

## Vitamin A content and bio-availability of South African

## maize meal (as purchased and consumed)

**Beulah Pretorius** 

Thesis

**Ph.D Nutrition** 

Study leader: Prof Dr Hettie C Schönfeldt

June 2011

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## maize meal (as purchased and consumed)

by

### **Beulah Pretorius**

A script submitted in partial fulfilment of the requirements for the degree

### **Ph.D Nutrition**

in the

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Pretoria

Study leader: Prof Dr Hettie C Schönfeldt

June 2011



Dedicated to: my husband, Gerard and three precious girls, Somari, Elismi & Carina



# DECLARATION

I, Beulah Pretorius, hereby declare that the thesis for the Ph.D Nutrition degree at the University of Pretoria, hereby submitted by me, has not previously been submitted for a degree at this or any other university and that it is my own work in design and execution and that all reference material contained herein has been duly acknowledged.

**BEULAH PRETORIUS** 

13 June 2011



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Above all, to my Creator I am thankful for the opportunity to study and to make a small contribution to society.

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# ABSTRACT

## Vitamin A content and bio-availability of South African

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Faculty: Natural and Agricultural Science

Degree: Ph.D Nutrition

In 2003 the Department of Health of South Africa embarked on a mandatory fortification programme of maize meal as part of the Integrated Nutrition Program (INP) to alleviate malnutrition. The aim of this study was two-fold: firstly, to determine the vitamin A content of South African fortified white maize meal as purchased and the maize porridge as traditionally prepared from it as consumed and secondly, to determine the relative efficacy of the daily consumption of maize meal in sustaining or improving vitamin A status.

Maize meal samples for analysis were purchased from various supermarkets and small retail outlets. A High Performance Liquid Chromatograph-Diode Array Detector system with a Reverse Phase C-18 column and isocratic elution was used for

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separation and quantification of vitamin A. The highest mean vitamin A concentration measured in the maize meal was 261 µgRE/100g and the lowest mean vitamin A concentration was <19 µgRE/100g. Pertaining to the regulations the final minimum level of vitamin A in fortified maize meal must not be less than 187.7 µgRE/100g. The average retention of vitamin A in maize porridge as the difference in vitamin A concentration measured between raw maize meal and cooked porridge was calculated at 39.8%.

One of the considerations in a fortification program is the availability of certain micronutrients in the fortified foods, with the focus in this project on vitamin A. An animal model, namely chickens, closely relating the metabolism of vitamin A in humans was used. Chickens are very susceptible to vitamin A deficiencies with similar symptoms. Growth and vitamin A status was evaluated by the weight, feed conversion and liver retinol stores of chickens on five different maize based diets over a six week period.

No significant difference in vitamin A levels in the livers of birds on diets with fortified white maize meal, compared to the normal poultry diet consisting of yellow maize meal with added vitamin A was found. It can thus be concluded that the fortificant in the white maize meal is as bioavailable as the vitamin A in the premix used in poultry nutrition. The results of this study show that the vitamin A added as fortificant is absorbed and available to the body. Therefore, fortification of commonly eaten staple foods in the country can significantly improve the vitamin A intake of the population and will improve the overall micronutrient density of their diets.

Fortification should be set at levels to include losses incurred through packaging and during transportation, shelf losses and preparation losses. It is also important that the

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vitamin A content of the product as purchased and consumed must be regularly monitored and regulated by government. Valid and reliable evaluation data are needed to evaluate a program's success, and to make timeous adjustments for optimal efficiency.

Key words: maize meal, porridge, vitamin A fortification, retention, staple foods, bioavailability

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## LIST OF ACRONYMS AND ABBREVIATIONS

| AI    | Adequate Intake                        |
|-------|--|
| ANOVA | Analysis of Variance                   |
| AOAC  | Association of Analytical Chemists     |
| ARC   | Agricultural Research Council          |
| AUC   | Area Under the Curve                   |
| BHT   | Butylated Hydroxytoluene               |
| CE    | Capillary Electrophoresis              |
| CEN   | European Committee for Standardisation |
| CV    | Coefficient of Variation               |
| DALY  | Disability Life Year                   |
| DM    | Dry Matter                             |
| DRI   | Dietary Reference Intake               |
| EAR   | Estimated Average Requirement          |
| FAO   | Food and Agricultural Organisation     |
| FCR   | Feed Conversion Ratio                  |
| FCS   | Food Control System                    |
| FFP   | Food Fortification Program             |
| GC    | Gas Chromatograph                      |
| HPLC  | High Performance Liquid Chromatograph  |
| ICN   | International Congress on Nutrition    |
| INP   | Integrated Nutrition Program           |
| IOM   | Institute of Medicine                  |
| ISO   | International Standards Organisation   |
| ш     | International Linits                   |

- IU International Units



- IVACG International Vitamin A Consultative Group
- LC Liquid Chromatography
- LLE Liquid Liquid Extraction
- LOD Limit of Detection
- MDGs Millennium Development Goals
- LOQ Limit of Quantification
- NFCS National Food Consumption Survey
- NFCS-FB National Food Consumption Survey Fortification Baseline Study
- NHLS National Health Laboratory Services
- PCA Principal Component Analysis
- PDA Photo Diode Array
- RAE Retinol Activity Equivalent
- **RDA** Recommended Dietary Allowance
- RE Retinol Activity
- **RP** Reverse Phase
- RSI Recommended Safe Intake
- SANAS South African National Accreditation Services
- SAVCG South African Vitamin A Consultative Group
- SD Standard Deviation
- SPE Solid Phase Extraction
- TRM Treatment
- **UNICEF** United Nations Children Fund
- UL Upper Limit
- VAD Vitamin A Deficiency
- WHO World Health Organisation



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