Table(1): Distribution of the Sample according to sex.

Distribution according to sex.	Number	Percent
Males.	483	47.6
Females	531	52.4
Total	1014	100.0

This table (1)shows that the total number of the sample is 1014 individuals 483 males representing 47.6% and the rest 531 are females representing 52.4%.

Table(2): Distribution of the Sample studied according to marital status.

Marital status	Number	Percent
Married	358	35.3
Divorced	6	0.6
Widowed	54	5.3
Single*	214	21.1
Unapplicable **	382	37.7
Total	1014	100.0

* Single : According to the legal age of marriage (18 years or more for males and 16 years or more for females) and not married have been considered as single.

** Unapplicable: including those who were below the legal age of marriage.

This table (2) clearly illustrated that the percentage of married and unapplicable individuals are nearly equal in number, while the divorced and widowed comprises 0.6 % and 5.3 % respectively .

Table (3): Distribution of level of education among the sample studied according to sex.

Level of education / Sex.	Males		Females		Total	
	Number	Percent	Number	Percent	Number	Percent
Illiterate	136	28.2	306	57.6	442	43.6
Read & write	86	17.8	28	5.3	114	11.2
Basic education (Primary and Prep a ratory)	120	24.8	98	18.5	218	21.5
Secondary or technical education	108	22.4	89	16.8	197	19.5
University or Equivalent	33	6.8	10	1.8	43	4.2
Total	483	100.0	531	100.0	1014	100.0

It is evident from table (3) that: off 1014 individuals studied there were 306 (57.6 %) females and 136 (28.2 %) males illiterate while those read and write were 86 (17.8 %) males and 28 (5.3 %) females.

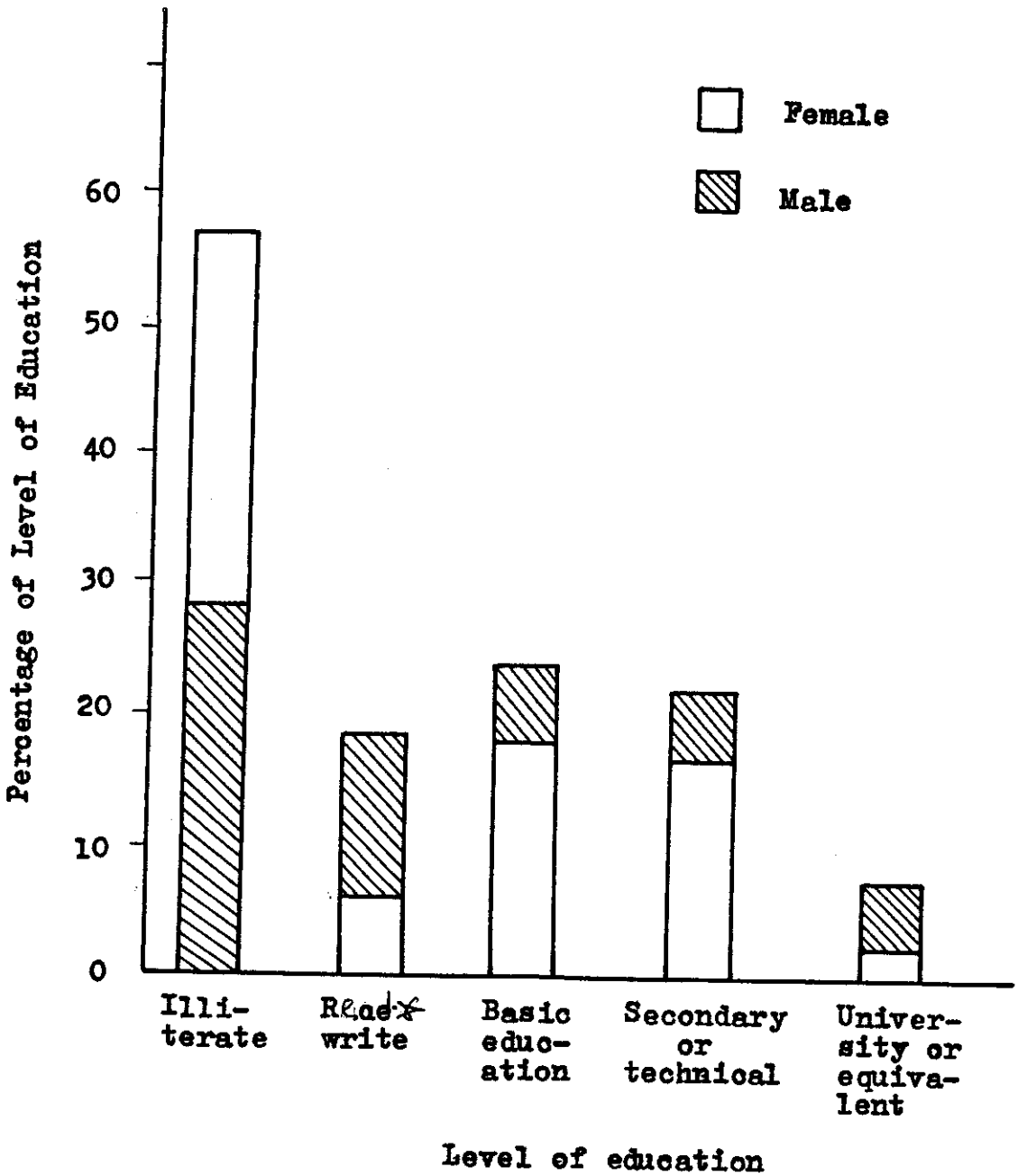


Fig. (1): Showing the percent of level of education among the sample studied.

Table (4): Distribution of the occupation of the sample studied according to sex.

Occupation / Sex	Males		Females		Total	
	Number	Percent	Number	Percent	Number	Percent
Professional	20	4.4	4	0.7	24	2.4
Commerce	6	1.3	----	------	6	0.6
Admin Sterative	62	13.6	30	5.4	92	9.1
Skilled workers	24	5.3	8	1.4	32	3.1
Agricultural or manual workers	57	14.7	15	2.7	82	8.1
Unapplicable *	276	60.7	502	89.8	778	76.7
Total	455	100.0	559	100.0	1014	100.0

* Unapplicable: Including all heuse-wives, Soliders, students, children and infants.

This table (4): Shows that 76.7 % of the sample studied are not applicable which indicates that a big protion of our society not productive and about 9.1 % are adminsterative and only about 8.1 % are agricultural workers which is previousely the commenest job in rural society.

Table (5): Distribution of the family size among the sample studied.

Number of individuals Family	Number of Families	Percent
3 -	14	9.1
4 -	24	15.6
5 -	18	11.7
6 -	26	16.9
7 -	24	15.6
8 -	18	11.7
9 -	10	6.5
10 +	20	12.9
Total	154	100.0

This table (5) shows that about 55.9 % of families having individuals from 5-8 individuals while a small percent about 9.1% of families having individuals more than two and only about 19.4% of families having individuals from 9-10 or more individuals.

Table (6): Per Capita income per month (Eyptian pound) of the sample studied.

Income permonth Per Capita	Number	Percent
0 -	57	5.6
3 -	94	9.3
6 -	237	23.4
9 -	338	33.3
12 -	178	17.6
15 +	66	6.5
Unknoun	44	4.3
Total	1014	100.0

This table (6) shows that most of our group studied (56.7%) have income ranged between 6-9 pounds/month. On other hand (6.5%) have income of 15 or more pounds per month.

Table (7): Distribution of water supply and latrines among the studied sample.

A. water supply	Number of families	Percentage
Main piped	44	28.6
Pumped	88	57.1
River	00	00.0
Mixed	22	14.3
Total	154	100.0

B. Latrines	Number of families	Percentage
Sanitary	10	6.5
Insanitary	144	93.5
Total	154	100.0

It is evident from (7) that: main source of water supply of dwellings is the hand pump which comprises 57.1 % of the houses of the families. On other hand about 93-5 of families had insanitary latrines.

Table (8): Distribution of rooms in the houses of the families studied.

Number of rooms / Family	Number of families	Percent
1 -	4	2.6
2 -	14	9.1
3 -	52	33.7
4 -	26	16.9
5 -	16	10.4
6 -	22	14.3
7 -	6	3.9
8 +	14	9.1
Total	154	100.0

This table (8) Clearly showed that about 75.3 % of the families having 3-6 rooms in their houses and only about 2.6 % of them having one room in their houses On the other hand about 9.1% of the families having 8 or more rooms in their houses.

Table (9): Distribution of the families according to number of occupants per bed room.

Number of occupants per bed room. Family	Number of families	Percent
1 -	10	6.5
2 -	50	32.5
3 -	44	28.6
4 -	27	17.5
5 -	12	7.8
6 +	11	7.1
Total	154	100.0

It is evident from the above table (9) that about 78.6 % of the families having from 2-4 occupants per bed-room and only about 7.1 % of the families having 6 or mor occupants per bed room.

II. HYPOTHETICAL SCORE FOR MALNUTRITION AND SOCIO-ECONOMIC RELATIONSHIP

Hypothetical score:

This study is not the first one which employs the standard score for socio-economic conditions. However many authors adopted the score system specially Ali et al., (1979). The score has been adopted to suit contemporary conditions of life and the special details of this study.

The variable used in the score were the following:

1. Income per capita per month (Egyptian pounds).
2. Level of education of the eldest working one.
3. Occupation of the eldest working one.
4. Family size .
5. Housing characterstics.

Each item in these variables have taken 10 points, accordingly the total score will be 50 points.

Our sample is classified into three social class groups according to this score as follow:

Upper social class 37.5 -- 50 points.
Middle social class 25.0 -- 37 points.
Lower social class < 25 points.

Table (10): Distribution of the sample studied into different social classes according to hypothetical score.

Social class	Number of individuals	Percent.
Upper social class	86	8.5
Middle social class	284	28.0
Lower social class	644	63.5
Total	1014	100.0

It is clear from this table (10) that most of individuals (63.5%) were of Low social class, 28% were of middle social class and only about 8.5% were of upper social class.

Clinical assessment:

The clinical examination of the individuals depend upon the classification of Jelliffe, (1966). He classified the signs used in nutritional survey into three groups (annex II).

In the present study only signs of group I was used.

Table (11): The distribution of the studied individuals according to the pattern of clinical signs by sex.

Clinical signs	Clinically free		Signs Sugestive of malmutrition		Total	
Sex	Number	Percent	Number	Percent	Number	Percent
Males	386	48.1	97	45.8	483	47.6
Females	416	51.9	115	54.2	531	52.4
Total	802	100.0	212	100.0	1014	100.0

$K^2 = 0.38$

$P > 0.05$

This table (11) shows that the percentage of signs of suggestive of malnutrition are higher in females than in males and the difference is statistically insignificant ($P > 0.05$).

Table (13): The Distribution of the sample studied according to group of Signs suggestive of malnutrition.

Signs suggestive of malnutrition	Number	percent
- Clinically free	802	79.1
- Patients with one group of signs suggestive of malnutrition.	142	14.0
- Patients with two groups of signs suggestive of malnutrition.	56	5.5
- Patient with more than two groups of signs suggestive malnutrition.	14	1.4
Total	1014	100.0

It is evident from the above table (13) that 14.0 % of patients suffering from one group of signs suggestive of malnutrition and 5.5 % suffering from two groups of signs and only 1.4% of the cases studied suffering from three or more groups of signs suggestive of malnutrition.

Table (14): Percentage distribution of the Clinical signs suggestive of malnutrition among different social classes.

Social Clases. / Clinical Signs	Upper social Class		Middle social Class		Lower social Class		Total	
	Number	percent	Number	percent	Number	percent	Number	Percent
Clinically free	80	93.0	228	80.3	494	76.7	802	79.1
Signs suggestive of malnutrition	6	7.0	56	19.7	150	23.3	212	20.9
Total	86	100.0	284	100.0	644	100.0	1014	100.0

$$\chi^2 = 12.6$$

$$P < 0.05$$

This table (14) shows that the clinical signs suggestive of malnutrition are more in middle and Lower social classes than in those with upper social class. The difference is statistically significant ($P < 0.05$).

Table (15): Distribution of weight for age and level of protein energy malnutrition from birth to five years, sexes combined among different social classes.

Social Class	Upper social Class		Middle social Class		Lower social Class		Total	
level of PEM	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	16	69.6	39	54.2	54	44.3	109	50.2
First level	4	17.4	12	16.7	26	21.3	42	19.4
Second level	3	13.0	8	11.1	18	14.8	29	13.4
Third level	0	00.0	7	9.7	14	11.5	21	9.7
Fourth level	0	00.0	6	8.3	10	8.1	16	7.3
Total	23	100.0	72	100.0	122	100.0	217	100.0

This table (15): clearly illustrated that number of the individuals with normal standard of weight for age more in lower social class 54 individuals than those of the upper social class 16 individuals. But this is not true because comparing to the actual number of the upper and lower social class it was found great difference. It was 16 off 23 and 54 off 122 in upper and lower social class respectively.

Table (16): Distribution of weight for age and level of protein energy malnutrition from six up to eighteen years among different social classes: (A) Males.

Social class / level of PEM	Upper social Class		Middle social Class		Lower social Class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	5	50.0	9	43.0	50	41.7	64	42.4
First level	3	30.0	4	19.0	26	21.6	33	21.9
Second level	1	10.0	4	19.0	28	23.3	33	21.9
Third level	1	10.0	2	9.5	8	6.7	11	7.2
Fourth level	0	0.0	2	9.5	8	6.7	10	6.6
Total	10	100.0	21	100.0	120	100.0	151	100.0

This table (16) : Clearly showed that the percentage of the male individuals with normal standard weight for age more in upper social class (50%) than those of the lower social class (41.7%).

Table (17): Distribution of weight for age and level of protein energy malnutrition from six up to eighteen years among different social classes: (B) Females.

Social class / level of PEM	Upper social Class		Middle social Class		Lower social Class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	6	60.0	20	47.7	48	53.3	74	52.1
First level	2	20.0	8	19.0	20	22.2	30	21.2
Second level	1	10.0	8	19.0	14	15.6	23	16.2
Third level	1	10.0	4	9.5	4	4.4	9	6.3
Fourth level	0	0.0	2	4.8	4	4.4	6	4.2
Total	10	100.0	42	100.0	90	100.0	142	100.0

It is evident from this table (17) that the percentage of the female individuals with normal standard weight for age were more in upper social class (60%) than those of the lower social class (53.3%).

Table (18) : Relationship between level of protein energy malnutrition according to weight for age and social classes among boys and girls from birth upto five years.

Social class / level of PEM	Upper social class		Middle social class		Lower social Class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	16	69.6	39	54.2	54	44.3	109	50.2
First and second level	7	30.4	20	27.8	44	36.1	71	32.7
Third and fourth level	0	0	13	18.0	24	19.6	37	17.1
Total	23	100.0	72	100.0	122	100.0	217	100.0

$X^2 = 8.8$

$P > 0.05$

This table (18) shows that the percentage of malnutrition for boys and girls from birth upto 5 years are higher in lower social class than in those with middle and upper social classes. The difference is statistically insignificant. ($P > 0.05$).

Table (19) : Relationship between level of protein energy malnutrition according to weight for age and different social classes among males aged from six to eighteen years.

Social class / level of PEM	Upper social class		Middle social class		Lower social class		Total	
	No	%	No	%	No	%	No	%
Normal	5	50.0	9	43.0	50	41.7	64	42.4
First and Second level	4	40.0	8	38.0	54	45.0	66	43.7
third and fourth level	1	10.0	4	19.6	16	13.3	21	13.9
Total	10	100.0	21	100.0	120	100.0	151	100.0

$X^2 = 1.9$

$P > 0.02$

It is evident from this table (19) that the percentage of malnutrition for males aged from 6-18 years are higher in lower social class than in those with middle and upper social classes. The difference is statistically in significant ($P > 0.05$).

Table (20): Relationship between level of protein energy malnutrition according weight for age and different social classes among females aged from six to eighteen years.

Social class / level of PEM	Upper social Class		Middle social class		Lower social class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	6	60.0	20	47.7	48	53.3	74	52.1
First and second level	3	30.0	16	38.1	34	37.8	53	37.3
Third and fourth level	1	10.0	6	14.2	8	8.9	15	10.6
Total	10	100.0	42	100.0	90	100.0	142	100.0

$X^2 = 2.6$

$P > 0.05$

It is clearly showed from this table(20) that percentage of malnutrition for females aged from 6-18 years are higher in lower social class than in those with middle and upper social classes. The difference is statistically insignificant ($P > 0.05$).

b) Height for age:

Table (21): Distribution of height for age and level of protein energy malnutrition from birth to five years, sexes combined among different social classes.

Social class / level of PEM	Upper social class		Middle social class		Lower social class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	16	69.7	42	58.3	62	50.8	120	55.3
First level	3	13.0	18	25.0	31	25.4	52	24.0
Second level	3	13.0	5	6.9	12	9.8	20	9.2
Third level	1	4.3	4	5.6	9	7.4	14	6.5
Fourth level	0	0	3	4.2	8	6.6	11	5.0
Total	23	100.0	72	100.0	122	100.0	217	100.0

This table (21) clearly illustrated that the number of individuals with normal standard of height for age more in lower social class 62 individuals than those of the upper social class 16 individuals. But this is not true. because comparing to the actual number of the upper and lower social class, it was found great difference It was 16 off 23 and 62 off 122 in upper and lower social class respectively.

Table (22): Distribution of hight for age and level of protein energy malnutrition from six upto eighteen years among different social classes:
(A) Males.

	Upper social class		Middle social class		Lower social class		Total	
	Number	Percent	Number	Percent	Number	Percen	Number	Percent
Normal	7	70.0	14	66.7	61	50.8	82	54.3
First level	3	30.0	5	23.8	37	30.8	45	29.8
Second level	0	0	2	9.5	11	9.2	13	8.6
Third level	0	0	0	0	6	5.0	6	4.0
Fourth level	0	0	0	0	5	4.2	5	3.3
Total	10	100.0	21	100.0	120	100.0	151	100.0

This table (22): clearly showed that. The percentage of the male individuals with normal standard height for age were more in upper social class (70 %). Than those of the lower social class (50.8 %).

Table (23): Distribution of height for age and level of protein energy malnutrition from six up to eighteen years among different social classes: (B) Females.

	Upper social class		Middle social class		Lower social class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	8	80.0	30	71.4	61	67.8	99	69.7
First level	2	20.0	10	23.8	12	13.3	24	16.9
Second level	0	0	2	4.8	8	8.9	10	7.1
Third level	0	0	0	0	4	4.4	4	2.8
Fourth level	0	0	0	0	5	5.6	5	3.5
Total	10	100.0	42	100.0	90	100.0	142	100.0

It is evident from this table (23) that 80% of the female individuals in upper social class had normal standard height for age while 67.8% in lower social class had normal standard.

Table (24) : Relation ship between level of protein energy malnutrition according to height for age and social classes among boys and girls from birth up to five years.

	Upper social class		Middle social class		Lower social Class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	16	69.7	42	58.3	62	50.8	120	55.3
First and second level	6	25.1	23	31.9	43	35.3	72	33.2
Third and fourth level	1	4.2	7	9.8	17	13.9	25	11.5
Total	23	100.0	72	100.0	122	100.0	217	100.0

$X^2 = 4.1$

$P > 0.05$

It is clearly illustrated from table (24) that inspite of insigifican results due to small numbers available of individuals for this study, it is apparent that the third and fourth levels of PEM more in lower social class (13.9%) than in upper social class (4.2%).

Table (25): Relationship between level of protein energy malnutrition according to height for age and different social classes among males aged from six to eighteen years.

	Upper social class		Middle social class		Lower social Class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal	7	70.0	14	66.7	61	50.8	82	54.3
First and Second level	3	30.0	7	33.3	48	40.0	58	38.4
Third and fourth level	0	0	0	0	11	9.2	11	7.3
Total	10	100.0	21	100.0	120	100.0	151	100.0

$\chi^2 = 5.8$

$P > 0.05$

It is clearly showed from table (25) that inspite of insignificant results due to the small numbers available of individuals for this study. It is apparent that the third and fourth levels of PEM more prevalent among lower social class than other groups.

C) Skin-fold thickness:

Triceps skin-fold thickness is the best single indicator of percentage of bodyfat Roche et al.,(1981).

The triceps skin-fold thickness of the studied boy and girls from 1-19 years, sexes separated were compared to 50 th percentile of Tanner and whitehouse (1970). Annex (VII and VIII).

Accordingly the results of the present study were classified as follows:

- Above 50 th value
- 50 th percentile of standard
- below 50th value

Table(27): Relationship between triceps skinfold thickness and social classes among males aged from 1-19 years.

	Upper social class		Middle social class		Lower social Class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Above 50 th Value	7	50.0	20	42.6	58	32.6	85	35.6
50th of standard	4	28.6	17	36.2	70	39.3	91	38.1
Below 50th value	3	21.4	10	21.2	50	28.1	63	26.3
Total	14	100.0	47	100.0	178	100.0	239	100.0

$X^2 = 3.15$

$P > 0.05$

It is observed from this table (27) that the percentage of normal triceps (above 5th standard) are more in up per social class (50%) than in those with lower social class (32.6%). The difference is statistically insignificant ($P > 0.05$).

Table (28): Relationship between triceps skin-fold thickness and social class among females aged from 1-19 years.

	Upper social class		Middle social class		Lower social Class		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Above 50 th value	10	58.8	40	52.6	58	42.0	108	46.8
50th of standard	4	23.5	20	26.3	38	27.5	62	26.8
Below 50th value	3	17.7	16	21.1	42	30.5	61	26.4
Total	17	100.0	76	100.0	138	100.0	231	100.0

$X^2 = 4.1$

$P > 0.05$

It is clearly illustrate from table (28) that the percentage of normal triceps among females are more in upper social class (58.8%) than these of lower social class (42%). The difference is statistically insignificant ($P > 0.05$).

Laboratory investigations:

Three types of laboratory investigations were carried out in the present study namely: blood examination for determination of haemoglobin percent, urine and stool examination for parasites.

Haemoglobin percentage:

The method used for haemoglobin determination in the present study was the Tall qvist method. WHO (1984).

The results of haemoglobin percentage were classified into the following:

1. Negative (Normal for anaemia).

   Men above 85%

   Women above 80%

2. Border-line

   Men From 70 to 85%

   Women from 70 to 80%

3. Frank anaemia

   Men and women below 70%

Table (29): Relationship between upper and middle social classes and type of anaemia according to tallqvist's method among males of the studied sample.

Social class	Upper social class		Middle social class		Total	
Anaemia	Number	Percent	Number	Percent	Number	Percent
Negative (normal)	27	67.5	54	42.5	81	48.5
Border line	8	20.0	42	33.1	50	29.9
Frank anaemia	5	12.5	31	24.4	36	21.6
Total	40	100.0	127	100.0	167	100.0

$$\chi^2 = 7.7$$
$$P < 0.05$$

It is evident from table (29) that percentage of males with Frank and border line anaemia are higher among middle social class than in those with upper social class. The difference is statistically significant($P < 0.05$).

Table (30): Relationship between upper and Lower social classes and type of anaemia according to tallqvist's method among males of the studied population

Social class	Upper social class		Lower social class		Total	
Anaemia	Number	Percent	Number	Percent	Number	Percent
Negative (Normal)	27	67.5	78	24.7	105	29.5
Border line	8	20.0	94	29.8	102	28.7
Frank anaemia	5	12.5	144	45.5	149	41.8
Total	40	100.0	316	100.0	356	100.0

$X^2 = 32.5$

$P < 0.05$

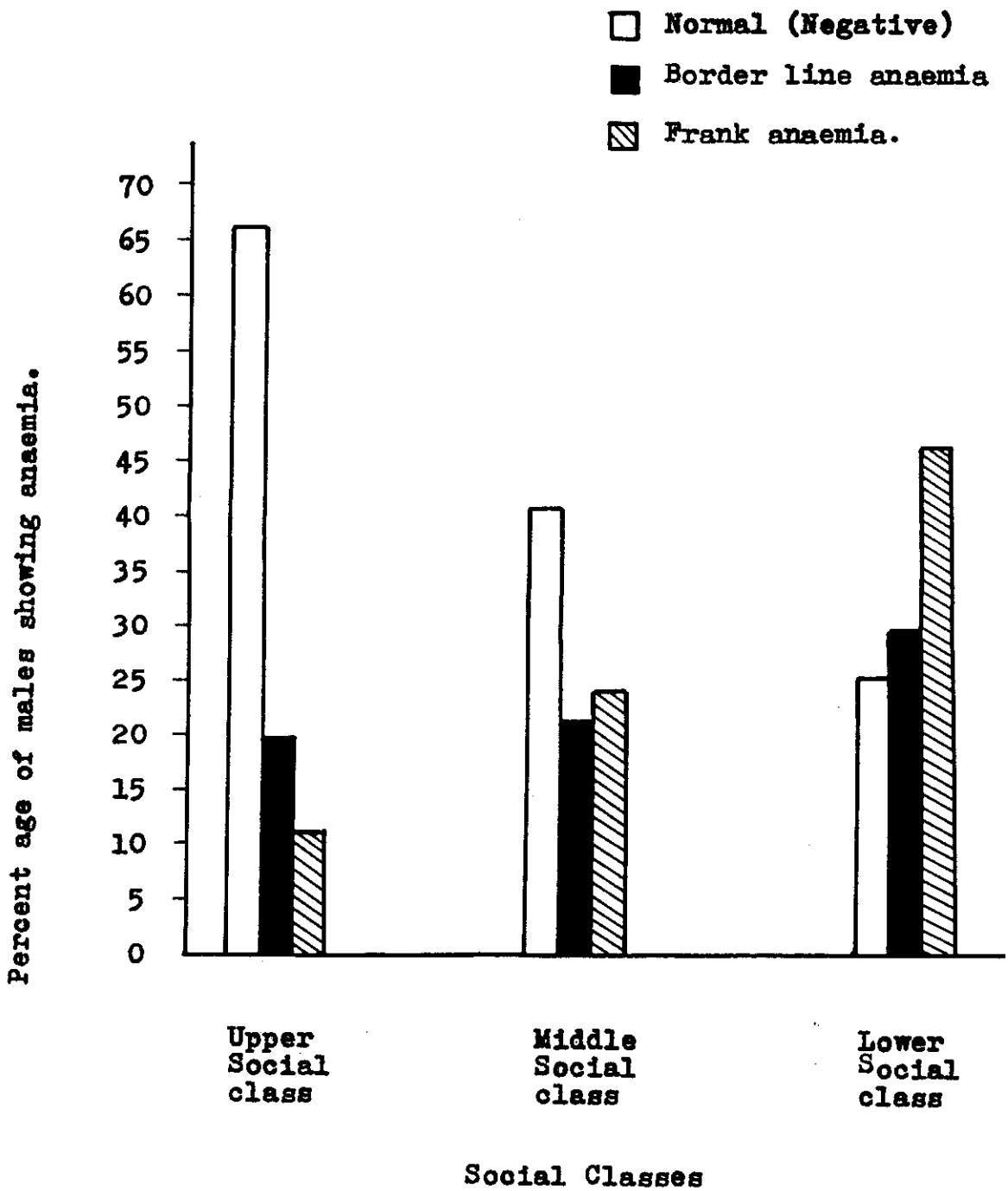
This table (30) shows that the percentage of males with Frank and Border line anaemia are higher among lower social class than in those with upper social class and the difference is statistically significant ($P < 0.05$).

Table (31): Relationship between middle and Lower social classes and type of anaemia according to tall-qvist's method among males of the studied population.

Social class	Middle social class		Lower social class		Total	
Anaemia	Number	Percent	Number	Percent	Number	Percent
Negative (Normal)	54	42.5	78	24.7	132	29.8
Border line	42	33.1	94	29.7	136	30.7
Frank anaemia	31	24.4	144	45.6	175	39.5
Total	127	100.0	316	100.0	443	100.0

$$\chi^2 = 20.3$$
$$P < 0.05$$

It is clear from this table (31) that the percentage of males with Frank and Border line anaemia are higher among lower social class than in those with middle social class and the difference is statistically significant ($P < 0.05$).



Fig(3) Percentage of males with anaemia among different social classes.

Table (32): Relationship between upper and middle social classes and type of anaemia according to tall-quist's method among females of the studied population.

Social class	Upper social class		Middle social class		Total	
Anaemia	Number	Percent	Number	Percent	Number	Percent
Negative (normal)	29	63.1	54	34.4	83	40.9
Border line	10	21.7	46	29.3	56	27.6
Frank anaemia	7	15.2	57	36.3	64	31.5
Total	46	100.0	157	100.0	203	100.0

$$X^2 = 12.9$$
$$P < 0.05$$

It is evident from table (32) that percentag of females with Frank and Border-line anaemia are higher among middle social class than in those with upper social class. The difference is statistically significant ($P < 0.05$).

Table (33): Relationship between upper and lower social classes and type of anaemia according to tall qvist's method among females of the studied population.

Social class	Upper social class		Lower social class		Total	
Anaemia	Number	Percent	Number	Percent	Number	Percent
Negative (Normal)	29	63.1	76	23.2	105	28.1
Border line	10	21.7	110	33.5	120	32.1
Frank anaemia	7	15.2	142	43.3	149	39.8
Total	46	100.0	328	100.0	374	100.0

$X^2 = 45.5$

$P < 0.05$

This table (33) showing that the percentage of females with frank and border-line anaemia are higher among Lower social class than in those with upper social class and the defference is statistically significant ($P < 0.05$).

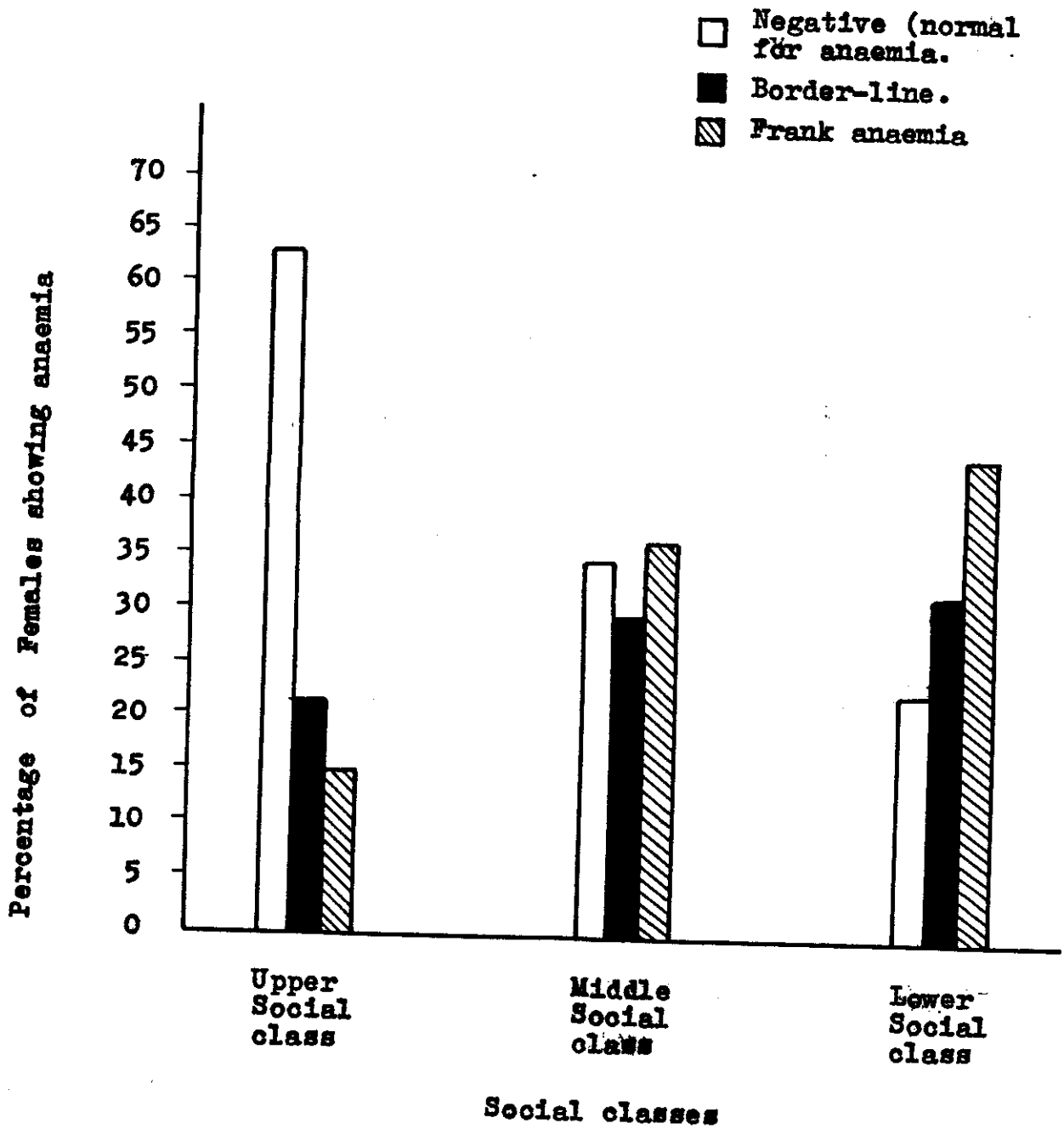


Fig. (4): Percentage of females with anaemia among different social classes.

Table (35): The number and percentage of individuals suffering from bilharzial infection.

Urine analysis	Number of individuals	Percentage
Negative cases	871	85.9
Positive cases	90	8.9
Missed cases	53	5.2
Total	1014	100.0

It is evident from this table(35) that 8.9% of the studied population showing positive ova for bilharziasis in their urine.

Table (36): Prevalence of entero-parasitic infestation in the stool of the sample studied.

Eatero parasitic infestation.	Number of individuals	Percentage
- Negative cases for ova or cyst.	540	53.3
- Positive cases for ova cyst.		
• Ameobiasis	123	12.1
• Bilharziasis	110	10.8
• Ascariasis	96	9.5
• Oxyuris infection	54	5.3
• Giardia infection	11	1.1
• Ancylostoma infection	9	0.9
• Hymenolepsis nana infection	7	0.7
- Missed cases	64	6.3
Total	1014	100.0

It is clear from this table (36) that about 40.4% of cases studied showing positive entero-parasitic ova or cyst in their stool and the most common ava or cyst present are ameoba cyst, Bilharzial, asoaris ova and oxyuris infection.

Table (37): Distribution of the results of urine for bilhariziasis among different social classes.

	Upper social class		Middle social class		Lower social Class		Total	
	No.	%	No.	%	No.	%	No.	%
Positive Bilharzial ova	5	5.8	25	8.8	60	9.3	90	8.9
Negative	76	88.4	245	86.3	548	85.1	869	85.7
Missed cases	5	5.8	14	4.9	36	5.6	55	5.4
Total	86	100.0	284	100.0	644	100.0	1014	100.0

$X^2 = 1.3$

$P > 0.05$

It is evident from this table (37) that the urinary bilharziasis is more frequent among both low and middle social classes than in those with upper social class but the difference is not statistically significant ($P > 0.05$).

Table (38): Distribution of the results of stool analysis for entero-parasitic infestation among different social classes.

	Upper social class		Middle social class		Lower social Class		Total	
	No.	%	No.	%	No.	%	No.	%
Positive enteropa-rasitic infection.	20	23.3	110	38.8	280	43.5	410	40.4
Negative	60	69.8	156	54.9	324	50.3	540	53.3
Missed cases	6	6.9	18	6.3	40	6.2	64	6.3
Total	86	100.0	284	100.0	644	100.0	1014	100.0

$X^2 = 13.6$

$P < 0.05$

The table(38) shows that the entero-parasitic infestations are more frequent among both Low and middle social classes than in those with upper social class and the difference is statistically significant ($P < 0.05$).

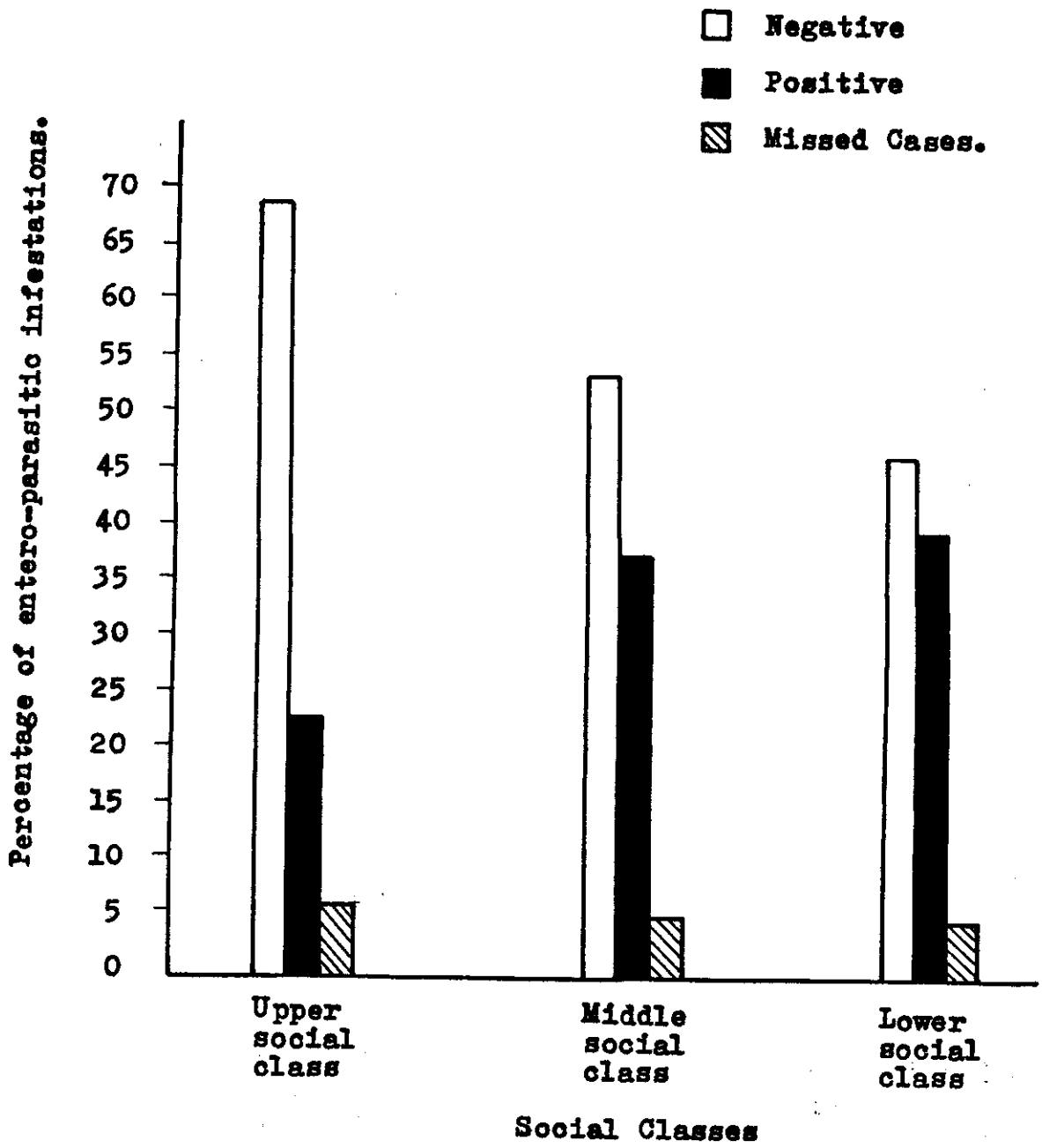


Fig (5): Percentage distribution of entero-parasitic infestations among different social classes.