Use and safety of home-made oral rehydration solutions: an epidemiological evaluation from Bangladesh.

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Abstract
Home-made oral rehydration solutions (ORS) have been promoted in developing countries for preventing dehydration due to diarrhoea. Evaluations of this method must take into account the effective usage rates achieved and the safety of the solutions used. A community programme organized by the Bangladesh Rural Advancement Committee (BRAC) has visited over a third of all the households in Bangladesh and taught the preparation and use of an oral rehydration solution made from lobon (common salt) and gur (unrefined sugar)--abbreviated to LGS. An evaluation study based on over 7000 households enabled different usage rates to be calculated for four different diarrhoea types. The overall usage of LGS for all diarrhoea episodes was around 5-10% but for what the people called 'Severe Diarrhoeas' or cholera it was found to be between 25% and 52%. The mother's ability to prepare a safe Lobon-gur solution appeared to deteriorate about six months after training and it was significantly poorer in the Second Phase than the First Phase of the BRAC programme.

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