SUMMARY

Diarrhoeal diseases are a leading cause of morbidity and mortality in the developing countries. In Sri Lanka it was the fifth leading cause of hospitalization and accounts for more than 5 per cent of discharges.

A study of selected risk factors contributing to diarrhoeal diseases in children under 5 years of age was conducted at the Lady Ridgeway Hospital, Colombo, in June - July 1994.

160 cases of diarrhoea were compared with 160 controls with regard to some selected risk factors contributing to diarrhoea.

Some of the socio-demographic, socio-economic, environmental, biological, behavioral and nutritional factors of children were studied.

This study found the following principal variables as being associated with childhood diarrhoea.

Socio-demographic and socio-economic factors which consist of age of parents, parental educational level and the socio-economic status of the family were significantly especiated with risk of developing diarrhoea.

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Housing and environmental sanitary conditions including unhygienic disposal of refuse and child's faeces and non-availability of sanitary latrines and safe drinking water were significantly associated with risk of diarrhoea.

A significant association between biological conditions, including low birth weight and low gestational age and childhood diarrhoea was observed.

Mothers' knowledge and practices consisting of knowledge about diarrhoea and practices which lead to diarrhoea were contributory risk factors associated with the occurrence of diarrhoea.

Malnutrition of children including stunting, wasting and acute under nutrition were found to be significantly associated with the occurrence of childhood diarrhoea.

Most of these risk factors are similar to those found in previous studies. No contradictory findings were observed in the results of this study.

While major risk factors such as socio-economic status and environmental sanitation may not be easy to change in a developing country like Sri Lanka, low-cost techniques, such as growth monitoring, breast feeding, immunisation and nutrition may be used to reduce morbidity due to diarrhoea among children.