

The treatment of SAM includes providing a diet with high-quality proteins, carbohydrates, vitamins, and minerals. When SAM occurs as a result of persistent diarrhea, three management goals are identified:

1. Rehydration with an oral rehydration solution that also replaces electrolytes
2. Administration of antibiotics to prevent intercurrent infections
3. Provision of adequate (energy intake) nutrition by either breastfeeding or a proper weaning diet

Local protocols are used in developing countries to deal with SAM. Experts recommend a three-phase treatment protocol: (1) acute or initial phase in the first 2 to 10 days involving initiation of treatment for oral rehydration, diarrhea, and intestinal parasites; prevention of hypoglycemia and hypothermia; and subsequent dietary management; (2) recovery or rehabilitation (2 to 6 weeks) focusing on increasing dietary intake and weight gain; and (3) follow-up phase, focusing on care after discharge in an outpatient setting to prevent relapse and promote weight gain, provide developmental stimulation, and evaluate cognitive and motor deficits. In the acute phase, care is taken to prevent fluid overload; the child is observed closely for signs of food or fluid intolerance. **Refeeding syndrome** may occur when carbohydrates are administered too rapidly causing severe hypophosphatemia that may cause sudden death in a child who has been malnourished ([Kliegman, 2016](#)).

Vitamin and mineral supplementation are required in most cases of SAM. Vitamin A, zinc, and copper are recommended; iron supplementation is not recommended until the child is able to tolerate a steady food source. In addition, the child is observed for signs of skin breakdown, which should be treated to prevent infection. Breastfeeding is encouraged if the mother and child are able to do so effectively; in some cases, partial supplementation with a modified cow's milk-based formula may be necessary.

The World Health Organization issued a statement recognizing the importance of breastfeeding for the first 6 months in developing countries where HIV is prevalent among childbearing women and