



INTRODUCTION

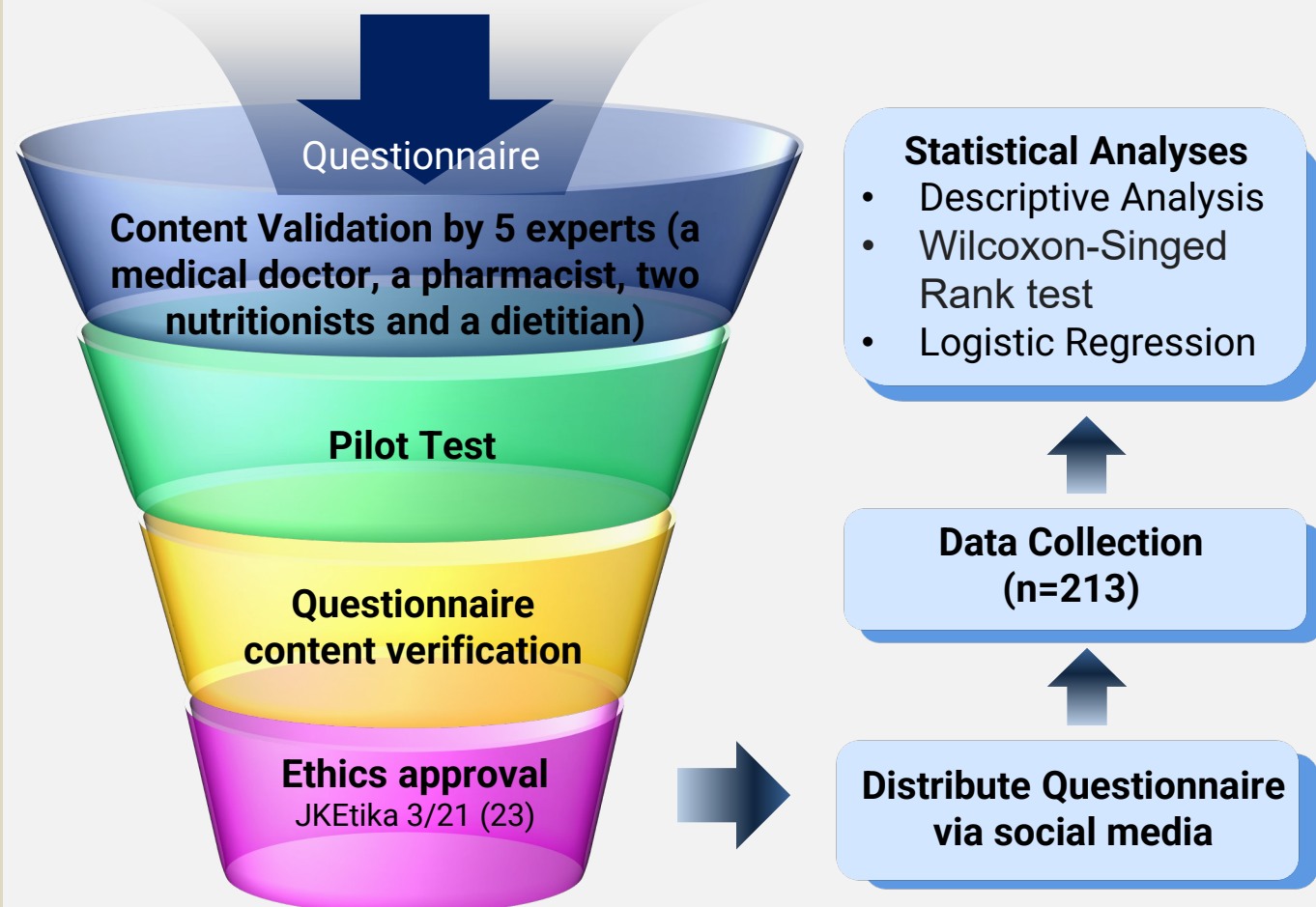
- Movement control order (MCO) has been linked to changes in food consumption and meal patterns, as well as reduced levels of physical activity and increased sedentary habits, according to a previous study.¹
- Therefore, the public tends to rely on non-pharmacological approaches such as dietary supplements, which were believed to have defensive benefits against coronavirus.²

OBJECTIVE

- To determine the use of the dietary supplement among adults in Kota Kinabalu
- To determine the relationship between the sociodemographic factors and dietary supplements intake

METHODOLOGY

Study Design	Cross-Sectional	
Sampling method	Convenient sampling	
Eligibility criteria	Inclusion	Exclusion
	<ul style="list-style-type: none"> • Participants aged 20 years old and above • Staying at Kota Kinabalu 	<ul style="list-style-type: none"> • Participants aged 19 years old and below • Pregnant women



RESULT & DISCUSSION

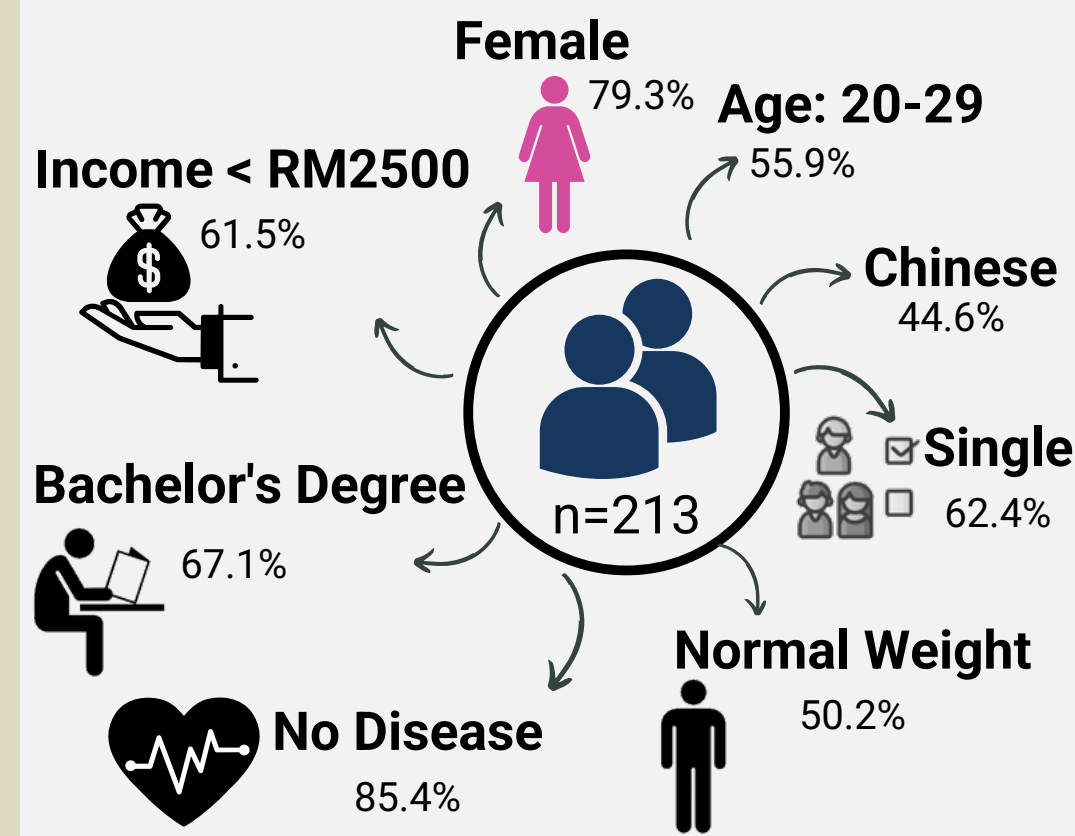


Fig 1. Sociodemographic characteristics

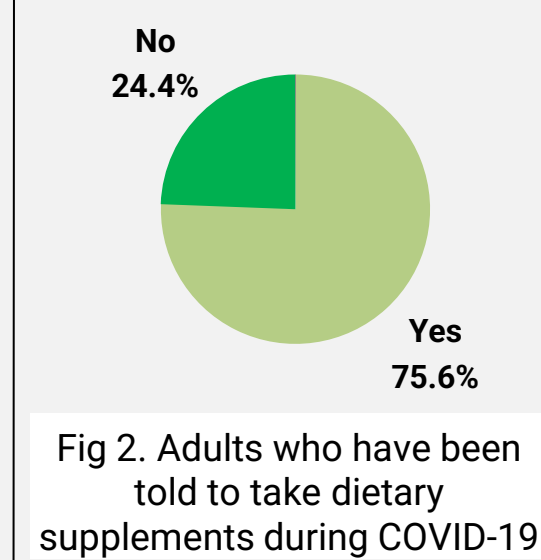


Fig 2. Adults who have been told to take dietary supplements during COVID-19

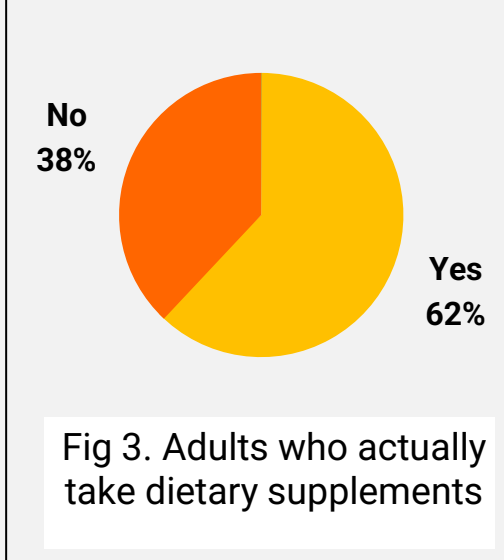


Fig 3. Adults who actually take dietary supplements

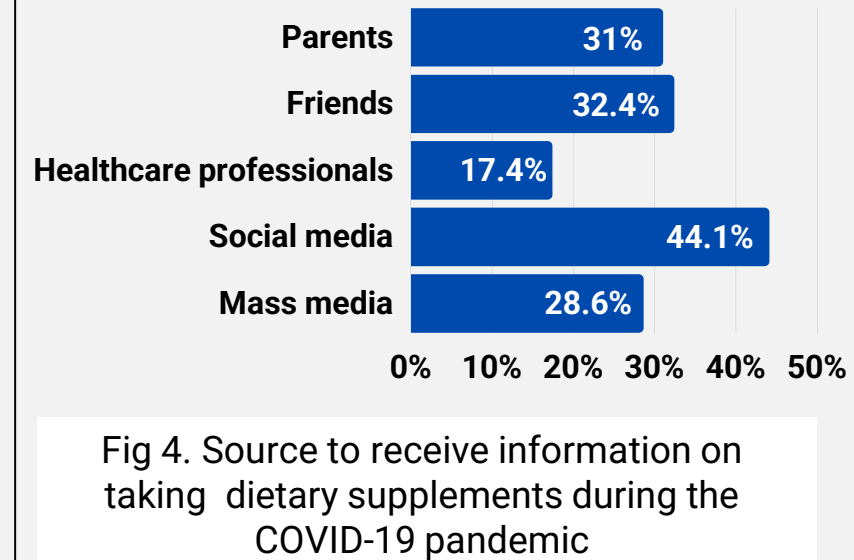


Fig 4. Source to receive information on taking dietary supplements during the COVID-19 pandemic

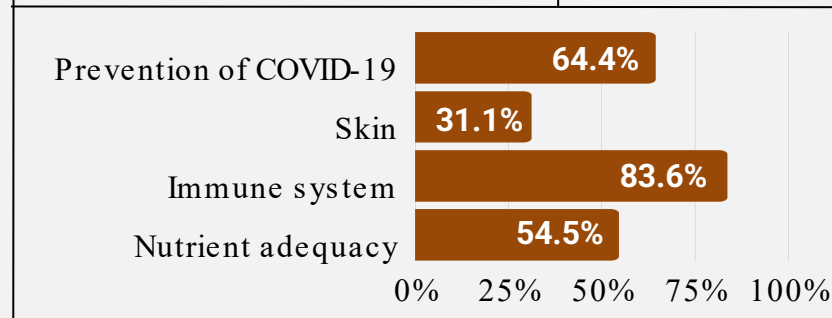


Fig 5. Health concerns that lead to taking dietary supplements

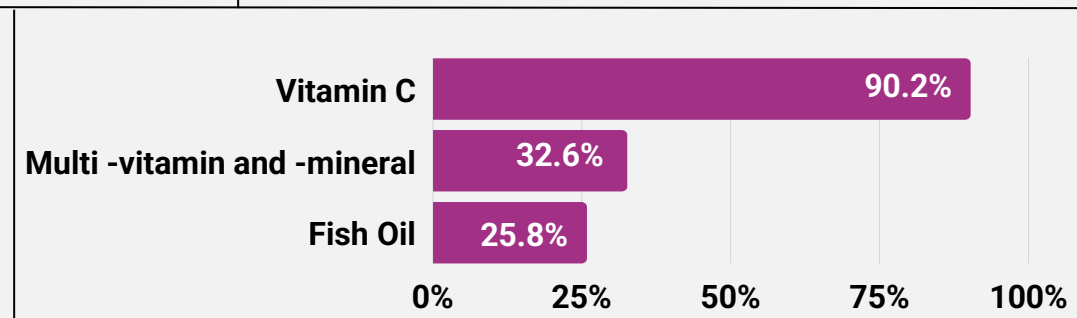


Fig 6. Type of dietary supplement taken

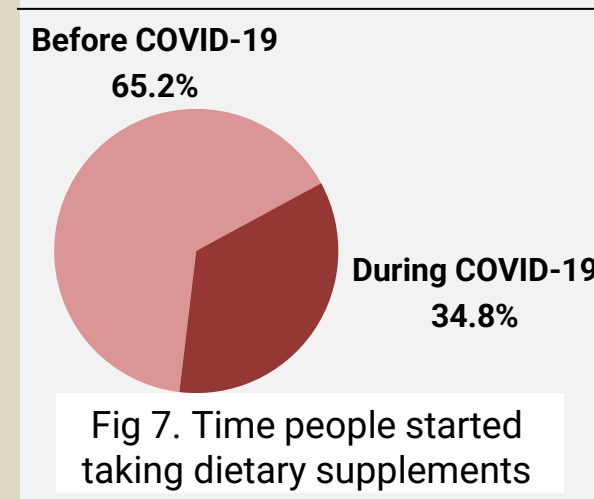


Fig 7. Time people started taking dietary supplements

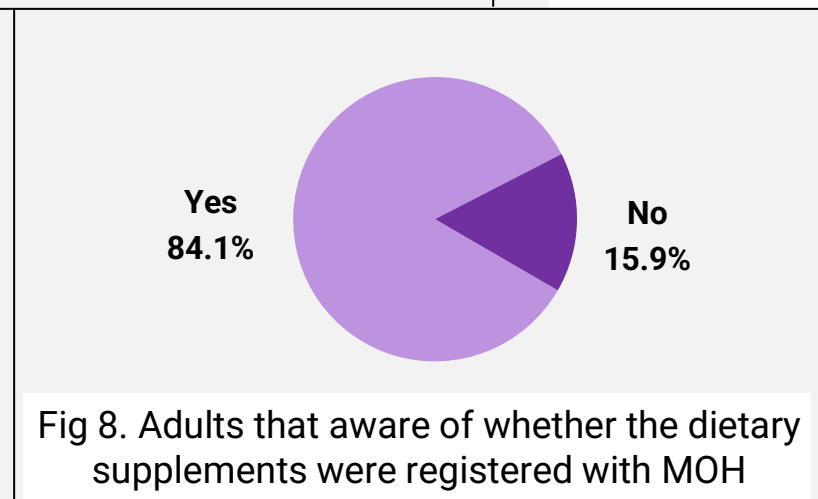


Fig 8. Adults that aware of whether the dietary supplements were registered with MOH

Table 1 Money spent on dietary supplements

	Before COVID-19 Pandemic	During COVID-19 Pandemic	P-value
Money spent on dietary supplement per month (RM) *	0 (100)	50 (150)	<0.001

* Data is presented as median (interquartile range)
† Wilcoxon Singed-Rank test

Table 2 Association between sociodemographic factors and dietary supplement intakes

Variables	Simple linear regression		Multiple linear regression		
	B (95% CI)	p - value	B (95% CI)	p - value	
Age	20-29	1.00	1.00		
	30-39	0.324 (0.129, 0.815)	0.017	1.670 (0.378, 7.376)	0.498
	40-49	0.636 (0.208, 1.944)	0.428	4.24 (0.897, 20.046)	0.068
	50-69	1.379 (0.403, 4.714)	0.609	3.576 (0.686, 18.642)	0.130
Gender	Female	1.00	1.00		
	Male	0.713 (0.365, 1.394)	0.323	0.664 (0.314, 1.406)	0.285
Marital status	Single	1.00	1.00		
	Married	0.408 (0.223, 0.745)	0.004	0.889 (0.262, 3.019)	0.850
Education Background	STPM/Diploma and below	1.202 (0.655, 2.204)	0.553	0.734 (0.339, 1.592)	0.434
	Bachelor's Degree and above	1.00		1.00	
Ethnicity	Chinese	2.391 (1.187, 4.816)	0.015	1.628 (0.758, 3.498)	0.212
	Kadazan - Dusun	2.661 (1.251, 5.662)	0.011	2.369 (1.070, 5.248)	0.034
	Other	1.00		1.00	
Personal monthly income (RM)	≤RM2500	1.00		1.00	
	RM2501-RM5000	0.514 (0.246, 1.077)	0.078	1.793 (0.678, 4.738)	0.239
	≥RM5001	1.544 (0.574, 4.153)	0.389	0.935 (0.290, 3.010)	0.910

CONCLUSION

There was an increase in the number of adults consuming dietary supplements during the COVID-19 pandemic, which was likely driven by the information sharing by social media and friends.

REFERENCE

1. Sidor, A., & Rzymiski, P. (2020). Dietary choices and habits during COVID 19 lockdown: experience from Poland. *Nutrients*, 12(6), 1657.
2. World Health Organization. (2021). WHO Coronavirus 2019 dashboard Available from: <https://covid19.who.int>. Geneva: World Health Organization (WHO).