



MEDIA RELEASE

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Health economic modelling demonstrates the cohort value of early nutrition programming

Munich, 6 May 2010 – Results from the health economic group of the EARNEST Project, presented at The Power of Programming Congress (Munich 6-8 May) demonstrates the economic benefit of introducing infant formula with lower protein.

With lower protein infant formula intake, reductions in prevalence of obesity, cardio-vascular disease and stroke are predicated. Reductions in prevalence in these diseases save significant costs.

Whilst it is calculated that it is only 20 euros would be saved for each and every child (healthy or not), the cost savings across the whole cohort are significant. Additionally a 0.04 increase in QALY for every child was calculated.

For each and every child who does not develop obesity, a sum of 1,882 euros will be saved and 3.48 Quality-Adjusted Life Years added.

The presenters issued words of caution as the current evidence base is limited, with only one randomised controlled trial with lower protein formula currently available. However the meeting agreed that the potential of early nutrition programming to save costs whilst also decreasing prevalence of life-limiting conditions has been proven, and merits further focused attention.

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For further media information contact Rhonda Smith / Marc Catchpole @ Minerva
++44 (0) 1264 710428/ / + 44 (0)7887 714957 // +44 (0) 7753 821525 / info@minervaprc.com

The Power of Programming (6-8 May) Munich a landmark international conference on the science of Early Nutrition Programming. Full details of speakers and sessions at www.metabolic-programming.org/munich2010/index.htm

Ludwig-Maximilians-Universität (LMU), Munich one of the oldest in Germany, is at the forefront of research into metabolic programming with the EC funded

EARNEST project (www.metabolic-programming.org), co-ordinated by Professor Berthold Koletzko of the University Children's hospital. The Power of Programming conference, organised by EARNEST, is bringing together leading experts from around the world to discuss the effect of nutrition and other environmental influences during early life on long term outcomes such as obesity, cardiovascular disease, and chronic lung disease, behavioural and cognitive problems.

The EARNEST Project is being carried out with financial support of the European Commission under the 6th Framework Programme for Research and Technical Development (FOOD-CT-2005-007036). It does not necessarily reflect the EC views and, in no way, anticipates future policy in this area.

EARNEST has included follow-up studies from the EU Childhood Obesity Project (CHOP) a multi-centre intervention trial in five European countries. Over 1000 infants were randomised to receive infant and follow-on formulas with lower or higher protein content for their first year and were then followed up for 2 years. A group of breast fed infants were also followed up for comparison. Study Results were published last year (Koletzko *et al.*, 2009) (Schiess *et al.*, 2009)
