

# SELECTED ABSTRACTS FROM NATIONAL MEDICAL JOURNALS

Pages with reference to book, From 251 To 252

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## **MANAGEMENT OF PROTEIN CALORIE MALNUTRITION. BY DIET LND DRUGS: A (DMPARATIVE PILOT STUDY. Soomro, M.Y. Pak. Paed. J., 1987; 11:55-60.**

A pilot study was carried out on two groups of infants diagnosed as protein calorie malnutrition treated with diet and drugs, in the children's Hospital Benghazi, Libya. There were ten babies in each group. The average age was four months and none had any metabolic, chromosomal or congenital abnormalities. Each infant on admission was weighed and the height and head circumference was noted. Routine laboratory tests were carried out alongwith estimation of plasma proteins. The diet provided was in the form of 45% carbohydrates, 40% fats and 15% proteins with 210 calories per kg per 24 hours. Vitamins B1, B2, B6, D1. Folic Acid and Liver Extract were supplemented. The second group were given additionally Thyroxin 0.025 mg daily for 4 weeks and cortisone 0,7 mg per kg in 24 hours for 4 weeks.

Twenty percent of the cases required blood transfusion and 30 percent were suffering from Giardiasis which was treated accordingly.

Each baby was reviewed every week for 4 weeks. The first group of infants showed a mean weight gain of 0.428 kg, height increased by 1.4 cms and head circumference by 0.5 cms.

The second group had a mean weight gain of 0.748 kg, height increased by 13 cms and head circumference by 1 cm. There were no signs of fluid retention or thyrotoxicosis.

This not study, inspite of inadequate investigation facilities was designed to compare the rate of recovery, duration of hospitalization and possible treatment at home of children suffering from protein calorie malnutrition.

## **FRACTURE OF FIRST RIB IN AN INFANT: A CASE REPORT. Beg, M.H., Reyazuddin. Pak. Paed. J., 1987; 11:5-6.**

Fracture of the first rib and associated injury to cervical spine is a rare lesion. A nine month old male baby was brought in after a crush injury following the collapse of a wall, with weakness in all four limbs. There had been a transient loss of consciousness. Neurological examination revealed Grade II weakness in all extremities, absent superficial and deep reflexes and hyposaeshtesia below C3 spinal segment. The X-ray chest showed a fractured right first and second ribs with fracture dislocation of second cervical vertebra. Skull traction was started along with analgesics which lead to an excellent recovery in four weeks.

Fracture of the first rib, a rare lesion is attributed to either indirect trauma transmitted through the clavicle or manubrium or a sudden contraction of the scalenus anticus muscle leading to avulsion fracture occurring at the subclavian artery groove. In the case presented, the crush injury which was a combination of both direct forces was the possible cause.

## **PSYCHOLOGICAL PROBLEMS OF CHILDREN IN AN ORPHANAGE. Javed, A.J., Syed, Z. Pak. Paed. J., 1987; 11:61-68.**

A study was conducted to determine the psychological problems of children living in an Orphanage in Lahore. One hundred cases were interviewed and information was collected regarding emotional and behavioural aspects. Intellectual maturity was assessed with the help of Good. nough Harris Drawing Test.

It was determined that emotional problems were more frequently encountered in the younger age group and behaviour problems were seen in the older children.

The emotional problems were projected as fear, increased sensitivity and anger outbursts whereas the

older children showed anxiety, sadness of mood and nervousness.

It is an established fact that children who have been separated from their families develop severe psychological problems as aggression, delinquency, lying, stealing and running away. The study presented reveals the same facts with sense of rejection and low self esteem being the causative factors. Lack of maturity in intellectual spheres in another personality disturbance seen in these children. The recommendation offered is to have a close, warm and affectionate atmosphere for living. Instead of living in large barrack like buildings they should be housed in small and scattered places resembling ordinary houses. A permanent effective link should be developed with the substitute parents. An adequate amount of stimulation should be provided along with opportunities for acquiring new knowledge. A properly trained staff should be employed for the purpose. All these efforts will ensure that orphan children will get a chance for normal, healthy and satisfactory development.

**NUTRITIONAL STATUS OF PRIMARY SCHOOL CHILDREN AT FAISALABAD. Ahmed, I., Chaudhary, F.M., Gilani, A.H., Irfan, M. Pak. Paed. J., 1987; 11:37-42.**

A nutritional survey was carried out along with Haemoglobin estimation in 476 children of a primary school in Kalan, Faisalabad. The ages of the children ranged between 6 and 13 years. Jelliffes' classification was used as a standard and is based on the body weight categorisation. The venous blood from the various categories was examined for Haemoglobin levels. 21 children were found to have a normal nutritional status. 87 children were suffering from 3rd degree malnutrition and 15 from 4th degree malnutrition. The remaining children fell into the 1st and 2nd degree malnutrition class.

The Haemoglobin values gave an average of 13.9 g% in the normal group. The 3rd degree malnutrition group had an average Haemoglobin of 13.1 G whereas the 4th degree over showed a mean haemoglobin of 12.5 G/OL. The statistical analysis proved the decrease of Haemoglobin concentration with the advancement of malnutrition. It is a well established fact that protein energy malnutrition brings gross and microscopic changes in all the tissues of the body. If the nutrient intake does not meet the requirements for growth and repair the value of some of the components of blood, a vital body fluid, get altered. Changes in the haemoglobin level are a good index to the nutritional status in children.