

## CHOLERA

### WHAT IS CHOLERA

Cholera is an acute infection caused by the bacterium *Vibrio cholerae*. It can affect any age, from infants to adults, and usually occurs in epidemics (that is, a large number of cases occurring suddenly in an area).

### HOW IS IT SPREAD

Cholera is a waterborne illness and its spread is facilitated by poor public sanitation. Persons who have the disease excrete the bacteria in the stool. Contamination of drinking water supplies with sewage, public defecation, poor personal hygiene among food handlers, and the presence of flies that contaminate food all contribute to the spread of cholera.

### WHAT ARE THE CLINICAL MANIFESTATIONS OF CHOLERA

The incubation period ranges from 6 hours to 5 days. After the incubation period, watery diarrhea and vomiting develop. There may be a low-grade fever. The diarrhea is profuse, painless, watery (has a “rice water” consistency) and may have flecks of mucus, but no blood.

### WHAT ARE THE COMPLICATIONS OF CHOLERA

The complications of cholera can be directly related to the diarrhea. The severe diarrhea causes loss of fluids from the body and quickly causes dehydration. The smaller the child, the more prone he is to complications. Severe dehydration can lead to lethargy, abnormalities in the blood levels of various electrolytes (like sodium and potassium), seizures, diminished consciousness and coma. It can also cause kidney failure. If dehydration is not corrected promptly, the patient can die.

### HOW IS CHOLERA TREATED

The most important thing in the management of cholera (or any other illness with severe diarrhea and dehydration) is to replace the lost fluids. The child with suspected cholera should be treated in hospital. Oral Rehydration Solution (ORS) based on the World Health Organization formula is sufficient for most but the most severe cases. The ORS fluid must be given in adequate quantities and can be given even if the child is vomiting. If the child is obtunded or comatose, intravenous fluids should be given to quickly replace fluid losses. As soon as the fluid losses have been replaced, the child should be offered his normal food – this will not make the diarrhea worse and will help prevent malnutrition resulting from the illness.

Antibiotics are of secondary importance – they may, however, shorten the course of illness.

The diarrhea will stop on its own after a few days. Anti-diarrheal drugs (like Lomotil or Imodium) should not be given.

### WHAT IS THE PROGNOSIS

This depends on how quickly and effectively fluid replacement is started. Though cholera results in many deaths each year, if it is treated quickly with appropriate fluid restoration, the child should recover completely.

### CAN CHOLERA BE PREVENTED

Cholera usually occurs in epidemics, but sporadic cases can occur even in the absence of an epidemic. Good personal hygiene (washing hands with soap after using the toilet and before eating) is important in the prevention of any water borne disease. Drink only water that has been purified and resist the urge to eat or drink foods outside that may potentially be contaminated. Discourage flies, since they can contaminate food.

Though there is a vaccine available against cholera, it is not very effective. Mass vaccination campaigns conducted after an epidemic has already started do not help since it takes about 3 months for some immunity to develop.