

Five-Year Review of Diarrheal Disease Cases Admitted to a Busy Referral Hospital in Ghana

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Aim. To evaluate successes in the clinical management of severe diarrheal diseases in a busy referral hospital in Ghana, four years after the introduction of the World Health Organization's protocol for the clinical management of diarrhea and the establishment of an oral rehydration therapy Corner.

Method. Data on the cases of diarrheal diseases recorded in the hospital from 1992 to 1996 were collected and analyzed.

Results. The average overall diarrheal disease mortality over the period was around 20% with twice as much deaths among adults than among children. There was a tendency of decline in childhood mortality, whereas it was much less evident among the adults. The high mortality caused by diarrheal diseases in the hospital and the differences in adult and childhood mortality were related to the problems in case management that stemmed from diarrhea case management training of clinical staff with a bias towards the pediatric staff, and also from the loss of several trained staff members through transfers and other staff replacements within the hospital. There were similarities in the trend of admissions for adults and children over the period, which suggested a possible common etiology for severe diarrheal diseases recorded in the hospital.

Conclusion. Diarrheal mortality in a busy referral hospital should be investigated regularly for lapses in management because some of these deaths may be prevented by simple interventions.

Key words: adult; diarrhea; hospital mortality; child, hospitalized; Ghana