traumatic diaphragmatic rupture. J Emerg Medi. 2010;39:21-4.

5. Lal S, Kailasia Y, Chouhan S, Gaharwar APS, Shrivastava GP. Delayed presentation of post traumatic diaphragmatic hernia. J Surg Case Rep. 2011;7:6.

Synthetic Apple Juice Masquerading as Low-osmolar ORS

A 3-year-old child was admitted with profuse watery diarrhea. A pediatrician elsewhere had advised low-osmolar ORS and even prescribed five packs (200 mL each) of “ORS-L” by Jagdale Industries Limited, Bangalore (**Fig. 1**). While the tetrapac is named ‘ORS-L’

TABLE I COMPARISON OF THE APPLE DRINK WITH ORS-L

Contents (L)	Apple drink	Low-osmolar ORS
NaCl	1.25 g	2.6 g
KCl	1.5 g	1.5 g
Sod Citrate	2.9 g	2.9 g
Vitamin C	500 mg	—
Glucose	27 g	13.5 mg
Sugar	80 g	—
Carbohydrate	40 g	—
Osmolarity	585	245

in large letters, below that in smaller letters is inscribed ‘Apple Drink’ and ‘enriched with electrolytes and Vitamin C’. **Table I** offers a comparison of the contents of the tetrapac with low-osmolar ORS. The total osmolarity of ORS-L is 585 mmol/L and is guaranteed to cause a severe osmotic diarrhea if ingested in adequate quantity.

It is unfortunate that in our country apple juice can be openly mislabelled and sold as ORS. All pediatricians

FIG. 1 Apple drink mislabelled as ‘ORS-L’.

should be alert to this fraud, which requires knowledge of the formula of ORS-L. Perhaps the IAP through its Medico-legal Group should lodge an official complaint with the Ministry of Food Processing Industries and the Central Drugs Standard Control Organization.

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