

THE EFFECT OF THE ADMINISTRATION OF POTASSIUM IODATE, POTASSIUM IODIDE AND PLACEBO TABLETS ON ENDEMIC GOITER AND PROTEIN BOUND IODINE LEVELS IN SCHOOL CHILDREN. José Méndez *, Adela Cabezas *, Fabio Castillo * and Nevin S. Scrimshaw. Institute of Nutrition of Central America and Panama, Guatemala, C. A.

In July, 1951, 561 school children in El Salvador were divided into three groups to which 8.5 mgs. KIO_3 (I), 6.5 mgs. KI (II) or dextrose placebo tablets (III), were administered weekly. After 15 weeks, the percentage of endemic goiter in group I changed from 37 to 22, in group II, from 34 to 19, and in group III, from 36 to 38. Children re-examined 16 weeks after the end of this trial had the same incidence of endemic goiter as before treatment. After 20 additional weeks of treatment the percentages observed were: group I, 22, group II, 16 and group III, 38. In a 20 weeks' trial begun in March, 1952, with 264 children the results were: group I, 36 to 24%, group II, 43 to 24%, and group III 34 to 32%. In March, 1952, 159 children in Guatemala were similarly treated for 32 weeks. The percentages before and after treatment were: group I, 51 to 16, group II, 60 to 23 and group III, 55 to 55. At the end of the treatment period in Guatemala 27 children in group I were found to have an average protein bound iodine (P.B.I.) of 4.97 mcg. (S.D.1.04), 26 in group II, 5.6 mcg. (S.D.1.19) and 24 in group III, 2.68 mcg./100 ml. (S.D.1.20). Within each group the difference in P.B.I. between those with and without goiter initially were not significant. The possible importance of potassium iodate in the iodization of salt is discussed.