OUR BABIES DYING?

Top: The shadows lengthen over the Aboriginal cemetery at Collarenebri. Why are there so many small graves there?
Above: A child’s grave at the cemetery. It is said that the direction and position of the graves and the type of ornaments on them give an indication of the place that person had in the tribe.

4. Other illnesses follow

The running-nose/cold type of infection leads to ear inflammation, pneumonia, vomiting and diarrhoea. At this stage, there are marked changes in the lining of the stomach and intestines. Then follow secondary bacterial invasions of the ears and lungs and sometimes true infectious gastro-enteritis.

5. Next, the child can’t take the goodness out of his food

The above stage causes the body to use more Vitamin C. It also causes a decreased intestinal absorption leading to an acute food deficiency. So, even if the child’s diet is good, he doesn’t digest his food properly. He begins to lose weight. Many doctors, on seeing an underweight Aboriginal child, at once blame the mother. Certainly the mothers need training in child care, thinks Dr Kalokerinos, but this should be coupled with research into the question of how to improve the natural immunity of the Aboriginal children.

**DR KALOKERINOS’ TREATMENT OF ABORIGINAL BABIES SHOWING THE ABOVE SYMPTOMS**

A. Anti-biotics given by injection, not by mouth, because otherwise the child will have further gastro-intestinal irritation.

B. Injections of Vitamin C together with special feedings if necessary.

Dr Kalokerinos has had dramatic improvement within an hour or less after injecting a child who needs Vitamin C.

When the child is about 1 year old, he will almost certainly have worms which require treatment.

Between the ages of six weeks and about three years lies the danger period for Aboriginal children. During this time, thinks Dr Kalokerinos, they need periodic shots of Vitamin C. Also, the timing of their necessary immunization shots against diphtheria, tetanus and whooping cough must be carefully watched.

**The treatment pays off**

Dr Kalokerinos says he has found little acceptance of his theory and it has not been researched. Yet he claims that during the 33 years since this programme of treatment was started at Collarenebri, only three infants have died.

Applied to white children, the treatment has also proved valuable. Dr Kalokerinos can think of at least six white babies in the past 33 years who owe their lives to this knowledge got from Aboriginal infants. Had it not been for the frequency of the condition in Aboriginal children, the similar condition in white children would have passed unnoticed.

**The waste of lives**

Dr Kalokerinos stressed that he believes the first and major problem is the lack of immunity inherited by Aboriginal children. He claims success for his treatment and urges that it be researched further because there are Aboriginal babies all over Australia dying each day. Further, many of those who do survive infancy are left permanently mentally retarded because of their illnesses.