

ROLE OF ORAL REHYDRATION, ALONE IN THE MANAGEMENT OF ACUTE DIARRHOEA

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The role of oral rehydration therapy (ORT) containing glucose and electrolytes used alone without prior intravenous infusion was evaluated in 451 diarrhoeal patients at a treatment centre with home follow-up. In 277 moderately dehydrated patients, 236 (85%) were rehydrated at the treatment centre. 41 were considered as ORT-failure due to inadequate consumption and persistent vomiting; additional 21 had fever above 39°C or frank dysentery. After oral rehydration for 4 - 5 hours 215 (78%) patients were sent home. Follow-up in 201 for five days detected six patients requiring intravenous infusion, all of whom had been admitted with moderately severe dehydration. All but two of 174 mildly dehydrated patients were successfully managed by ORT alone at the treatment centre and at home. Although ORT used alone in the management of diarrhoea is successful in a majority of patients, intravenous therapy will be required to prevent potential threat to life due to severe dehydration. Diarrhoea due to invasive organisms will require special care.