Effectiveness of Iron Supplementation in Reducing Iron Deficiency Anemia in India

Dear Sir,

We read with great interest the article titled, “Effectiveness and Feasibility of Weekly Iron and Folic Acid Supplementation to Adolescent Girls and Boys through Peer Educators at Community Level in the Tribal Area of Gujarat.”[1] We seek clarifications from the authors on a few methodological issues so that the readers of *Indian Journal of Community Medicine* are benefitted.

The authors have documented that the mean rise of hemoglobin (Hb) levels among adolescent boys was 1.5 g/dl and that among adolescent girls was 1.3 g/dl after 3 months of IFA supplementation. Earlier studies conducted by Vir et al.[2] and Bansal et al.[3] showed that the mean rise in Hb levels was by 1 g/dl after administration of IFA tablets weekly for 6 months to adolescents. An earlier systematic review conducted an assessment of the effect of administration of IFA supplementation. Earlier studies conducted by Vir et al.[2] and Bansal et al.[3] showed that the mean rise in Hb levels was by 1 g/dl after administration of IFA tablets weekly for 6 months to adolescents. An earlier systematic review conducted an assessment of the effect of administration of IFA supplementation on increase in Hb levels in children. They reported mean increase in Hb to be 0.74 g/dl.[4] Hence, the possible reasons for a mean increase in Hb in the range of 1.3-1.5 g/dl after only 3 months of weekly IFA supplementation needs to be clarified.

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In the present study, Hb was estimated by HemoCue method. Comparative studies have shown that HemoCue method overestimates the hemoglobin concentrations when compared with the standard cyanmethemoglobin method.[5,6] The time interval between opening of the microcuvette container and their use, and humid climatic conditions may result in poor validity of estimation of Hb done by HemoCue method. The authors have not mentioned regarding the internal and external quality control measures adopted for estimation of Hb undertaken by them.

The readers would be greatly benefitted if increase in Hb from baseline among subjects with levels of 7, 8, 9, 10, and 11 g/dl of Hb may be mentioned after supplementation of 12 doses of IFA. This would help in understanding the increase in Hb at various levels of anemia. Also, which group of adolescents became nonanemic will also be explicitly depicted.

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There are no conflicts of interest

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Response from the Authors (Shah S et al.)

As rightly pointed out, the supplementation was given for a period of 52 weeks, not 12. April – June (2013 & 2014) was data collection period for baseline & endline findings; using the same Hemocue method.

Considering accuracy and ease of use in field conditions,[1] we chose Hemocue as the reference method for our study. Further, systematic review from 18 studies shows that Hemocue was generally precise and had good correlation to reference laboratory tests with sensitivity between 75–91%, specificity between 88–100% and positive predictive values ranging from 75-80% for the detection of anaemia.[2] The device was simple to operate, easily portable and rapid digital display of results was also an advantage.[2]

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World Health Day 2017

What is depression?
Depression is a common mental disorder characterized by persistent sadness and a loss of interest in activities that one normally enjoys, accompanied by an inability to carry out daily activities, for at least two weeks.

In addition, people with depression normally have several of the following symptoms: Loss of energy; Change in appetite; Sleeping more or less; Anxiety; Reduced concentration; Indecisiveness; Restlessness; Feelings of worthlessness, guilt, or hopelessness; Thoughts of self-harm or suicide.

Depression causes mental anguish and can impact people’s ability to carry out even the simplest everyday tasks, with sometimes devastating consequences for relationships with family, friends & colleagues.

Depression can be effectively prevented and treated by psychotherapy &/or antidepressant medication.

What is the burden of depression?
Globally one in four people will be affected by mental or neurological disorders at some point in their lives. An estimated 350 million people are affected with depression.

National Mental Health Survey 2015-16 data reveals that nearly 15% Indian adults need active intervention for one or more mental health issues. One in 20 Indians suffers from depression.

The risk is increased by poverty, unemployment, life events such as the death of a loved one or a relationship break-up, physical illness and problems caused by alcohol and drug use.

What is the campaign: Depression: Let’s talk?
It is a broad based campaign, with specific focus on vulnerable population (demographic, geographical, social, financial), aimed at:

• creating a better informed general public on depression, its causes and possible consequences, including suicide (second leading cause of death among 15-29-year olds globally), and help available for prevention and treatment;
• encouraging people with depression to seek help; and
• facilitating family, friends and colleagues of people living with depression, to provide support.

Talking about depression, whether with a family member, friend or medical professional; in larger groups, for example in schools, the workplace and social settings; or in the public domain, in the news media, blogs or on social media, helps break down this stigma, ultimately leading to more people seeking help.