In this study, total number of neonates recruited was 488, of which 242 cases and 246 controls, in cases and controls 6 & were 10 dropped respectively. 38 (16.1%) of neonates were in the early neonatal period and 198 (83.9%) belonged to late neonatal period. Terms babies were 192, Pre term babies 44 in cases. 129 babies belonged to small for gestational age, 133 males and 103 females. 185 cases were living in poor housing conditions. 20 were delivered at home, 178 cases belonged to low socio economic status, 29 (12.7%) cases were from rural areas others were from urban areas.

168 had breast feeds, 68 had artificial feeds, 79 had prelacteal feeds, umbilical sepsis was noted in 22 babies, and other focus of sepsis in 73.

*E.coli* and Klebsiella is isolated commonly in stool (89 & 69 cases respectively). 55 cases showed positive blood culture of which klebsiella is the predominate organisms followed by pseudomonas. Rotaviruses were isolated in 29 cases as against 10 controls, where we studied only 80 cases and 80 controls. Analysing the risk factors for diarrhoea.

a) Neonates whose parents belong to low socio economic status,
b) Not following good habit of hand washing before feeding the babies and after disposal of excreta,
c) Living under poor housing environment were risk factors for the diarrhoea. The associated risk factors were
d) Positive blood culture and
e) Positive stool culture for bacteria.
Answers to Research Questionnaire

1. Certainly the stool culture will help the clinician in choosing the appropriate antibiotic in moribund conditions, most of the time stool culture studies are not available except in institutions.

2. The age of onset of diarrhoea in neonates usually second to third weeks of life and increases the mortality due to diarrhoea in neonates.

3. Continued breast feeding even by nasogastric tube will prevent mortality due to diarrhoea.

4. Low birth weight neonates has more chance of dyeing due to diarrhoea.