
VOMITING AND DIARRHEA

Helping your child through sickness

What causes vomiting and diarrhea?

Vomiting (throwing up) and *diarrhea* (frequent, watery bowel movements) can be caused by viruses, bacteria, parasites, foods that are hard to digest (such as too many sweets) and other things. Vomiting one or two times, or a few loose bowel movements do not usually cause any problems and do not need treatment.

Why are vomiting and diarrhea so dangerous in children?

Vomiting and diarrhea can be harmful to your child because they can cause dehydration. Dehydration occurs when too much fluid is lost from the body. Signs of dehydration are listed below. In bad cases, dehydration can cause death.

Young babies can become dehydrated very quickly. But if the vomiting and diarrhea are both really bad, dehydration can occur very quickly in a child of any age.

How can I prevent dehydration?

If your child has had several bouts of vomiting or diarrhea, he or she will need to drink fluids to replace those lost with vomiting and diarrhea. To start, you can get an older child to take fluids such as water, popsicles, regular (not diet) non-cola pop, juices and clear broths. You can also give your child special drinks, called *oral rehydration solutions* (ORS), that

contain the right mix of salt, sugar, potassium and other elements to help replace lost body fluids. This may be especially good for infants or older children whose vomiting is worse.

Which ORS should I use?

There are many brands of ORS, such as Pedialyte and Gastrolyte. Some come as powders that you mix with water (Gastrolyte) and others come as liquids that are already mixed for you (Pedialyte). Some also come as special Popsicles.

Powders are easier to store, cheaper and last longer than liquids. But you must mix powders exactly like they're supposed to be mixed. If you don't, you'll change the balance of the parts, which can cause problems. Because liquids are premixed, these problems are avoided.

Sports drinks may be good for athletes but may not have the right mix of salts and water for children.

Signs of dehydration

- Not eating
- Weight loss
- Not urinating (“peeing”) as often as usual
- Urine that is darker than usual
- Dry mouth
- Thirst (babies may show thirst by crying and being cranky and eager to drink when something is offered)
- Sunken eyes
- No tears when crying
- Sunken or soft spot in babies younger than 18 months
- Skin that isn't as springy as usual

Do home remedies work?

When your child first gets ill, home remedies, such as apple juice, chicken broth, popsicles, ginger ale or tea may help. However, these drinks don't contain the right balance of sugar, salt and other things. They aren't usually recommended to use for very long or if you're concerned about dehydration.

Soft drinks that have caffeine in them shouldn't be given because caffeine is a *diuretic* and increases the amount of water and salt that are lost. Even plain water can cause problems, such as lowering the amount of salt in the blood (*hyponatremia*) or the amount of sugar in the blood (*hypoglycemia*).

Talk to your family doctor about whether it's safe to use home remedies for your older child.

How should I give fluids?

This depends on if your child is vomiting or has diarrhea or both.

If your child has diarrhea and isn't vomiting give fluids or ORS freely. Don't limit how much he or she drinks. You can use a dropper, a spoon or a medicine cup to keep track of how much your child is drinking. Your doctor will probably tell you the minimum amount your child should drink.

If your child is vomiting (with or without diarrhea), try giving small amounts of ORS often, such as one teaspoonful every minute. Slowly increase how much you give when your child is able to keep the drink down.

If your child keeps vomiting, wait for 30 to 60 minutes after the last time he or she vomited and then give a few sips of ORS from a spoon or a few drops from a dropper. Small amounts every few minutes may stay down better than a large amount all at once.

When your child stops vomiting, you may increase how much ORS you give each time and lengthen the time between when you give ORS to once every three to four hours.

Keep giving ORS until your child stops vomiting

and is ready to try solid foods or as advised by your family doctor.

Should I feed my child during sickness?

If your child is not vomiting, yes. Even though eating may cause the amount of diarrhea to increase, your child will be able to get some nutrients from the food. This may prevent your child from losing too much weight and help your child get better quicker.

Breast-fed babies. If you are breast-feeding, keep breast-feeding while you're giving ORS.

Formula-fed babies. If you've been giving your baby formula, some doctors suggest switching from formula to ORS for up to 12 to 24 hours and then switching back to giving formula.

If your baby has had diarrhea, you might want to use a formula that doesn't contain lactose for a few weeks. *Lactose* is the sugar in milk. Lactose can bother some babies after a bout of diarrhea, even if they haven't been bothered by it before.

Using the formula you usually use is fine if your baby isn't bothered by the lactose. You can also use formula that contains lactose and cut it in half with water. Talk to your doctor about the best approach.

Children on food. Children should begin eating within about 12 to 24 hours after starting to take ORS. Foods that should be avoided include those with a lot of sugar and fat, such as ice cream, gelatin, pudding and fried foods.

The diarrhea often goes on for a few days. The first foods to start on are starchy foods such as rice, cereals (with no sugar added), bread, toast and crackers with butter or margarine. Your child can also continue to drink milk. Gradually, add fruits and vegetables within a day or two and then protein foods such as meat, fish, eggs, peanut butter, yogurt and cheese. Most children can return to normal eating habits within three days. Avoid large amounts of

juices, fruit drinks and pop which can make diarrhea worse. Do not give your child boiled skim milk.

Should I give my child medicine to stop the diarrhea and vomiting?

This usually isn't needed. Diarrhea doesn't usually last very long. If it's caused by an infection, diarrhea is just a sign that the body is trying to get rid of the infection. Giving medicines that stop diarrhea may interfere with the body's efforts to get rid of the infection. Talk to your family doctor if you think your child needs medicine.

Drugs to stop vomiting, such as Gravol, can make children very sleepy and are usually not needed. It's even harder to get a sleepy child to take fluids and the fluids are the most important treatment.

Will my child need antibiotics?

Probably not. Most of the time, vomiting and diarrhea are caused by viruses. Antibiotics don't fight viruses. But your child might need some antibiotics or other medicines if the vomiting and diarrhea are caused by something other than a virus.

Will my child need to go to the hospital?

This depends on how dehydrated your child is. If the dehydration is severe, your child may need to be given fluids intravenously (through an IV). This is the quickest way to replace fluids lost through vomiting or diarrhea. See your doctor if you notice any of the signs above.

Can I help prevent vomiting and diarrhea in my children?

Many infections that cause diarrhea are caught when

Call your doctor if your child is vomiting or has diarrhead and

months old and has a fever over 38.5° C (rectally) [101.4°].

- Has signs of dehydration (see box inside).
- Has been vomiting longer than eight hours or is vomiting with great force.
- Has stools that are bloody or slimy.
- Has blood in the vomit.
- Is bloated.
- Hasn't passed urine in eight hours.
- Could have swallowed something that could be a poison.
- Is listless or unusually sleepy.
- Has had abdominal pain for over two hours.
- Severe diarrhea, more than 8 bowel movements in 8 hours.

a child somehow comes into contact with feces, such as from dirty diapers. This is common in day-care and school settings.

You can help prevent the passage of infection at home by putting used diapers in a closed trash can or diaper pail, and by washing your hands very well after changing a diaper or going to the bathroom and also before you cook food or feed your children.



This brochure provides a general overview on this topic and may not apply to everyone. To find out if this brochure applies to you and to get more information on this subject, talk to your family doctor.

This health education material has been favorably reviewed by the Patient Education Review Committee of the College of Family Physicians of Canada.



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The College of Family Physicians of Canada, one of the nation's largest medical specialty groups, is committed to promoting and maintaining high standards for family doctors – the doctors who give ongoing, comprehensive care to people of all ages.

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