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Vomiting and Diarrhea

VOMITING

The most common cause of vomiting in children is gastroenteritis, usually due to a viral infection of the gastrointestinal tract. Frequently, this is referred to as the “stomach flu.” Usually these infections are short lived and are more disruptive than dangerous to your child. However, if your child is unable to take in adequate fluids, and their condition is compounded by diarrhea, they could become dehydrated. Dehydration can be very serious, leading to organ failure, brain damage, and death. The following are guidelines to help prevent dehydration:

For infants under 12 months

- If your infant is under 1 month of age and vomiting, call your physician immediately
- Avoid giving plain water unless specifically under the direction of a physician
- Offer small but frequent amounts (2-3 tsp, or up to ½ an ounce) of oral electrolyte solution (such as Pedialyte®) every 15 to 20 minutes with a spoon or oral syringe
- Frozen oral electrolyte solution pops are often appealing to children over 6 months and also encourages the slow intake of fluids that is required
- Gradually increase the amount of solution if your child has been able to tolerate the small frequent amounts for a couple of hours without vomiting.
- Do not give your child more solution at a time than they would normally drink – this could cause further irritation and lead to more vomiting
- If your infant does not vomit for at least 8 hours, you can reintroduce formula slowly (if your infant is formula fed). Start with small, more frequent feedings and work up to their normal feeding routine as tolerated. (1/2 to 1 ounce in children under 6 months; 1 to 2 ounces in those 6 to 12 months)
- If your infant already eats baby cereal, it is ok to start with solid feedings in small amounts. For the older infant, you can begin with small amounts of soft, bland foods that your infant is already familiar with, such as bananas, cereals, and crackers.
- If your infant does not vomit for 24 hours, you can resume your normal feeding routine.

For children 1 year or older

- Avoid milk and milk products
- Give clear liquids such as ice chips, sips of water, oral electrolyte solutions (Pedialyte®, Gatorade®), or frozen electrolyte solution pops in small amounts every 15 minutes
- If your child vomits, start with a smaller amount
- After 8 hours, if liquids are tolerated, gradually introduce bland, mild foods. Do not force your child to eat. Saltine crackers, toast, broth, mild soups, mashed potatoes, rice, and breads are all appropriate.

- After 24 hours of no vomiting, your child can resume their regular diet, although it is advised to wait 2 or 3 days before resuming milk products.

It is important to contact your child's physician if they present with signs and symptoms of dehydration. You may be referred to the emergency room in order for your child to be rehydrated intravenously. The signs and symptoms of dehydration are as follows:

- Dry, sticky mouth
- Few or no tears when crying
- Dry, wrinkled, or doughy skin
- No urination for more than 6 hours in an infant; 8 hours for children
- Small amount of very dark urine
- Soft spot on infants head looks sunken
- Appears weak or limp
- Eyes appear sunken
- Excessive sleepiness or disorientation
- Rapid breathing
- Fast or weakened pulse
- Fatigue or dizziness in an older child

DIARRHEA

Most kids will suffer from episodes of diarrhea several times throughout childhood. Again, this is usually more of a disruption than a danger to your child, but it is still important to know what to do to relieve and prevent diarrhea. Causes of diarrhea are usually GI infections related to viruses, bacteria, or parasites, although it may indicate food allergies, lactose intolerance, or diseases of the gastrointestinal tract, such as celiac disease and inflammatory bowel disease. The most common cause of diarrhea is viral gastroenteritis. Although the symptoms usually last just a few days, affected kids who are unable to get adequate fluid intake can become dehydrated.

In general, diarrheal infections are contagious. They can be spread through dirty hands, contaminated food or water, some pets, and direct contact with fecal matter (such as dirty diapers or the toilet). Anything that comes in contact with the infectious germs can become contaminated. Kids can become infected by touching contaminated objects and then putting their fingers in their mouth.

Typically, diarrhea starts with crampy abdominal pain followed by diarrhea that lasts no more than a few days. Other symptoms include fever, loss of appetite, nausea, vomiting, weight loss, and dehydration. In viral gastroenteritis, it is common to develop a fever and vomiting, followed by diarrhea.

The following are measures you can take to reduce the likelihood of your child contracting an infection that causes diarrhea:

- Ensure your child is washing their hands frequently, especially after using the toilet and before eating
- Keep restroom areas clean
- Wash fruits and vegetables before eating
- Wash kitchen counters and cooking utensils thoroughly, especially after contact with raw meat
- Refrigerate meat as soon as you return from the grocery store, and cook thoroughly

- Never drink from any source not approved by local health authorities as safe drinking water
- Avoid washing pets or pet items in the same area used for food preparation for the family
- Refrain from allowing reptile pets in the areas where the family eats and prepares meals

Treatment

When treating diarrhea, the greatest concern is the replacement of fluids and electrolytes in the body. If your child has mild diarrhea, they can continue to eat and drink as they normally would, including breast milk and formula for the infant, and milk for those already drinking cow's milk.

If their condition does not improve within 2 to 3 days, you may be advised to switch to soy based formula or soy milk until the diarrhea resolves. To aid in keeping your child hydrated, offer a bottle or cup of oral rehydrating solution after each episode of diarrhea. Avoid acidic and spicy foods as they may further irritate the gastrointestinal system. Feeding your child the "BRAT diet" (bananas, rice, applesauce, and toast) may help to calm the diarrhea. This would also include rice cereal, apples (not apple juice), bread, and crackers. Avoid foods and beverages high in sugar as they may make the diarrhea worse.

Yogurt with active cultures (such as YoBaby®) may also help to reduce diarrhea by introducing "good bacteria" back into the gastrointestinal system. If your child does not like yogurt or is lactose intolerant, you can purchase acidophilus capsules in the refrigerator section of the health food aisle in the grocery store, and add the contents of the capsule to other food items, such as applesauce.

Although over-the-counter anti-diarrhea medications are available, do not utilize them unless instructed by your child's physician. Giving these medications could potentially worsen your child's condition.

Contact your doctor when

- Child is younger than 6 months and has diarrhea
- Severe or prolonged episode of diarrhea (no improvement in 5 to 7 days)
- Fever of 102°F or higher
- Repeated vomiting, or refusal to drink fluids
- Severe abdominal pain
- Diarrhea that contains blood or mucus
- Signs and symptoms of dehydration (listed vomiting section)

Sources:

"Infectious Diarrhea" accessed from www.kidshealth.org on 3/31/2008

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