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PATIENT EDUCATION HANDOUTS

Diarrhea: Toddler

What is diarrhea?

Diarrhea is the sudden increase in the frequency and looseness of bowel movements (BMs). Mild diarrhea is the passage of a few loose or mushy BMs. Severe diarrhea is the passage of many watery BMs. The best indicator of the severity of the diarrhea is its frequency.

The main complication of diarrhea is dehydration from the loss of too much body fluid. Symptoms of dehydration are a dry mouth, the absence of tears, infrequent urination (for example, none in 12 hours), and a darker, concentrated urine. The main goal of diarrhea treatment is to prevent dehydration.

What is the cause?

Diarrhea is usually caused by a viral infection of the lining of the intestines (gastroenteritis). Sometimes it is caused by bacteria or parasites. Occasionally a food allergy or drinking too much fruit juice may cause diarrhea. If your child has just one or two loose bowel movements, the cause is probably something unusual your child ate. A diet of nothing but clear fluids (such as Pedialyte) for more than 2 days may cause green, watery bowel movements (called "starvation stools").

How long will it last?

Diarrhea from a viral infection usually lasts several days to 2 weeks, regardless of the type of treatment. The main goal of treatment is to prevent dehydration. Your child needs to drink enough fluids to replace the fluids lost in the diarrhea. Don't expect a quick return to solid bowel movements.

What should I feed my child?

Increased fluids and dietary changes are the main treatment for diarrhea.

Note: One loose bowel movement can mean nothing. Don't start dietary changes until your child has had several loose bowel movements.

Frequent, watery diarrhea

- Fluids Encourage your child to drink lots of fluids to prevent dehydration. Give your child water as the main fluid for the first 24 hours of watery diarrhea. A child who is taking table foods doesn't need to get calories from milk. Most toddlers don't need oral glucose-electrolyte solutions such as Pedialyte unless the child is dehydrated. On day 2, offer some milk as well as water. Avoid fruit juices, because they all make diarrhea worse. If your child refuses solids,

give your child milk (or formula) rather than water.

- **Table foods** Keep giving your child table foods while he has diarrhea. The choice of food is important. Starchy foods are digested best. Examples of such foods are dried cereals, grains, bread, crackers, rice, noodles, and mashed potatoes. Pretzels or saltine crackers can help meet your child's need for sodium. On the second day of the diarrhea, soft-boiled eggs and yogurt are easily digested and provide some protein.

Mild diarrhea (loose BMs)

Follow a regular diet with a few simple changes:

- Eat more foods containing starch. Starchy foods are easily digested during diarrhea. Examples are cereal, breads, crackers, rice, mashed potatoes, and noodles.
- Drink more water. Avoid all fruit juices and carbonated drinks.
- Milk and milk products are fine.
- Avoid beans or any other foods that cause loose bowel movements.

How can I take care of my child?

There is no effective, safe drug for diarrhea. Extra fluids and diet therapy work best.

- **Common mistakes** KOOL-Aid, soda pop, or water should not be used as the only food because they contain little or no salt. Use only the fluids suggested here. Fruit juices (especially apple and grape) should be avoided because they are too concentrated and make the diarrhea worse. Clear fluids alone should be used for only 4 to 6 hours because the body needs more calories than clear fluids can provide. The most dangerous myth is that the intestine should be "put to rest." Restricting fluids can cause dehydration.
- **Prevention** Diarrhea can be very contagious. Always wash your hands after changing diapers or using the toilet. This is crucial for keeping everyone in the family from getting diarrhea.
- **Diaper rash from diarrhea** The skin near your child's anus can become irritated by the diarrhea. Wash the area near the anus after each bowel movement and then protect it with a thick layer of petroleum jelly or other ointment. This protection is especially needed during the night and during naps. Changing the diaper quickly after bowel movements also helps.
- **Overflow diarrhea in a child not toilet-trained** For children in diapers, diarrhea can be a mess. Place a cotton washcloth inside the diaper to trap some of the more watery BM. Use disposable superabsorbent diapers to cut down on cleanup time. Use the diapers with snug leg bands or cover the diapers with a pair of plastic pants. Wash your child under running water in the bathtub.
- **Vomiting with diarrhea** If your child has vomited more than twice, follow your doctor's recommended treatment for vomiting instead of this treatment for diarrhea until your child has gone 8 hours without vomiting.

When should I call my child's healthcare provider?

Call IMMEDIATELY if:

- There are signs of dehydration (no urine in more than 12 hours, very dry mouth, no tears).
- Any blood appears in the diarrhea.
- The diarrhea is severe (more than 8 BMs in the last 8 hours).
- The diarrhea is watery AND your child also vomits repeatedly.

- Your child starts acting very sick.

Call during office hours if:

- Mucus or pus appears in the BMs.
- A fever lasts more than 3 days.
- Mild diarrhea lasts more than 2 weeks.
- You have other concerns or questions.

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This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.

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