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## 40th anniversary of the WHO International Code of Marketing of Breastmilk Substitutes

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The WHO International Code of Marketing of Breastmilk Substitutes is a seminal document, but to maintain this status it needs to be relevant to contemporary society; if not, there is the risk that it presents as a problem rather than a solution. A joint statement in 2021 by UNICEF and WHO on the 40th anniversary of the Code noted that, with regards to implementation during the 40-year period, only 25 countries (12.7% of the 197 countries worldwide) have implemented measures that are substantially, but not necessarily fully, aligned with the Code.<sup>1</sup>



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The 40th anniversary was an opportunity to revisit the original concept, reflect on progress, and invite new thinking on how this document might be more effective for nations in the 21st century. The reluctance to independently review the Code after 40 years raises the suspicion that WHO is concerned that in its current form,

under close examination, it would be found wanting. The current practice of clarifying aspects of the Code through random subsequent resolutions does not have credibility, and observers who are more sceptical might perceive this to be a tactic by WHO officials to change the meaning of the Code without resorting to an extensive consultation.<sup>2</sup> It might be that this bureaucratic approach is acceptable for minor adaptations relating to the Code, but when applied to something as fundamental as the definition of a breastmilk substitute, a term included in the title of the Code document, it is unsurprising that questions are being asked on matters of transparency, due diligence, and integrity.<sup>3</sup> Trust and respect are crucial commodities in partnership working, and these commodities will only be achieved if all partners listen, learn, and collectively reach the best nutrition solutions for all infants worldwide.

The webinar associated with the statement was sponsored by a Global Breastfeeding Collective, which includes UNICEF, WHO, and 25 international breastfeeding support agencies. It is perplexing that other key aspects of an infant diet, including complementary feeding where deficiency causes wasting, stunting, and death, are persistently overshadowed by breastfeeding. The health benefits from breastfeeding are undermined if the infant is subject to the negative effects of other nutritive and non-nutritive deficiencies, and therefore the best outcomes will be produced if these key interdependencies are simultaneously addressed. However, this approach can only be done if there is resolution of the stakeholder conflict that has dominated infant feeding policy and practice for more than 40 years.<sup>2</sup>

SF reports a consultancy contract with DSM Nutritional Products; consultancy fees from Danone, DSM Nutritional Products, and SciOpinion; received funding to attend scientific meetings from DSM Nutritional Products; and is a member of the Early Life Nutrition and Health Task Force at the International Life Sciences Institute (Brussels, Belgium).

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## Department of Error

Mendelow AD, Gregson BA, Rowan EN, et al. Early surgery versus initial conservative treatment in patients with spontaneous supratentorial lobar intracerebral haematomas (STICH II): a randomised trial. *Lancet* 2013; **382**: 397–408—In this Article, M Javadvpour (Walton Centre, Liverpool) should have been included in the STICH II Investigators list. This correction has been made to the online version as of Sept 16, 2021.

Carr EJ, Wu M, Harvey R, et al. Neutralising antibodies after COVID-19 vaccination in UK haemodialysis patients. *Lancet* 2021; **398**: 1038–41—In this Correspondence, author Matthew P M Graham-Brown's middle initial was incorrect, and reference 15 was incorrect and should have referred to Longlune N et al. *Nephrol Dial Transplant* 2021. These corrections have been made to the online version as of Aug 17, 2021, and the printed version is correct.