

# Countries slow to use lifesaving diarrhea treatments for children

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Despite evidence that low-cost diarrhea treatments such as lower osmolarity oral rehydration salts (ORS) and zinc supplements could drastically reduce the number of deaths among children, little progress has been made in implementing these life-saving techniques, according to researchers at the Johns Hopkins Bloomberg School of Public Health. They examined the implementation of current treatment guidelines and found that few countries are equipped to quickly adapt policies, and many struggle to develop and maintain the recommended supplies. The analysis is featured in the October issue of Bulletin of the World Health Organization.

"Low osmolarity ORS and zinc are inexpensive, safe and easy to use and have the potential to dramatically lower diarrhea morbidity and mortality," said Robert Black, MD, MPH, co-author of the article, chair and Edgar Berman Professor of International Health at the Bloomberg School. "Many countries have changed diarrhea management policies to include low osmolarity ORS and zinc, but there is a significant gap between policy change and effective program implementation, leaving few children treated appropriately. In many countries, adopting child health policies is complex and the registration and importation of zinc supplements requires input from drug regulatory agencies and procurement officials, making it difficult to secure these necessary supplies."

Diarrhea remains the second leading cause of death among children globally, accounting for 18 percent of childhood deaths and 13 percent

of all disability-adjusted life years. In 2004 the World Health Organization (WHO) and UNICEF released a joint statement recommending countries switch to a lower osmolarity formulation ORS and introduce zinc supplements for 10 to 14 days to decrease diarrhea deaths among children. The recommendation came after scientific consensus that this treatment has the potential to reduce more than three quarters of all diarrhea associated deaths. Large scale programs in Bangladesh and India have demonstrated that together they can decrease unnecessary use of antibiotics and reinvigorate community management of diarrhea while keeping costs low and saving lives.

"Of 68 priority countries, very few have zinc widely available and coverage within all countries is extremely limited. Ranked by leading global economists as one of the most cost-effective intervention for advancing human development, zinc supplementation in [diarrhea](#) management should be a top global health priority," said Christa Fischer Walker, PhD, MHS, lead author of the analysis and an assistant scientist with the Bloomberg School's Department of International Health.

Source: Johns Hopkins University ([news](#) : [web](#))

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