Unit II – Problem 5 – Nutrition and Failure to Thrive

Essential nutrients	Non-essential nutrients
Those which cannot be synthesized by the body and must be derived from the diet	Those which can be synthesized from other compounds by the body or may be derived from the diet.

Macronutrients	Micronutrients
Carbohydrates: they are converted by the	
body to glucose and other monosaccharides	Water-soluble vitamins: they include vitamin
which can be absorbed and utilized as a source	C, B-complex (thiamin, riboflavin, niacin,
of energy (ny the process of glycolysis, TCA	pyridoxine, folic acid, cobalamin, biotin and
and respiratory chain) or stored as glycogen in	pantothenic acid)
liver and muscles to be used later when needed	
Proteins: they are converted to smaller	
peptides and amino acids. Notice that infants	Fot coluble viteming, A. D. V. and E.
need more protein in their diet (due to faster	Fat-soluble vitamins: A, D, K and E
growth velocity)	
Fats : they are broken down into fatty acids and	
glycerol which are stored in adipose tissue and	Minerals: sodium, chloride, potassium,
can be used as a source of energy when the	calcium, phosphorus, magnesium, iron, iodine,
body is depleted from glucose and glycogen	zinc, chromium and copper
has been used	

- Malnutrition:

• Marasmus:

- ✓ It is the most common energy depletion state.
- ✓ It is characterized by near starvation from protein and non-protein deficiencies.
- ✓ The patient is typically thin from loss of muscle and body fat (especially in buttocks, thigh and arm muscles). Notice that the facial fat mass is the last to be lost
- ✓ Other features include: wrinkled skin and prominent ribs.



• Kwashiorkor:

- ✓ It is less common than marasmus and is seen in parts of the world in which starches are the main dietary staple ال غذاء الرد يسي
- ✓ This protein-deficient state is characterized by generalized edema, abdominal distention (hepatomegaly), changes in skin pigmentation, thin sparse hair, bulging eyes and swollen moon face.





