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ศูนย์วิทยทรัพยากร
จุฬาลงกรณ์มหาวิทยาลัย

2. Socioeconomic information:

- S1. Could you tell me the main occupation of father. []
5. Business/land lord
 4. Government service
 3. General farmer
 2. Labor
 1. Other
 0. None.
- S2. Could you tell me the occupation of the mother. []
5. House wife
 4. Service
 3. Farming
 2. Labor
 1. Others
 0. None.
- S3. What is the education level of father. []
1. Illiterate
 2. Literate
 3. Primary school
 4. High school 10th grade
 5. High school to university graduate.
- S4. What is the education level of mother. []
1. Illiterate
 2. Literate
 3. Primary school
 4. High school 10th grade
 5. High school to university graduate.
- S5. Can you tell me how much your family earn in cash equivalent per month. []
1. 100 -- < 1000.
 2. 1000 --< 2000.
 3. 2000 --< 3000.
 4. 3000 --< 4000.
 5. 4000 above.
- S6. Is it enough to rare your family []
1. Yes
 0. No

3. Child care information:

- C1. Do your mother job out side home ? []
 1. Yes
 0. No

If yes []
 1= regularly
 2 = irregularly.

- C2. Please notify who takes care the under []
 five years children.
 5. Father/Mother
 4. Mother
 3. Grand parents
 2. Brother/Sister
 1. Friend/Relative.

4. Food habit information:

- FH1. Is there any food taboos during sickness ? []
 1. Yes
 0. No
 If yes please specify _____

5. Food supplement information:

- FS1. At what age the supplementary food was introduced []
 in your child's diet (at early age)
 1. 0 -4 month
 2 > 12 month
 3. 8 -12 month
 4. 5 -7 month

- FS2. How long was the baby breast fed. []
 1. 0 -6 month
 2. 7- 12 month
 3. 13-18 month
 4. 19 - 24 month
 5. 24 month above.
 6. Until next pregnancy

- FS3. Is there any kind of milk substituted []
 for breast milk ?
 5. Powder milk
 4. Animal milk
 3. Condense milk
 2. Others
 1. None

S4. At what age of milk supplementation. []
4. Less than 12 month
3. 12 - 17 month
2. 18 - 24 month
1. 24 month +
0. Never.

FS5. Age of animal protein supplementation []
5. 6 -11 month
4. 3 -5 month
3. 12 - 17 month
2. 18 - 24 month
1. 24 month +
0. Never

FS6. Age of egg yolk supplementation. []
5. 6-11 month
4. 3-5 month
3. 12-17 month
2. 18-24 month
1. 24 + month
0. Never

FS7. Age of legume supplementation. []
5. 6 - 11 month
4. 3 - 5 month
3. 18 - 24 month
1. 24 month+
0. Never

FS8. At what age introduction of fat and oil. []
5. 6-11 month
4. 3 - 5 month
3. 12 - 17 month
2. 18 - 24 month
1. 24 month +
0. Never.

6. Food availability information:

FA1. Is there any kind of food preservation. []
1. Yes
0. No

If yes which you preservation

- 5. Fish + meat fruits and vegetable []
- 4. Fish + meat
- 3. vegetable + meat
- 2. vegetable or fruits
- 1. Cereals
- 0. Others

2. Do you grow vegetables. []

- 1. Yes
- 0. No

If yes

- 5. Green + root and tubers/spice []
- 4. Green + root or tubers/spices.
- 3. Green or root and tubers.
- 2. Spices.

FA3. How long you grow ? []

- 3. 9 - 12 month/year
- 2. 5 - 8 month/year.
- 1. 4 month/year

FA4. Frequency of buying vegetables. []

- 5. Every days
- 4. Twice a week
- 3. Weekly
- 2. Fortnightly
- 1. Monthly.

FA5. Type of salt use. []

- 4. Iodized salt
- 3. Rock salt
- 2. Sea salt (Iodine without)
- 0. Do not used.

จุฬาลงกรณ์มหาวิทยาลัย

7. Health information:

H1. Had your child suffered from diarrhoea (> 4 times /day) during last two weeks. []

1 - Yes

0 - No

H2. Had your child suffered from fever, cough, breathlessness, during the last 2 weeks. []

1 - Yes

0 - No.

H3. Have you ever seen worms in the child's stool. []

1 - Yes

0 - No

8. Screening physical examination:

H4. Eye: conjunctiva, Pale = anaemia, pink = no anaemia. []

1 - Yes

0 - No

H5. Bitot's spot; White grayish patch seen in the sclera. []

1 -Yes

0 -No

H6. Mouth: Angular stomatitis, sores at the angle of the mouth []

1 -Yes

0 -No

H7. Mouth: Dental caries, dental decay. []
1 - Yes
0 - No

H8. Neck: Goiter check any swelling either side of
the trachea. []
1 - Yes
0 - No

H9. leg: Observe pitting oedema in the ankle,
feet side of the tibia. []
1 - Yes
0 - No

H10. The child is extremely thin. []
1 - Yes
0 - No

9. Anthropometric assessment:

Weight _____ Kg _____ Gms.

Height _____ Cm.

ศูนย์วิทยทรัพยากร
จุฬาลงกรณ์มหาวิทยาลัย

List of association test between weight for height classification and various indicators:(case N=118 control N=130).level of significance p.value < 0.05

| Indicators | χ^2 | P.value |
|--|----------|---------|
| S1.Occupation of father | 0.16 | 0.68 |
| S4.Education of mother | 0.41 | 0.52 |
| S6.Income enough or not to rare the family | 0.01 | 0.89 |
| FS1.Age of introduction of solid food. | 0.16 | 0.68 |
| FS3.Any kind of milk substituted. | 0.44 | 0.50 |
| FS4.Age of milk suplimentation | 2.76 | 0.09 |
| FS5.Age of animal protein supplementation | 0.43 | 0.50 |
| FS6.Age of egg yolk supplementation | 0.26 | 0.65 |
| FS7.Age of legume supplementation | 0.64 | 0.42 |
| FS8.Age of fat and oil | 1.04 | 0.30 |
| FA3.Duration of vegetable growing. | 0.17 | 0.67 |
| FA4.Frequency of buying vegetable | 0.02 | 0.88 |
| types of salt use | 1.53 | 0.21 |

| Indictors | χ^2 | P.value |
|--|----------|---------|
| Health information | | |
| H1.Diarrhoea | 0.02 | 0.88 |
| H2.Fever,cough,breath- lessness | 1.63 | 0.20 |
| H3.History of worms seen in child's stool | 0.00 | 0.94 |
| H4.Examination of conjunctiva pale or pink | 0.00 | 0.96 |
| H5.Bitot's spot | 0.25 | 0.61 |
| H6.Angular stomatitis | 0.71 | 0.39 |
| H7.Dental decay | 0.00 | 0.92 |
| H8.Goitre feel in neck | 2.19 | 0.13 |
| H9.Pitting oedema | 0.01 | 0.91 |
| H10.Extremily thin | 0.86 | 0.35 |

ศูนย์วิทยทรัพยากร
จุฬาลงกรณ์มหาวิทยาลัย

Comparision of means between all cases and control:

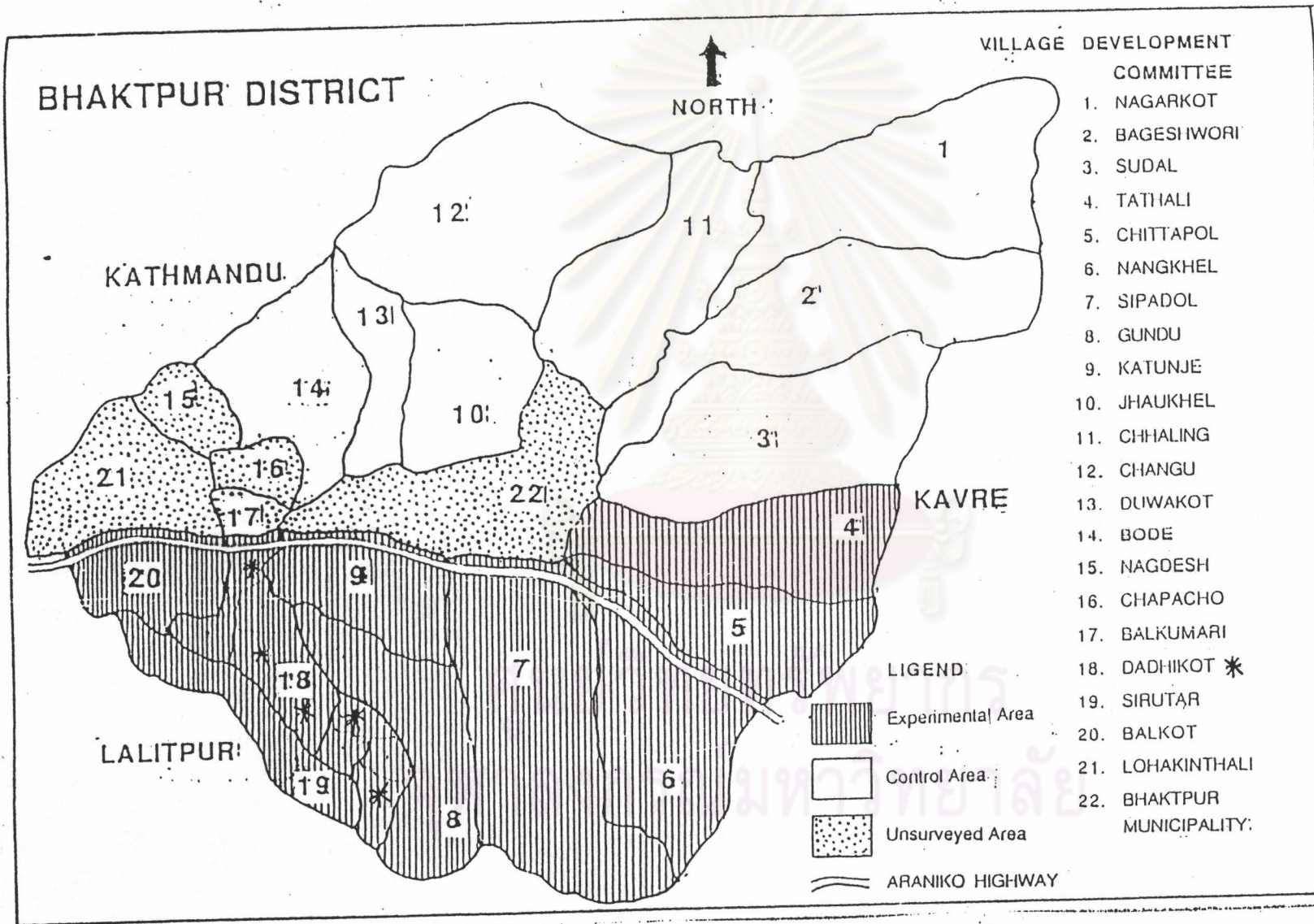
| Indicators | All cases | | All controls | | |
|-------------------------------|-----------|-------|--------------|------|---------|
| | Means | SD | Means | SD | P.Value |
| Age of father | 27.82 | 5.74 | 29.03 | 7.80 | 0.37 |
| Age of mother | 24.29 | 4.80 | 25.20 | 4.88 | 0.40 |
| Age of child | 25.78 | 15.70 | 27.06 | 7.34 | 0.68 |
| No of child | 2.11 | 1.46 | 2.23 | 1.01 | 0.59 |
| T.No family | 6.75 | 4.62 | 6.27 | 2.65 | 0.22 |
| Duration of breast feeding | 4.51 | 1.74 | 4.39 | 1.78 | 0.59 |

Note: Number of subject 118

130

Note unmach t-test is applied in spsspct

ศูนย์วิทยทรัพยากร
จุฬาลงกรณ์มหาวิทยาลัย



NOTE: STUDY AREA *

Vitai

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ศูนย์วิทยทรัพยากร
จุฬาลงกรณ์มหาวิทยาลัย