with ready-to-use therapeutic food at standard doses in an outpatient setting (Binns & Myatt, 2018). En-net users also argued for the need to prioritise immediate survival, healthy growth and development.

Other questions that generated a high level of engagement on en-net included the use of mid-upper-arm circumference in children under six months of age;⁷ how to correctly interpret height-for-age in populations over five years of age;⁸ how to manage a moderately wasted child with signs of a vitamin A deficiency;⁹ and how to handle 'don't know' entries or missing data when creating dietary diversity indicators, such as minimum acceptable diet.¹⁰

To join any discussion on en-net, share your experience or post a question, visit <https://www.en-net.org/> or <https://fr.en-net.org/default.aspx>

For any feedback on en-net, please contact <https://www.en-net.org/>

- ¹ <https://www.en-net.org/question/4816.aspx>
- ² See the discussion at <https://www.en-net.org/question/4690.aspx>
- ³ See the guidance note at <https://www.gtfcc.org/wp-content/uploads/2020/11/gtfcc-interim-technical-note-treatment-of-cholera-in-pregnant-women-1.pdf>
- ⁴ See the discussion at <https://www.en-net.org/question/4791.aspx>
- ⁵ See the discussion at <https://www.en-net.org/question/4713.aspx>
- ⁶ See the discussion at <https://www.en-net.org/question/4762.aspx>
- ⁷ See the discussion at <https://www.en-net.org/question/4789.aspx>
- ⁸ See the discussion at <https://www.en-net.org/question/4692.aspx>
- ⁹ See the discussion at <https://www.en-net.org/question/4797.aspx>
- ¹⁰ See the discussion at <https://www.en-net.org/question/4714.aspx>

References

- Binns P & Myatt M (2018) Does treatment of short or stunted children aged 6–59 months for severe acute malnutrition using ready-to-use therapeutic food make them overweight? Data from Malawi. *Archives of Public Health*, 13, 76, 78.
- Fabiansen C, Yaméogo CW, Luel-Brockdorf AS et al (2017) Effectiveness of food supplements in increasing fat-free tissue accretion in children with moderate acute malnutrition: A randomised 2 × 2 × 3 factorial trial in Burkina Faso. *PLoS Med*, 11, 14, 9, e1002387.
- Lelijveld N, Musyoki E, Adongo SW et al (2021) Relapse and post-discharge body composition of children treated for acute malnutrition using a simplified, combined protocol: A nested cohort from the COMPAS RCT. *PLoS One*, 3, 16, 2,



possible by the generous support of the American people through funding by the United States Agency for International Development (USAID).

For more information regarding the IYCF-E Hub, and to access the resources for yourself, please visit <https://iycfehub.org/>

Tools for Infant and Young Child Feeding in Emergencies (IYCF-E)

Like any area of work within the field of nutrition, Infant and Young Child Feeding in Emergencies (IYCF-E) relies heavily on a comprehensive suite of reliable resources. The IYCF-E Hub aims to deliver such a suite in the form of a global portal for accessing a collection of relevant resources for use in humanitarian contexts. The Hub offers advanced search functions to appropriately seek out relevant information, while organising resources by collection – such as the Ukraine war response, the Türkiye–Syria earthquake response and the assessment of needs, orientation and

training, to name a few. In each collection, both visual and text-based resources can be discovered from a wide variety of reputable international and local organisations active in the area. Where relevant, tools translated into local languages are included.

The IYCF-E Hub partners with USAID, Save the Children, IFE Core Group, PATH, SafelyFed Canada, Action Against Hunger, and ENN.

This platform was developed by Save the Children with the support of the members of the Steering Advisory Group and was made