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"AMERICAN NAMED 1991 WORLD FOOD PRIZE LAUREATE"
-- Dr. Nevin S. Scrimshaw: First Laureate from Medical Field --

DES MOINES, Iowa -- July 22, 1991 -- For the first time in its five-year history, The World Food Prize has been awarded for contributions in the area of nutrition.

John Ruan, chairman of The World Food Prize Foundation, named public health doctor and international nutritionist, Nevin S. Scrimshaw, as the 1991 laureate for his contributions in the fight against hunger and malnutrition.

"It is indeed an honor to receive The World Food Prize. This award provides an opportunity to focus on the issue of world hunger," Scrimshaw said. "Despite significant scientific and medical advances, it is somewhat disheartening that global hunger continues to plague society. For that reason we must sustain our quest for solutions in addressing this life-threatening issue."

Ruan, who brought The World Food Prize to Iowa in 1990, will present the award to Scrimshaw in Des Moines, Iowa on Oct. 14. In honor of the laureate, several international guests will attend the ceremony.

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The World Food Prize is the largest prize given for accomplishments in food and agriculture and second only to the Nobel Prize in international recognition. Laureates of The World Food Prize receive a cash award of $200,000 and a sculpture by world-renowned designer Saul Bass.

"It's significant that after recognizing individuals for their contributions in production, we now acknowledge achievements in the area of nutrition," said Ruan. "Dr. Scrimshaw's revolutionary accomplishments toward alleviating malnutrition in developing countries have made a substantial difference toward improving the lives of millions of people."

Due to the international recognition of his earliest nutrition work, Scrimshaw was asked to be the first director of the Institute for Nutrition of Central America and Panama (INCAP) in 1949. INCAP is working to solve the nutrition problems of the region through practical applications. After 42 years, the center remains a hub for nutrition research in developing countries.

**Endemic Goiter**

While at INCAP, Scrimshaw worked toward solutions for Central America's most serious disease. Caused by a mother's iodine deficiency, endemic goiter can lead to mental retardation, deafness and dwarfism in the child.

Scrimshaw initially tried the method of iodization employed for the control of endemic in the United States and Europe. However, he found the potassium iodide compound ineffective when mixed with the crude moist salt of Central America. After testing several other compounds, Scrimshaw set up trials using potassium iodate on school children.

Initially, the children had goiter prevalence of approximately 60 percent. However, following treatment for the school year, goiters were nearly undetectable.
This prompted Scrimshaw to work with the governments of the region toward required iodation of all salt for human consumption. At the time of its introduction in Guatemala, national prevalence of endemic goiter was 38 percent and 80 to 90 percent in highland villages. Within two years, it dropped to 14 percent and by the third year, it had virtually disappeared -- to the point that Scrimshaw had difficulty finding cases to use as demonstrations for summer students.

This nutrition advancement has alleviated endemic goiter throughout Central America, Latin America and the world.

_Kwashiorkor_

In 1949, Scrimshaw spearheaded efforts to battle kwashiorkor, a deadly disease characterized by apathy, anorexia, swelling, blackening of the skin and rapid hair loss. It affected children in developing countries including Africa, Chili and Latin America. In most cases, children would die of kwashiorkor within weeks following diagnosis.

Scrimshaw knew from studies elsewhere that the problem was one of protein deficiency caused when breast milk was no longer the sole source of food. He searched to find an affordable native protein source. At the time, the cost of one protein-rich egg was equivalent to that of a day's meals for the entire family. Scrimshaw created a mixture called INCAPARINA using cotton-seed flour and maze.

Originally, INCAPARINA could be purchased at one-fifth the cost of milk. Even though the government has never subsidized it, INCAPARINA is still given to 80 percent of rural Guatemalan children in their first year of age. In addition, Scrimshaw has encouraged other countries to develop their own protein-rich weaning foods based on this principle.
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In 1972, the INCAPARINA principle was adapted to peanut flour and wheat during India's major food shortages and renamed BALAHAR. While adults received their required nutrients through imported grain, children were treated with BALAHAR. Scrimshaw's principle is still the basis of local, lower cost weaning foods as a preventative of malnutrition in many developing countries.

Additional Contributions

Through his extensive nutrition-related field work, Scrimshaw drew conclusions on the relationship of nutrition and infection. While common knowledge today, Scrimshaw demonstrated that infection would increase more in malnourished subjects than well-nourished. Even the leading text book at the time said there was no such relationship. With collaborators from INCAP, Scrimshaw collected data from his fieldwork and previous reports -- ultimately convincing the international medical world as the author of a World Health Organization monograph on the subject.

Recognizing the vital role of the nutritionist in alleviating world hunger, he established and advised numerous organizations and institutions to train young researchers -- particularly the fellowship program at the United Nations University in Tokyo. Through Scrimshaw's efforts, hundreds of international nutrition experts are currently working toward practical solutions in their homelands.

Scrimshaw developed the world's center for training in metabolic research and nutrition at Massachusetts Institute of Technology, established the World Hunger Program during the early development of the United Nations University, served as president of the International Union of Nutritional Sciences, advised international agencies in providing the most efficient care for malnourished children and has constantly strived to make each country self-sufficient in its nutritional competence.

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Scrimshaw's work continues to set international standards for nutrition and health care in developing countries. Currently, he concentrates on the effects of chronic energy and iron deficiency. He is also chairman of United Nations sponsored sub-committees for the control of these deficiencies. Scrimshaw is promoting the application of anthropological methods to Rapid Assessment Procedures (RAP), for the improvement of nutrition and health related programs.

Among those anthropologists training others in the use of RAP are his wife, Mary, and his daughter, Susan.