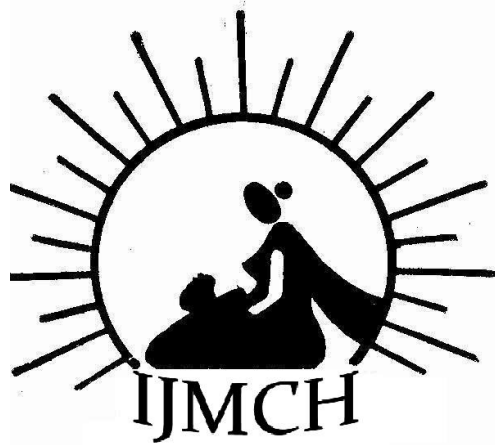


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Children under 5 Years in Rajapur

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1. What is the magnitude of diarrhea among under 5 children?? 2. What are the various actions taken in the management of diarrhea

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ABSTRACT

Research question: 1. What is the magnitude of diarrhea among under 5 children?? 2. What are the various actions taken in the management of diarrhea??

Setting:-The study was carried out in Rajapur, the urban field practice area of M R Medical College, Gulbarga.

Study design:-Cross sectional study.

Participants:- 156 under five children.

Methodology:- Data were collected by interview method with the help of a pre-tested predesigned schedule.

Results: A total of 156 under 5 children were included in the study in which 83 were males & 73 were females. 98 children suffered from at least one episode of diarrhea in the previous one year. Incidence of diarrhea was found to be 1.99 episodes/child/year. The highest incidence was observed in children aged 1-2 years of life and during rainy season. Of the 98 children suffered from diarrhea 80 children were taken to qualified doctors where 42 children were prescribed antibiotics with ORS, 14 were treated as in-patients. 16 children were treated in home with home available fluids and ORS. In 3 children no action was taken and 1 child was taken to a quack.

Conclusion: Incidence of diarrhea was found to be 1.99 episodes/child/year. The presence study revealed that the children were taken to doctors than home remedies for the management of diarrhea. There is excessive use of drugs in the management of diarrhea.

Key words: *Diarrhea, under fives, ORS, fluids, antibiotics.*

INTRODUCTION

Diarrhea remains a major preventable cause for under five morbidity and mortality. An average of 3.2 episodes of diarrhea occurs per child per year. Much attention has been given over the last couple of decades on treating acute diarrhea and its management by home available fluids and oral rehydration salts (ORS) solution. This has made a significant contribution in averting deaths among children under five years of age. Antimicrobial agents have only a limited role and anti diarrheal have no role in the treatment of acute diarrhea. Due to deficient clinical training of doctors and much expectation of mothers there is tendency to lay stress on drugs than oral rehydration.

MATERIAL AND METHODS

The study was carried out in 2 Anganwadi centers of Rajapur which is the urban field practice area of M R Medical College Gulbarga. The Anganwadi centers were selected by simple random technique. The study was done by house to house survey. During the house visit details regarding the number of episodes of diarrhea during previous one year period, duration of episodes, no. of stools per day and the treatment were recorded.

RESULTS

A total of 156 under five children were included in the study. Out of 156 children 83 were males and 73 were female children. Maximum children were in the age group 1 – 2 years. (27.56%) Minimum were in the age group 4 – 5 years (14.11%).

Table 1: Age and Sex Wise Distribution of Children

Age(Years)	Male	%	Female	%	Total	%
0 – 1	16	19.28	15	20.55	31	19.87
1 – 2	24	28.91	19	26.02	43	27.56
2 – 3	18	21.69	18	24.66	36	23.08
3 – 4	13	15.66	11	15.07	24	15.38
4 - 5	12	14.46	10	13.70	22	14.11
Total	83	100	73	100	156	100

Table 2: Episodes of Diarrhea among Children of Different Age Groups

Age(Months)	No. of Children	No. of children suffered from diarrhea	No. of diarrheal episodes	Episodes/child/Year
0 – 1	31	19	45	1.45
1 – 2	43	28	118	2.74
2 – 3	36	23	69	1.92
3 – 4	24	15	52	2.17
4 – 5	22	13	27	1.23
Total	156	98	311	1.99

98 children suffered from at least one episode of diarrhea in the previous one year. Overall incidence of diarrhea was 1.99 episodes per child per year. The maximum incidence was in the age group 1 – 2 years followed by 3 – 4 years.

Table 3: Episodes of Diarrhea among Children during Different Seasons

Seasons	No. of Episodes	Percentage
Rainy	184	59.16%
Winter	75	24.12%
Summer	52	16.72%
Total	311	100%

The highest incidence of diarrhea among children was observed during rainy season (59.16%) followed by winter season (24.12%) and in summer the incidence was least (16.72%).

Table 4: Action taken by mothers

Action taken	No. of children	Percentage
Home available fluids / ORS	16	16.33%
Qualified doctors	80	81.63%
Private / Quacks	1	1.02%
No Action	1	1.02%
Total	98	100%

Of the 98 children suffered from diarrhea 80 children (81.63%) were taken to qualified doctors. 16 children (16.33%) were treated in home with home available fluids or ORS. 1 child was taken to a quack and in 1 child no action was taken.

Table 5: Treatment Health Agencies

Treatment	No. of children	Percentage
ORS	56	70%
Drugs	42	52.5%
I v Fluids / inpatients	14	17.50%

Of the 80 children which were taken to the qualified doctors 56 (70%) children were given ORS but 42 (52.5%) children were prescribed at least one drug along with ORS. 14 (17.5%) were treated with I v fluids as in patients.

DISCUSSION:

Highest incidence of diarrhea during rainy season (59.16%) followed by winter (24.12%) and in summer (16.72%) was least. In other study conducted at Dhinoj PHC, Gujrat about 46.39% during rainy season while least were in 17.36% in winter.⁴

In our study 70% of children were given ORS and 52.5% were prescribed at least 1 antibiotic. This is in contrast to a study conducted in Kashmir which showed more use of antibiotics (77.9%) and less use of ORS (8.4%).⁵

In our study 81.63% children were taken to qualified doctors while 16.33% were treated at home with home available fluids or ORS and 1 child was taken to quack and in 1 child no action was taken. This is similar to study done in Delhi where 55.7% cases were taken to private practitioner and 7.1% to government health facility. 79.1% were given drugs while 31.3% children were given ORS and 1.7% were given i.v. fluids.⁶

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