

## Resurgence of Epidemic Dropsy

Epidemic dropsy was more frequently observed in states of West Bengal, Maharashtra and Andhra Pradesh particularly during the first half of this century. Since then the occurrence had decreased all over India mainly due to stringent preventive measures taken by the public health authorities. From Delhi only two epidemics have been reported(1,2). Lately, sporadic cases of this disease were reported by our institution in 1992(3). After a gap of four years there has been a resurgence of epidemic dropsy in the border areas of East Delhi near Ghaziabad.

Four patients including two children of the same family were admitted to the Guru Teg Bahadur Hospital with a provisional diagnosis of epidemic dropsy. A survey of the affected area from where these cases belonged to revealed six more families suffering from the same disease. A total of 37 members of these families were studied. Fourteen subjects were below the age of 12 years, seven were between 12-20 years and sixteen individuals were above 20 years of age. All the families were consuming mustard oil in loose form which was found to be contaminated with argemone oil as proved by nitric acid test.

Pitting pedal edema was the most consistent clinical feature noticed in 75% of cases. Pigmentation and cutaneous flush over the edematous areas were noticed in 68% and 65% cases, respectively. Gastrointestinal features, mainly loose stools were noticed in half of the cases. The notable feature was that ocular problem manifesting as decreased vision was witnessed

in a solitary case. There was one death due to congestive heart failure and partial recovery in remaining individuals in one and a half month's of follow up.

Complete stoppage of the consumption of adulterated oil alongwith symptomatic treatment is the hallmark of the management of such cases. High protein diet and analgesics to reduce localized pain are advocated. Congestive heart failure is treated with diuretics. The pitting edema has a waxing and waning pattern which usually subsides after 2-3 months.

To conclude, the treating physician should strongly suspect epidemic dropsy in patients having: (a) bilateral pitting edema; (b) cutaneous manifestations in the form of erythema, flushing, warmth and tenderness of the edematous areas; and (c) Involvement of most of the family members alongwith the history of consumption of mustard oil in loose form.

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