

Patient Information : Gastroenteritis



Cork Emergency Medicine
CUH Paediatric Department
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What is gastroenteritis?

Gastroenteritis is an infection in the gut, which leads to diarrhoea and/or vomiting (sickness). Diarrhoea is frequent watery poo. The infection may also give your child a temperature and tummy pain. It is usually caused by a virus, which the body clears on its own without treatment. The diarrhoea and vomiting may lead to dehydration (too much water lost from the body).

What do I do?

Your doctor has carefully looked for signs of dehydration and has not found any. They are therefore happy for you to take your child home. You must encourage your child to drink.

What is enough fluid?

- Your child's weight today is
- He/She needs to take in at least ml over a 24 hour period.
- A teaspoon is 5 mls. 1oz is 30 mls. A typical beaker holds 200 mls.

What kind of drinks should I give?

You can give any drink that your child usually has including milk. However try not to give very concentrated or sugary drinks like real fruit juices or fizzy drinks unless they are well diluted with water (4 times as much water as drink).

What if my child is vomiting?

- Stop all solid food until the vomiting has settled
- If your baby is breast fed continue to feed on demand
- If your baby is formula fed, give feeds in very small amounts (approximately 1oz (30mls) often (every 20 minutes or so). If they continue to vomit, stop milk feeds for 4 hours and give cooled boiled water instead, little and often.
- Any other fluids that your baby or child has should be given as above (about 1 oz (30ml) every 20 minutes) by bottle, spoon or cup. Do not offer a full bottle or cup as large amounts may make your child vomit again.
- As the vomiting settles can start to offer large amounts of fluid less often and the child's usual solid food.
- Try rice, pasta, potatoes, toast, and plain biscuits. Don't worry if they are not hungry
- AVOID fatty foods and sugary food

What about the diarrhoea?

Diarrhoea usually continues for 6-7 days. As long as your child is drinking and is improving in themselves this does not matter.

What about the temperature?

If you are concerned, please contact the Emergency Department you first attended:	Mercy University Hospital (021) 4271971	SIVH (021) 4926177	CUH (021) 4920200	Mallow General Hospital (022) 21251	Bantry General Hospital (027) 52900
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If your child has a temperature or appears to have tummy pains then give Paracetamol according to the instructions on the bottle.

What is Dioralyte / Diocaim junior/ Electrolade?

- These are all names for salt and sugar solutions that are made up with water, to replace what is being lost. You will only be given these by your doctor if your child is dehydrated or at risk of becoming dehydrated.
- When a child is not dehydrated they may be used to supplement the child's normal fluid.
- Try to give _____ mls each time your child has a very loose poo, or large vomit. Give small amounts often. If your child does not like the taste try adding a drop of juice or sugar-free squash.

When should I ask for help or advice?

Seek advice if:

- The diarrhoea has blood in it
- Your child becomes more sleepy, lethargic or irritable than usual
- Your child has 5 or more vomits in 24 hours
- Your child has 9 or more loose poos in 24 hours
- The diarrhoea continues for more than 7 days

You could call your Health Visitor or General Practitioner

When can my child return to school or nursery?

When the diarrhoea has settled to 2 or 3 formed poos a day they are safe to return.

What about my baby's sore bottom?

Frequent diarrhoea can make your baby's bottom sore.

- Try to change the nappy as soon as it is dirty.
- Clean carefully with cotton wool and water or baby
- Apply barrier cream or Vaseline liberally.

How can I stop it happening again?

- Gastroenteritis is an infection that can be passed on from person to person
- Always wash hands before preparing any foods or eating and after nappy changes or going to the toilet.
- It is very important to wash and sterilize all baby bottles and teats etc.

Content by Dr Ahmed Khan (CUH Paediatric Department) 13/12/2005. Review date 13/12/2006.

