longer in the placebo group (p=0.000), 25% in the ampicillin group (p=0.017), and 9% in the erythromycin group (p=0.37) compared to the tetracycline group. The clinical recovery rate by 96 hours was 75% (p=0.001) in the placebo group, 91.3% in the ampicillin group (p=0.16), and 95.7% in the erythromycin group (p=0.04) compared to the tetracycline group. The stool output in mL/kg body weight was: 318±50, 335±30, 323±25, and 498±37 respectively in tetracycline, ampicillin, erythromycin, and placebo groups.

**Conclusion:** The results of the study indicate that the clinical efficacy of tetracycline, ampicillin, and erythromycin in the treatment of cholera in children was comparable. It is recommended that, where test for *V. cholerae* is positive to ampicillin, it can be used as an effective alternative antibiotic for the treatment of cholera and acute respiratory tract infections.

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 Desire for Children and Subsequent Abortion in Matlab, Bangladesh

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**Objective:** Investigate the desire for children and subsequent abortion in the MCH-FP and comparison areas of Matlab, Bangladesh.

**Methodology:** Data of the in-depth survey 1984, KAP survey 1990, and the Demographic Surveillance System (1984-1994) were used.

**Results:** During 1984-1994, the incidence of abortion increased substantially in both comparison and intervention areas, and such increase was due to those who wanted no more children. After controlling for all the variables in the logistic regression, the probability of subsequent abortion was higher among those who wanted no more children than those who wanted more in both MCH-FP (5.2 times) and comparison (8.9 times) areas. The incidence of abortion was lower in the MCH-FP area than that in the comparison area and was lower among the illiterates, users of contraception, and the Muslims in both the areas compared to the educated, non-users of contraception, and the Hindus.

**Conclusion:** The findings of the study suggest that there is a need to improve the quality of family planning services, particularly for those who want no more children to reduce abortion and abortion-related deaths.

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Implementation of the Essential Services Package through Standardized Service Delivery Protocols

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**Objective:** Evaluate the range and quality of services delivered from the urban primary-care clinics through the adaptation and implementation of appropriate and practical service delivery protocols.