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Synthetic health drinks vs natural nutrease kid : Which is the best to support child health needs.

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ABSTRACT

Nutrition for kids is based on the same principles as nutrition for adults. Everyone needs the same types of nutrients such as vitamins, minerals, carbohydrates, protein and fat. What's different about nutrition for kids, however, is the amount of specific nutrients needed at different ages.
Now a days we are seeing that lot of synthetic popular health drinks are available in the market such as brand X, brand B, brand C etc
These Synthetic nutrients are dietary supplements made artificially in a laboratory setting or industrial process. The majority of these supplements available on the market today are made artificially.Taking large amounts of synthetic nutrients can have harmful health effects.
Results from many clinical trials shows that Synthetic health drinks can increase the risk of premature death.Other studies have linked that synthetic multivitamin in these health drinks use to increased cancer risk, and synthetic folic acid in these health drinks is harmful for our health as It build up in the body and raise the risk of cancer where as Natural nutrients in nutrease Kid powder contain "whole food supplements," which are made from concentrated, dehydrated whole foods.
Based on these facts NUTREASE KIDS: A UNIQUE KIDS ESSENTIALS FORMULA ENCOMPASSING THE WISDOM OF NATURE Developed by Pugos Nutrition Research Centre HYDERABAD. The present paper Reviews the Role of NUTREASE KIDS in physical & mental development of children.

Keywords: Malnutrition, good nutrition,Nutrition for kids,Nutrease kids.

INTRODUCTION



Synthetic health drinks Vs Natural Nutrease Kid health drink.

Now a days we are seeing that lot of synthetic popular health drinks areavailable in the market such as brand X, brand B, brand C,etc

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The major nutrients present in Nutrease Kid powder include Natural carbohydrates, proteins, lipids, vitamins, and minerals in the form of plant nutrients. They have tremendous impact on the health care system and may provide medical health benefits including the prevention and/or treatment of disease and also they are 100% safe, natural and having no side effects.

Good nutrition is essential for the growth and development that occurs during an infant's first year of life. When developing infants are fed the appropriate types and amounts of foods, their health is promoted. Positive and supportive feeding attitudes and techniques demonstrated by the caregiver help infants develop healthy attitudes toward foods, themselves, and others.

Throughout the first year, many physiological changes occur that allow infants to consume foods of varying composition and texture. As an infant's mouth, tongue, and digestive tract mature, the infant shifts from being able to only suckle, swallow, and take in liquid foods, such as breast milk or infant formula, to being able to chew and receive a wide variety of complementary foods.

At the same time, infants progress from needing to be fed to feeding themselves. As infants mature, their food and feeding patterns must continually change.For proper growth and development, an infant must obtain an adequate amount of essential nutrients by consuming appropriate quantities and types of foods. During infancy, a period of rapid growth, nutrient requirements per pound of body weight are proportionally higher than at any other time in the life cycle

The World Health Organization's (WHO) expert report on energy and protein requirements states: The energy requirement of an individual is a level of energy intake from food that will balance energy expenditure when the individual has a body size and composition and level of physical activity, consistent with long-term good health; and that would allow for the maintenance of economically necessary and socially desirable physical activity. In children the energy requirement includes the energy needs associated with the deposition of tissues at rates consistent with good health.

A general indicator of whether an infant is consuming an adequate number of kilocalories per day is the infant's growth rate in length, weight, and head circumference. However, physical growth is a complex process that can be influenced by size and gestational age at birth, environmental and genetic factors, and medical conditions, in addition to dietary intake.

In general, most healthy infants double their birth weight by 6 months of age and triple it by 12 months of age.However, keep in mind that there are normal differences in growth between healthy breastfed and formula-fed infants during the first year of life. After 3 months of age, the rate of weight gain in the breastfed infant may be lower than that of formula-fed infants.

Carbohydrates are necessary in the infant's diet because they Supply food energy for growth, body functions, and activity;Allow protein in the diet to be used efficiently for building new tissue.Allow for the normal use of fats in the body and Provide the building blocks for some essential body compounds.

Carbohydrates serve as primary sources of energy to fuel bodily activities while protein and fat are needed for other essential functions in the body, such as building and repairing tissues.

Nutrition for kids: Guidelines for a healthy diet



Nutrition for kids is based on the same principles as nutrition for adults. Everyone needs the same types of nutrients — such as vitamins, minerals, carbohydrates, protein and fat. What's different about nutrition for kids, however, is the amount of specific nutrients needed at different ages.

Consider these nutrient-dense foods:

- **Protein.** Choose seafood, lean meat and poultry, eggs, beans, peas, soy products, and unsalted nuts and seeds.
- **Fruits.** Encourage your child to eat a variety of fresh, canned, frozen or dried fruits — rather than fruit juice. If your child drinks juice, make sure it's 100 percent juice.

- **Vegetables.** Serve a variety of fresh, canned or frozen vegetables — especially dark green, red and orange vegetables, beans and peas.
- **Grains.** Choose whole grains, such as whole-wheat bread, oatmeal, popcorn, quinoa, or brown or wild rice.

Dairy. Encourage your child to eat and drink fat-free or low-fat dairy products, such as milk, yogurt, cheese or fortified

Ages 2 to 3: Daily guidelines	
Calories	1,000-1,400, depending on growth and activity level
Protein	2-4 ounces
Fruits	1-1.5 cups
Vegetables	1-1.5 cups
Grains	3-5 ounces
Dairy	2-2.5 cups
Ages 4 to 8: Daily guidelines	
Calories	1,200-2,000, depending on growth and activity level
Protein	3-5.5 ounces
Fruits	1-2 cups
Vegetables	1.5-2.5 cups
Grains	4-6 ounces
Dairy	2.5-3 cups
Ages 9 to 13: Daily guidelines	
Calories	1,600-2,600, depending on growth and activity level
Protein	5-6.5 ounces
Fruits	1.5-2 cups
Vegetables	2-3.5 cups
Grains	5-9 ounces
Dairy	3 cups

Soure; National institute of nutrition

What is Malnutrition in kids?

Malnutrition refers to insufficient, excessive, or imbalanced consumption of nutrients. In developed countries, the diseases of malnutrition are most often associated with nutritional imbalances or excessive consumption. Although there are more people in the world who are malnourished due to excessive consumption, according to the United Nations World Health Organization, the real challenge in developing nations today, more than starvation, is combating insufficient nutrition, the lack of nutrients necessary for the growth and maintenance of vital functions.

Illnesses caused by Deficiency of nutrient consumption

Nutrients	Deficiency
Energy	starvation, marasmus
Simple carbohydrates	None
Complex carbohydrates	None
Saturated fat	low sex hormone levels
Trans fat	None
Unsaturated fat	None

Fat	malabsorption of fat-soluble vitamins, rabbit starvation (if protein intake is high), during development: stunted brain development and reduced brain weight.
Omega-3 fats	cardiovascular disease
Omega-6 fats	None
Cholesterol	during development: deficiencies in myelinization of the brain.
Protein	kwashiorkor
Sodium	hyponatremia
Iron	anemia
Iodine	goiter, hypothyroidism
Vitamin A	xerophthalmia and night blindness, low testosterone levels
Vitamin B_1	beriberi
Vitamin B_2	cracking of skin and corneal unclearation
Niacin	pellagra
Vitamin B_{12}	pernicious anemia
Vitamin C	scurvy
Vitamin D	rickets
Vitamin E	nervous disorders
Vitamin K	hemorrhage
Calcium	osteoporosis, tetany, carpopedal spasm, laryngospasm, cardiac arrhythmias
Magnesium	Hypertension
Potassium	hypokalemia, cardiac arrhythmias

Nutrease kids: a unique kids essentials formula encompassing the wisdom of nature



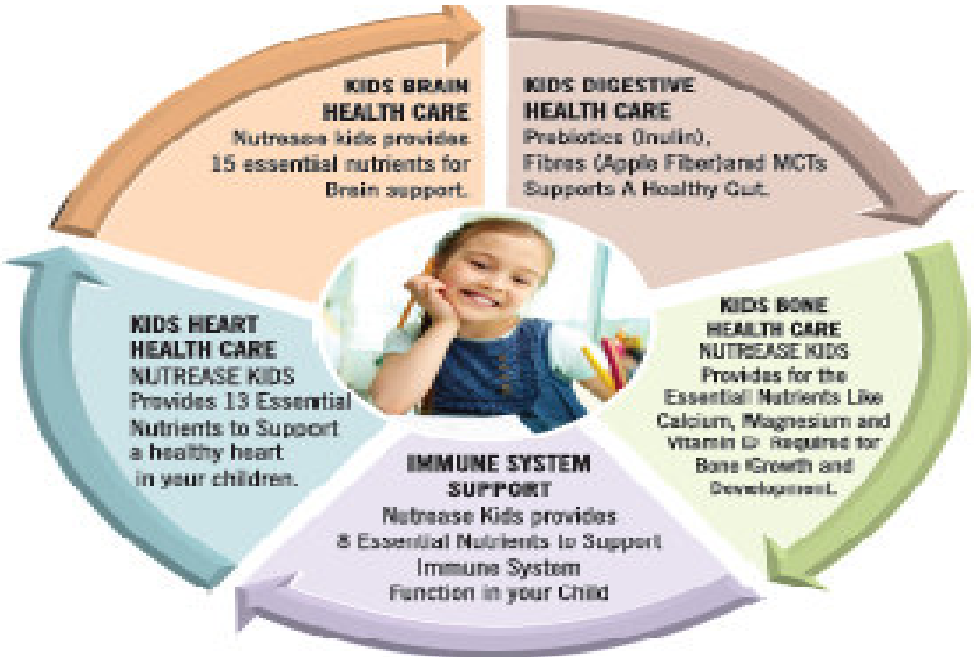
Composition of nutrease kids

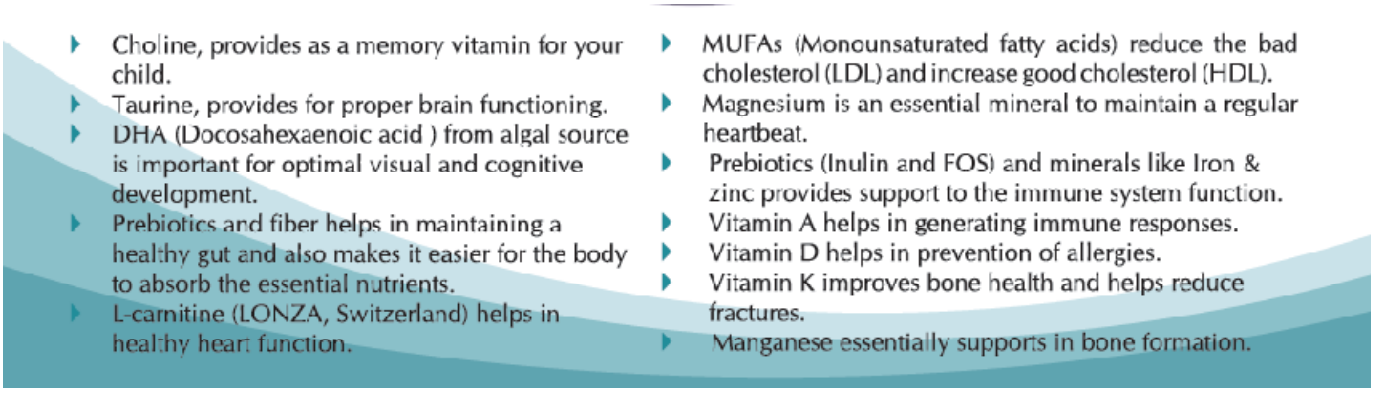
Nutritional Facts

Serving Size : 20g (2 Scoop) — Serving per container : 20

Supplement Facts	Unit	Per 100g Approx	Per 20g Approx
Energy	Kcal	384.2	76.84
Protein	g	24.89	4.978
Total carbohydrates	g	49.435	9.887
Sugar	g	31	6.2
Dietary fiber	g	1.6	0.32
Total fat	g	9.3	1.86
Saturated Fats	g	4.936	0.9872
Mono Unsaturated Fats	g	2.409	0.4818
Poly Unsaturated Fats	g	0.862	0.1724
DHA (10%)	mg	100	20
Vitamins			
Vitamin A	IU	1000	20
Vitamin C	mg	40	8
Vitamin E	mg	10	2
Vitamin B1	mg	0.075	0.015
Vitamin B2	mg	0.05	0.01
Vitamin B3	mg	0.21	0.042
Vitamin B5	mg	0.24	0.048
Vitamin B6	mg	0.1	0.02
Vitamin B7	mcg	40	8
Vitamin B9	mg	0.002	0.0004
Vitamin B12	mcg	1	0.2
Vitamin D	IU	200	40
Vitamin K	mcg	20	4
Minerals			
Calcium	mg	100	20
Phosphorous	mg	200	40
Chloride	mg	500	100
Potassium	mg	50	10
Magnesium	mg	28	5.6
Sodium	mg	50	10
Iron	mg	5	1
Zinc	mg	5	1
Copper	mg	0.5	0.1
Chromium	mcg	100	20
Selenium	mcg	100	20
Manganese	mg	1.5	0.3
Molybdenum	mcg	20	0.2
Iodine	mcg	30	6
Choline	mg	150	30
Taurine	mg	36	7.2
L-carnitine	mg	10	2
Inositol	mg	40	8

Pharmacological action of nutrease kids





CONCLUSION

Nutrition describes the processes by which all of the food a person eats are taken in and the nutrients that the body needs are absorbed. Good nutrition can help prevent disease and promote health.

Carbohydrate,Protein,Vitamins and minerals are an important part of nutrition. Vitamins are organic substances present in food. They are required by the body in small amounts to regulate metabolism and to maintain normal growth and functioning. Minerals are vital because they are the building blocks that make up the muscles, tissues, and bones. They also are important to many life-supporting systems, such as hormones, transport of oxygen, and enzyme systems.

Nutrease kid, A good nutrition plan will ensure that a balance of food groups, and the nutrients supplied by each group, is eaten A poor diet may have an injurious impact on health, causing nutrition deficiency diseases such as scurvy and kwashiorkor health-threatening conditions like obesity and metabolic syndrome and such common chronic systemic diseases .

REFERENCES

1. Klawitter BM. Nutrition Assessment of Infants and Children. In: Nevin-Folino N, editor. Pediatric Manual of Clinical Dietetics, 2nd ed. Chicago, IL: American Dietetic Association, 2003:145-161.
2. Olsen IE, Mascarenhas MR, Stallings VA. Clinical Assessment of Nutritional Status. In: Walker WA, Watkins JB, Duggan C, editors. Nutrition in Pediatrics. 3rd ed. Hamilton, Ontario: BC Decker, Inc., 2003.
3. Story M, Holt K, Sofka D. Bright Futures in Practice: Nutrition - Pocket Guide Arlington, VA: National Center for Education in Maternal and Child Health, 2002.
4. Lo CW, O'Bryan A. Laboratory Assessment of Nutritional Status. In: Walker WA, Watkins JB, Duggan C, editors. Nutrition in Pediatrics. 3rd ed. Hamilton, Ontario: BC Decker, Inc., 2003.
5. Institute of Medicine, Food and Nutrition Board. Dietary Reference Intakes. Applications in Dietary Assessment. Washington, D.C.: National Academy Press, 2000.
6. FAO/WHO/UNU Expert Consultation. Energy and Protein Requirements. Geneva, Switzerland: World Health Organization, 1985.
7. Butte NF. Meeting Energy Needs. In: Tsang RC, Zlotkin SH, Nichols BL, Hansen JW, editors. Nutrition During Infancy: Principles and Practice. 2nd ed. Cincinnati, OH: Digital Educational Publishing, Inc., 1997:57-82.
8. Kleinman RE, editor. Pediatric Nutrition Handbook. 5th ed. Elk Grove Village, IL: American Academy of Pediatrics, 2004:407-423.
9. Lucas BL, Feucht SA. Introduction to Using Growth Charts for Medical Nutritional Evaluations. In: Nevin-Folino N, editor. Pediatric Manual of Clinical Dietetics. 2nd ed. Chicago, IL: American Dietetic Association, 2003:758-762.
10. National Center for Chronic Disease Prevention and Health Promotion. Use and Interpretation of the CDC Growth Charts - An Instructional Guide. Atlanta: Centers for Disease Control and Prevention; 2001 .

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