

Review of: "Nutritional Status and Dietary Patterns of Children Aged Ten Years and Below In the Buea Municipality, South West Region Cameroon"

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Potential competing interests: No potential competing interests to declare.

Nutritional Status and Dietary Patterns of Children Aged Ten Years and Below In the Buea Municipality, South West Region Cameroon.

Overall comments: Important study, but what is new should be included in conclusion?

Unclear methodology.

Haphazard presentation of results.

Will need major revision.

Specific comments:

Introduction: Refers to children under 5 years of age, why then enrol children up to 10 years of age.

Aim: Relationship between Dietary patterns and nutritional status.

Method: How was information about food consumed collected? Face-to-face interview, which questionnaire was used to collect this information?

Authors mentioned that data on "food consumed, according to WHO food frequency standard" Where is the reference? What is defined as minimum, adequate food consumed? I have included a WHO reference for young children and older children.

Definitions used – Business, private, poor water source, vaccine compliance, etc should be stated clearly.

Results:

Study sites – 4 sites, what are the characteristics? Rural/urban. How many children from each site? Age distribution?

Page 6/16: Of the total number of children studied, 189 (53.4%) of them were females, with a median age of 11 months, ranging from 6 to 120 months. A total of 302 were 60 months and below while 52 were 61 to 120 months old. More than half of the children 107 (30.2%) were of the age group of 12-59 months. Comment: 30.2% is not more than half.

Table 1 – socio-demographic of both parents and children should be presented in one table. Income and age groups should be presented in ascending order.

Table 2 - Age distribution of children, Age group should be in ascending order.

Table 3 – Nutritional status of different Age groups – Up to 23 months of age, 24 to 60 months, 61 to 120 m. As children grew older, malnutrition prevalence decreased, including stunting and obesity.

Dietary food intake is somewhat different from WHO - < 2 years – 8 food groups, more than 2 years – 10 food groups.

Figure 1 – does not include pulses, beans, seeds and nuts?

Cereals and potatoes are carbohydrates constitute one food group.

WHO_2021_InfantYoungChildrenFeeding_9789240018389-eng

Nutritional status Table 3 – would be better to include a column on <24 months as well.

Page 10/16 – factors associated with stunting, etc

Authors should state which is the reference variable. Table 4, the reference seems to be the business group but Table 7, I can't tell which is the reference variable.

What is the difference between business and private sector?

Univariate analysis and then multivariate analysis.

Are you showing us only those variables that have significant association with malnutrition.

There are too many small tables. All the univariate analysis results should be presented in 1-2 tables. Another one or two tables for multivariate analysis. Factors associated with stunting – vaccine non-compliance, private sector, young mothers <30 years of age.

Table 7: the columns do not have any indications what the numbers mean.

Discussion: The authors should discuss the main findings of the study:

Higher prevalence of malnutrition among younger children compared to those >60 m. Any reasons? Previous studies?

References:

Indicators for assessing infant and young child feeding practices: definitions and measurement methods. Geneva: World Health Organization and the United Nations Children's Fund (UNICEF), 2021. Licence: CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>.

FAO. 2021. *Minimum dietary diversity for women*. Rome. <https://doi.org/10.4060/cb3434en>