A B S T R A C T

Considerable progress has been made in reducing death rates with a resultant increase in life expectancy but infant and child mortality in developing countries remain unacceptably high. Diarrhoeal disease claims the lives of at least five million per year and is the major contributor to malnutrition in developing countries.

In Jamaica the emphasis in the control of diarrhoeal disease has been on proper case management including the introduction of oral rehydration therapy.

A review of the data indicates that further reduction in diarrhoeal disease mortality could be achieved by combining other methods in the control programme, including education, nutrition, sanitation and good hygiene .

This study was conducted with a view of determining the relative contribution of diarrhoeal disease to total case load of Bustamante Hospital for Children, Casualty Department and further to determine the effects of environmental conditions on recurrent episodes.

The study was designed as a case control one in which extensive descriptive work had to be done to arrive at baseline data.

The results indicate that the incidence of diarrhoeal disease shows no decline since 1982 when it accounted for 36 percent of all cases seen in the island's hospitals. Majority of these cases occurred in the 0 - 3 year cohort.

Social and economically depressed areas (ghettos) contribute most significantly to case load in both first and second episodes. The age cohort 0 - 18 months accounts for 96 percent of all recurring cases, with a male female ratio of 2 - 1. Males dominated the case load 2 - 1.

Further analysis of the data found no significant difference between knowledge score of cases and controls, but there were statistically significant differences between attitude and premises hygiene scores in both groups. There were varying responses as to the cause of diarrhoea in their child by both cases and control.

Among the recommendations made were:

1. That diarrhoeal disease control programme should integrate other services such as special education programmes, sanitation and nutrition.
2. That cases of recurrent episode of diarrhoea should be notified to the Health Department for investigation and remedial action inclusive of premises hygiene and education of parent/guardian.