

Study of epidemiological, clinical and management aspects of acute diarrhoeal diseases in children below 15 years in an urban general/family practice in Sri Lanka.

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This study was conducted to ascertain the (a) extent of acute diarrhoea in general practice in relation to age and sex, (b) seasonal variation (C) incidence of referrals for ward treatment, (d) contributory environmental factors, (e) parents knowledge, attitudes and practices regarding acute diarrhoea and home management, (f) response to an initial simple treatment plan which included ORS, extra fluids and normal feeds, (g) isolation of causative bacterial pathogens and their antibiotic sensitivity pattern. The results of the study showed that (a) the general practitioner sees 20-30 children under 15 years, presenting with the 1st episode of acute diarrhoea, per 1000 consecutive consultations. (b) Diarrhoea is more common in the months of February, June/July and November. (C) Diarrhoea is more common in children below 2 years of age. (d) Parents who sought treatment were from close proximity to the clinic, and proportionately were in higher income groups and had higher educational level when compared to the general population at the last census. (e) Knowledge of causative factors and mode of spread of diarrhoea was poor. (f) Home available fluids were used more often than ORS. (g) Advice was sought and information was gathered mainly from the general practitioner/family physician. (h) Majority of patients were not dehydrated and were managed as out-door patients needing extra fluids and ORS. (i) Stools by direct smear test showing over 5 pus cells and red cells per H.P.F. corresponded to positive stool cultures. (j) The commonest bacterial pathogen isolated was shigella flexneri type II, sensitive to readily available antibiotics such as furazolidone and nalidixic acid.