Conclusions
CONCLUSION

- From the present study we were able to conclude that children with severe grades of protein energy malnutrition had ‘Cardiac atrophy’ and ‘impairment of left ventricular function’, which has been documented in our study by radiological, electrocardiographic and echocardiographic methods.

- The radiological changes which suggests cardiac atrophy was decreased Cardiothoracic ratio in all cases of severe grades of malnutrition.

- The electrocardiographic findings which substantiated the presence of microcardia was evidenced by decreased P and QRS voltages.

- Similarly on echocardiographic examination the presence of decreased interventricular septal thickness, decreased left ventricular dimension, decreased left ventricular posterior wall thickness and decreased ejection fraction all suggests cardiac atrophy and impaired left ventricular function.

- Thus in nutshell we are of the view, that there is no cardiac sparing in severe grades of malnutrition as there is proportional loss of skeletal as well as cardiac muscle, as has been suggested by various other workers, who delved to study this aspect in protein energy malnutrition.

- We suggest that nutritional rehabilitation and fluid therapy of severely malnourished child should be slow, cautious and judicious, to prevent cardiac failure in these cases.