

Paralytic poliomyelitis in a rural area of north India.

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ABSTRACT

BACKGROUND: Paralysis due to poliomyelitis is common in rural areas. The extent of paralysis, type and place of treatment and effect of local treatment on children with poliomyelitis was assessed in a house-to-house survey conducted between 1990 and 1991 in a rural area of north India. **METHODS:** Trained field workers conducted a house-to-house survey in 9 villages of Haryana with a total population of 22,883. All cases of deformity and muscular weakness suspected to be due to poliomyelitis were examined and details regarding immunization, diagnosis, treatment and follow up were recorded. The late consequences of neglect as well as inappropriate medical advice were also assessed by physical examination and direct questioning of the parents. **RESULTS:** Thirty-seven cases of paralytic poliomyelitis were identified indicating a prevalence rate of 1.6 per 1000 population. Of these, 97% were paralysed before they were 2 years old and 60% had a history of intramuscular injections preceding paralysis. Only 14% of them had received either partial or complete immunization. The majority of families preferred to take treatment from traditional healers or in city hospitals but not from primary health centres. **CONCLUSION:** Despite the national immunization programme, paralytic poliomyelitis continues to be a significant problem in the villages surveyed. Primary health centres are an unreliable source of epidemiological data for paralytic poliomyelitis as villagers do not prefer to visit them for treatment of the disease. Injections given for treatment of fevers in rural areas may play a role in precipitating paralytic poliomyelitis. These findings highlight the urgency of a broad-based primary health care approach at primary health centres. Traditional healers and private practitioners should be trained to provide physiotherapy to children with polio and educated about the importance of not giving injections to children with minor fevers.