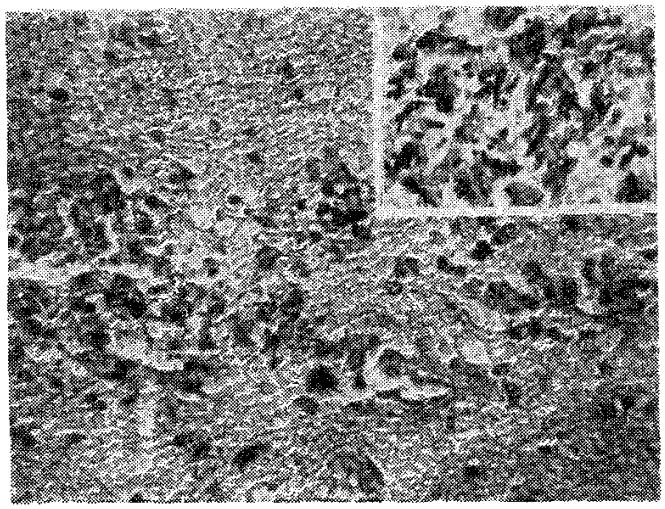

Fig. Photomicrograph of the brain shows granuloma composed of epithelioid cells and giant cells. H & E × 100. Inset: Granuloma showing budding and hyphael form of candida by GMS stain × 400.

increasing recognition as a major cause of morbidity and mortality among very low birth weight infants in intensive care nurseries.

Neuropathologically, a spectrum of disease entities are associated with candidiasis, ranging from meningitis, ependymitis, microabscesses, macroabscesses preceded by noncaseating granulomas, and diffuse glial nodules. Cerebral candidal granulomas have been described in adults, and to the best of our knowledge, have not been reported in children(3).

Various risk factors are known to cause candidal infection, *viz.*, low birth weight, parenteral therapy, and prolonged antibiotic therapy. All these factors appear to have played a role in the present case. Cultures to isolate fungi were not done in the present case. With increasing awareness of this systemic infection, more cases may be diagnosed and treated in the future.

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Colostrum Feeding of Healthy Newborns

Colostrum is the secretion of breasts during the later part of pregnancy and for the 2-4 days after delivery(1). Previous studies have shown that more than half the newborns receive the first breast feed as late as the third day(2). In order to study the practices relating to initiation of feeds and feeding of colostrum in healthy newborns, I interviewed 65 mothers who had delivered normally in B.S. Medical College Hospital.

The mothers were interviewed at least 48 hours after delivery. The mothers of the babies who were sick or had birth weight of 2.5 kg or less were excluded from the study. Information regarding type of first feed, initiation of colostrum, type of subsequent feeding, persons concerned in prelacteal feeds were noted on a pretested proforma. As all the babies were kept in the nursery for sometime after delivery, information was taken from nursing personnel about the type of feeds till the transfer of baby to the mother.

Out of 65 mothers, 27 (41.5%) and 38 (58.5%) were primipara and multipara, respectively. The mean birth weight of babies was 2.75 kg. A total of 72.4% mothers had 3 or more antenatal visits; 23% had less than 3 and 4.6% had no antenatal check up. Thirty mothers (46.1%) had received no education, 32 mothers (49.3%) were educated till primary school level, and 3 mothers (4.6%) were graduates.

The type of first feed was plain water in 46 (70.8%), breast milk in 15 (23.1%) and artificial milk in 4 (6.1%) babies. Prelacteal feeds were used in 76.9% babies and 23.1% babies were not given any prelacteal feeds. Out of the neonates who received prelacteal feeds, plain water was used in 35.4%, plain water and artificial milk in 40%, and plain water and glucose in 1.5% babies. Prelacteal feed was given by nursing staff in nursery in 36.9%, both nursing staff and mothers in 36.9% and only mother in 3.1% babies. Majority of mothers (49.2%) started colostrum feeding within 6 hours of birth. After initiation of colostrum feeding all the mothers continued to breast feed.

In the present study, none of the babies were deprived of colostrum in contrast to previous studies by Kumari *et al.*(3) where only 16% newborns were fed colostrum. The prelacteal feeds were used in 76.9% babies which were less than that observed by Kumar *et al.*(2). The study also shows that prelacteal feeds were given mostly by nursing staff in the nursery ward.

An early rooming in an avoiding separation of babies from the mother would allow early initiation of breast feeding.

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Nutritional Beliefs Among Anganwadi Workers

With reference to this article(1), I have a few comments to offer.

While assessing the nutritive value of a particular food, one has to keep in mind not only the protein and energy content but also minerals and vitamins and various factors that inhibit absorption of minerals, particularly iron. Bulk is an important consideration in young children. The Indian