

Iodine deficiency disorders major health problem in Pakistan

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Iodine Deficiency Disorders (IDD) is a major public health problem in Pakistan as almost half of Pakistanis are at risk of IDD and particularly, the newborns are at risk of irreversible mental impairment.

IDD is the single most common cause of preventable brain damage and Pakistan is one of the most severely affected countries. According to estimates, nearly two million children are annually born mentally deficient due to this deficiency among pregnant women. This leads to mental retardation, loss of cognitive abilities, miscarriage, birth of children with congenital abnormalities like deaf, dumb and stunted.

"Iodine deficiency is so easy to prevent that it is a crime to let even a single child born mentally handicapped for the reason," said Head of Community Medicine at Islamabad Medical & Dental College Professor Dr Muhammad Ashraf

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Chaudhry while talking to 'The News' on the subject.

The most pervasive public health problem in Pakistan is universal salt iodisation (USI). Due to low consumer demand, lack of quality control measures and absence of legislation, there is low production and consumption of iodised salt. The problem is further accentuated by the fact that the quality of salt production and its iodisation are not controlled through a proper regulatory mechanism. Therefore, even the salt which is labelled as iodised may or may not be iodised actually, said Dr Ashraf while responding to a query.

He said that according to the National Nutrition Survey of Pakistan 2001-2002, the national

prevalence of goitre among pregnant women was 21% and amongst school-age children was 6.7%. "Pakistan lags behind its South Asian counterparts; the utilization of iodised salt at household level is only 17%, whereas it is 78% in Bangladesh and Nepal," said Dr Ashraf. He added that the main reasons for not using iodised salt were high price (35%), non-availability (17%) and rumours about contraceptive effect (13%).

He said that the government is committed to the elimination of iodine deficiency disorders from Pakistan by 2013 and achieving universal salt iodisation (USI) by 2010 (90% of all salt consumed at household level is iodised). "There is a dire need to create awareness on

this issue and mount advocacy for promotion of IDD legislation and monitoring the enforcement of Universal Salt Iodisation in order to combat iodine deficiency in the country.

Training and capacity building of salt processors at the district level is also required," said Dr Ashraf while talking of the measures needed to be taken. He added that the draft IDD legislation (compulsory iodisation of all salt produced in Pakistan through law) prepared by the nutrition wing of the Ministry of Health in January 2008 is still waiting for approval of the cabinet.

"A legislation to save the people of Pakistan from iodine deficiency disorders through compulsory iodisation of all salt would be a good start for the government to achieve the public health goals." To a query, he said that with little investment and strong political will, the government can improve the public health goals of mother and child health by approving IDD legislation at the earliest.