101.09, P<0.01), and the sex ratio (males to females) was 1.4:1. The clinical symptoms of most patients were serious. Most patients (75.7%) had symptoms of obstructive asthma. In this outbreak, the fatality rate was one percent. Family aggregation of this outbreak of epidemic bronchiolitis was found by binominal distribution method ($\chi^2 = 9.51$ P<0.05).

期5職群11维率0001高条平地行动保护

Both etiologic and serologic studies showed that the major pathogen causes this epidemic bronchiolitis was RSV.

The risk factors in this outbreak were studied. It appeared that the outbreak of epidemic bronchiolitis was related to the variation of temperature; the bigger variation of daily temperature, the more the cases were found (rs = 0.4799, P<0.05).

The occurrence of the disease was also related average space in the house each person had. The smaller the house, the higher attack rate it showed (trend $\chi^2=5.58$, P<0.05).

Key words Epidemic bronchiolitis
Respiratory syncytial virus (RSV)

参考文献

1.耿贯一主编。流行病学.下册.第一版. 北京: 人民卫生出

版社, 1980: 406.

- 2.北京首都儿科研究所.妇幼卫生示范县小儿肺炎防治研究方案.1986.
- 3. Brandt CD, et al. Epidemiology of respiratory syncytial virus infection in Washington, DC I. Composite analysis of eleven consecutive yearly epidemics. Am J Epidemiol 1973; 98: 355.
- 4. Adams JM, et al. Relationship of pneumonitis in infants to respiratory syncytial virus.

 Lancet 1961; 81:502.
- 5. Kapikian AZ, et al. An outbreak of febrile illness and pneumonia associated with respiratory syncytial virus infection. Am J Hyg 1961; 74: 234.
- 6.Kim HW, et al. Epidemiology of respiratory syncytial virus in Washington, DC. I. Importance of the virus in different of infection. Am J Epidemiol 1973; 98:216.
- 7.天津医学院流行病学教研室译.人类病毒性传染病——流行病学及防治.第一版.北京:人民卫生出版社,1984。393.

(参加本项工作的还有庄贵华、陈建民、武志明等, 谨此致谢)

所民政 进 祖家证典地共逐制中。遗址一致短铜

(1989年11月2日收稿,1990年1月5日修回)

新野县1000名学龄儿童寄生虫感染情况调查

河南省新野县人民医院

贺利民 田迎棠 段焕荣 乔玉敏 彭红亭 孙纪萍 杨学珍

我们对新野县五所学校的1000名6~10岁 儿童的寄生虫感染情况进行了调查,其中四所农村学校,属农村扶贫地区,卫生条件差,男女学生共719名。城关镇市民学生281名。调查内容包括饭前洗手习惯、大便中查寄生虫虫卵、血白细胞及嗜酸细胞计数。

询问饭前洗手习惯,能基本坚持饭前洗手的农村学生共73人,占受检总人数的10.1%。市民学生能坚持饭前洗手的共225人,占受检总人数的80%。农村学生大便虫卵检出情况为:蛔虫感染率60.8%,钩虫6%,其它寄生虫感染率5.4%。

农村学生与城市学生白细胞与嗜酸细胞检查情况表明,农村6~7岁和8~10岁学生白细胞数均值分别为10680.11/mm⁸和10123.148/mm⁸,均超过同年龄

组白细胞数的正常值,而市民学生白细胞均值为9212.1/mm³, 血嗜酸细胞计数为48.754%。农村学生嗜酸细胞计数6~7岁组中为75.138%,8~10岁组中为82.713%,提示白细胞总数的增高与血嗜酸细胞值增高有关。把这两项数值与大便虫卵检出率比较,提示寄生虫感染与血嗜酸细胞数增高是一致的。把农村6~7岁和8~10岁学生嗜酸细胞增高率比较,两组统计学处理无显著性差异(P>0.05)。这说明在6~10岁学生中寄生虫感染现象不因年龄增大而减少。但农村学生与市民学生比较,则有高度显著性差异(P<0.01)。

(参加本项调查工作的还有梅焕香、李素萍、贺全香、陈风华、于书焕和樊晓阳同志)