

To: The WHO Expert Committee on the Selection and Use of Essential Medicines

From: Spencer Kirk, Founder and Managing Director of Kirk Humanitarian

Re: Support for Inclusion of Multiple Micronutrient Supplementation (MMS) on EML

Date: 6 May 2021

Dear WHO Expert Committee Members,

On behalf of Kirk Humanitarian, I wish to express my support of the application to the WHO Essential Medicines List for Multiple Micronutrient Supplementation for pregnant women.

For nearly 20 years, Kirk Humanitarian has had a singular mission: to accelerate availability, access, uptake, and use of UNIMMAP MMS (United Nations International Multiple Micronutrient Antenatal Preparation Multiple Micronutrient Supplements) for women at risk of undernutrition during pregnancy. We are a not-for-profit foundation that partners with manufacturers, develops guidance, and looks for new opportunities to lower the cost of MMS and increase demand. We generate evidence to make the introduction and scaling of MMS programs effective and efficient. And we advocate for the adoption of MMS programs and policies in an effort to reduce global inequity as a critical facet of maternal and infant health. (Kirk Humanitarian does not have financial ties to or investments in any manufacturing companies.)

Pregnant women are at risk of undernutrition, and many women in low- and middle-income countries (LMICs) don't receive adequate nutrition through diet alone during pregnancy. We know that inadequate nutrition can lead to critical health risks to the infant, such as low birth weight, preterm delivery or being born small for gestational age, and even death. Most pregnant women often have access only to iron and folic acid supplements (IFA). However, an extensive and growing evidence base shows that UNIMMAP MMS – a specific formulation of MMS containing 15 essential vitamins and minerals created by experts convened by UNICEF – demonstrates that its use (as compared to pregnant women using IFAS) supports maternal health while reducing critical health risks to the infant.

The 2019 Cochrane Review, *The Lancet* Series on Maternal and Child Undernutrition Progress (March 2021), and the New York Academy of Sciences are unanimous in their support of the scale up of antenatal MMS over IFA for preventing adverse pregnancy and birth outcomes and improving maternal health in LMICs.<sup>i</sup> The 2021 *Lancet* Series, *Effective interventions to address maternal and child malnutrition: an update of the evidence,* noted that using MMS in LMICs reduced the risk of stillbirth by 9%, low birthweight by 15%, preterm birth by 4%, and babies born small-for-gestational age (SGA by 7%. The risk of diarrhea among children whose mothers had been using MMS, instead of IFA, was also reduced by 16%, and executive functioning among school-aged children was improved in follow-up at ages 7 to 14 years in three studies.<sup>ii</sup>

At this moment, nations around the globe are struggling to contain the ongoing COVID-19 pandemic. We know the virus's impact on maternal nutrition will disproportionally affect women in LMICs. We agree



with the recommendation to introduce MMS to women in populations with a high prevalence of nutritional deficiencies or where food distribution is disrupted.<sup>iii</sup>

The need is high, and the proof is clear: UNIMMAP MMS is safe, effective, and affordable. It is cost-effective and can be — and is being — produced at cost-parity with IFA. The addition of Multiple Micronutrient Supplementation for pregnant women to the WHO Essential Medicines List is critical to ensure that UNIMMAP MMS for pregnant women becomes a more integral component of nutritional programs worldwide.

Each year, approximately 20 million babies are born underweight, 23 million are born too small, and 15 million are born too soon. These children are born at a disadvantage. They are born with an increased risk of death during their first few months of life, and if they survive, they are more likely to have decreased cognition and be physically stunted — and less likely to escape the cycle of poverty. For these reasons, Kirk Humanitarian strongly supports the application to the WHO Essential Medicines List for Multiple Micronutrient Supplementation for pregnant women.

Sincerely,

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<sup>1</sup> Keats EC, Haider BA, Tam E, Bhutta ZA. *Multiple-micronutrient supplementation for women during pregnancy*. Cochrane Database of Systematic Reviews 2019, Issue 3.

ii Keats EC, Das JK, Tam E, Salam RA, Lassi ZS, Imdad A, Black RE. Effective interventions to address maternal and child malnutrition: an update of the evidence. The Lancet Review, Volume 5, Issue 5.

WFP, UNICEF, Global Nutrition Cluster Technical Alliance, *Protecting Maternal Diets and Nutrition Services and Practices in the Context of COVID-19*. April 2020.