

children ([Lawrence, 2013](#)). The World Health Organization recognizes that appropriate sources of food and water for infants may not be available after the 6 months are concluded and that the risk for malnutrition is greater among such children than the theoretical risk of HIV. Furthermore, the organization recommends that breastfeeding continue after 6 months with the introduction of complementary foods, provided they are safe for child consumption. In severely malnourished children, a modest energy food source is given initially followed by a high-protein and energy food source; severely malnourished children will not tolerate a high-energy and high-protein source initially. A number of food sources may be provided to treat SAM. They include oral rehydration solutions (ReSoMal), amino acid-based elemental food, and ready-to-feed foods that do not require the addition of water (to minimize contaminated water consumption); parenteral and oral antibiotics are often part of the standard treatment for PEM ([Jones and Berkley, 2014](#)).

Nursing Care Management

Because SAM appears early in childhood, primarily in children 6 months to 2 years old, and is associated with early weaning, a low-protein diet, delayed introduction of complementary foods, and frequent infections ([Grover and Ee, 2009](#)), it is essential that nursing care focus on *prevention* of SAM through parent education about feeding practices during this crucial period. Prevention should also focus on the nutritional health of pregnant women because this will directly affect the health of their unborn children. Breastfeeding is the optimal method of feeding for the first 6 months. The immune properties naturally found in breast milk not only nourish infants but also help prevent opportunistic infections, which may contribute to SAM. Providing for essential physiologic needs, such as appropriate nutrient intake, protection from infection, adequate hydration, skin care, and restoration of physiologic integrity, is paramount. Additional nursing care focuses on education about and administration of childhood vaccinations to prevent illness, promotion of nutrition and well-being for the lactating mother, encouragement and participation in well-child visits for infants and toddlers, appropriate food sources for children being weaned from breastfeeding, and education regarding sanitation practices to