

## EXPERIENCES IN TREATING CHOLERA IN A RURAL HOSPITAL

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The paper relates experiences gathered in treating cholera and associated diarrhoeal illnesses at Matlab Cholera Hospital during a period of 2 years.

Discussion starts with facilities available in the said hospital including staff responsible for treating patients even in epidemic periods. Thereafter mode of operation of treating patients, starting from receiving the patient from Ambulance Boat upto his discharge from hospital is discussed in detail.

Next discussion deals with the spectrum of clinical condition of patients and assessment of their clinical condition.

A general outline of complications expected and how they are recognised and treated is also discussed.

The paper next deals with general management of cholera patients giving stress to such points as constant nursing care, proper collection and measurement of excreta, and how intravenous infusion is given in difficult cases etc.

Along with these discussions different data will be available to show number of patients treated, their age, sex distribution, mortality rate, epidemic season and non epidemic seasons etc. Some picture slides may be shown to give a general picture of Matlab Hospital and its activities.

## ORAL THERAPY OF CHOLERA

D. R. Nalin, Richard Cash, Rafiqul Islam,  
A. Majid Mollah, and Robert A. Phillips

Previous studies at this Laboratory indicated that a solution containing electrolytes and glucose was absorbed from the small bowel of acute cholera patients (Taylor et al., Hirschhorn et al., Publications pending).

This year the solution has been modified for clinical use. After relief of shock with initial intravenous therapy using 5-4-1 solution patients in the study group were treated with an oral solution. Control patients received only intravenous therapy. Both groups received tetracycline. Some cholera patients treated with an oral solution required no additional intravenous therapy, while others required additional small amounts of intravenous therapy. Results show that patients who received the oral therapy required only one quarter of the amount of intravenous fluid required by control patients.

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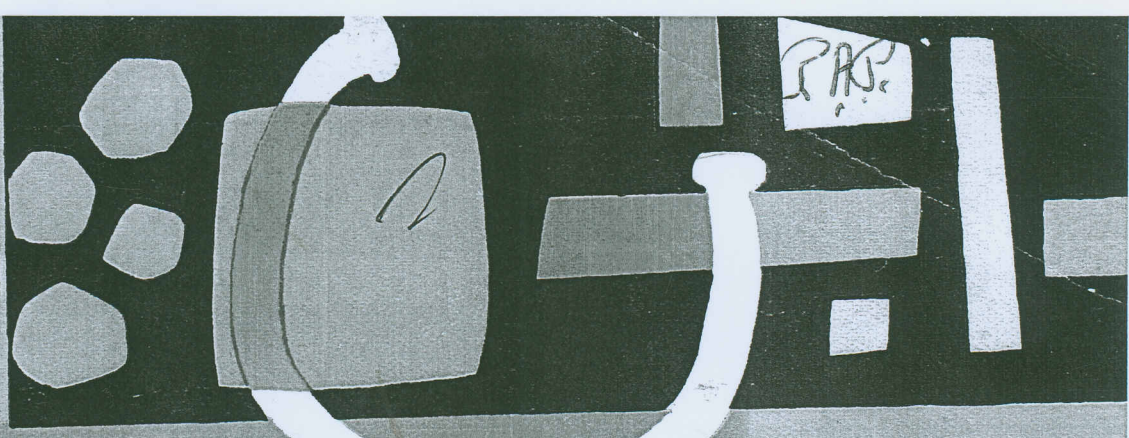
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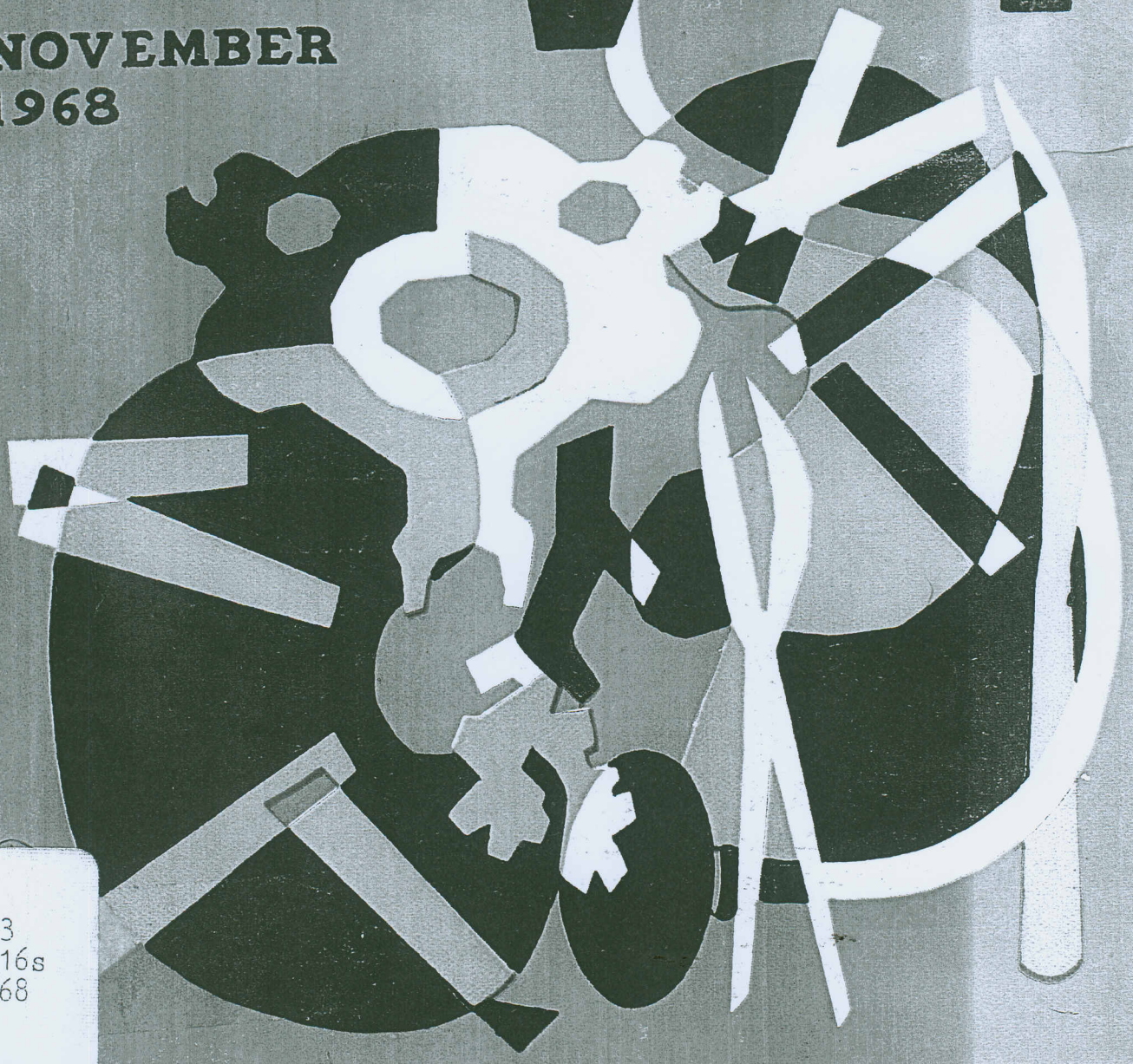
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