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Case Report

Home Remedy for Malnourished Kids Works Wonders



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Case Report

Many severely malnourished (grade IV) children continue to die every year in Melghat because their parents are unwilling to hospitalize them. Myths and mis-beliefs too hold them back from approaching the hospital. However, doctors from MAHAN Trust working in the tribal belt have proved that these children can be also saved through home or community based treatment, both medical and dietary. Successful treatment of Lakshmi Sukhram Jamunkar, a 23-month-old girl whose condition was worse than a grade IV child, is a shining example. She was treated at her home under the supervision of an illiterate but well-trained village health worker, Meerabai. Lakshmi's case shows that community level treatment can work wonders provided it is taken up scientifically by trained personnel.

Lakshmi, from Tar Uganda village in Melghat, was just 5kg and on verge of death when the community workers of MAHAN first brought her from Mahatma Gandhi Karmagram Hospital in Utavali on January 23 this year. Her body resembled a skeleton covered with skin. Besides malnourishment, she was suffering from diarrhoea, pneumonia and sepsis (severe infection). Her parents were not willing to admit her to the hospital. In fact, they had given up any hopes of her survival. However, nine months later, Lakshmi now weighs 9kg and is hale and hearty even without a single day of hospitalization. Actually, her weight increased from 5 to 8kg within first 70 days of treatment. Now she is normal even after completion of 3 months of therapy due to our regular follow up and behaviour change communication.

What exactly then brought about this turnaround? "Patience, proper and stepwise treatment of infections, protein-rich diet made from locally available raw materials and above all daily monitoring of all the health parameters made this possible. However, this was not done by us, the doctors. She was given daily dose of injections and fed the ready-to-use therapeutic food prepared by us three

times a day for all these nine months at her home, "said Dr Vibhawari Dani, former dean of the Government Medical College and Hospital (GMCH) and a paediatrician now working for MAHAN.

Dr Ashish Satav, who runs the trust hospital of MAHAN, told TOI that Lakshmi had undergone some medical treatment at sub district hospital, Dharni, for seven days and district hospital at Amravati but had fallen sick immediately after discharge. Thereon, her grandparents and parents had given up on hospital treatment and flatly refused to admit the girl. "So, we decided to treat Lakshmi at home. It required more time and patience but it worked. It has made us believe that stepwise treatment can revive grade IV children without actual intervention by doctors. We can just be the guides," he said.

Meerabai, who had a tough time convincing the family about the treatment, is happy with the result. "I just followed the doctor's instructions and gave all the medicines and injections on time. The specially designed food by Dr Dani, Dr. Satavand Jaishree Pendharkar acted like a catalyst," said Meerabai. Pendharkar, a nutritionist from Central India Institute of Medical Sciences in the city, is associated with Karmagram. She, in consultation with Dr Dani and Dr. Satav, has worked out a formula based on WHO guidelines for nutritional requirements of malnourished children.

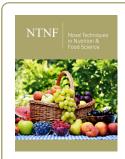
Lakshmi's is an index case for home-based treatment of grade IV malnourished children as neither government doctors nor those at Karma gram had tried this until now. "At present, Infant Mortality Rate (IMR) in Melghat is more than 60 per 1000 live births. The prevalence rate of malnutrition in Melghat now is almost 20%. We have treated more than 1230 severely underweight and malnourished children at home from 2011 to 2017 through our trained village health workers. Case fatality rate is less than 1% during this treatment period so that we could achieve the target set by WHO and UNICEF," said Dr Satav.

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