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PATIENT EDUCATION HANDOUTS

Acute Gastroenteritis

What is gastroenteritis?

Gastroenteritis is an infection of the bowel (intestines) that causes diarrhea and sometimes vomiting. It is common in infants and children. It is more serious in infants and young children than it is in adults. Diarrhea and vomiting can cause the loss of important fluids and minerals the body needs (dehydration). Infants and children lose fluids and minerals quicker than adults. Since water makes up most of an infant's or child's weight this can lead to serious illness and require hospitalization.

What causes gastroenteritis?

Gastroenteritis is more common in the winter and early spring. Most gastroenteritis is caused by a virus or one of several kinds of bacteria that get into the intestinal tract (bowels). Bacteria or viruses get to the intestinal tract by putting dirty hands, toys or other objects near or into the mouth. It is not possible to keep a child from being exposed to the germs that cause gastroenteritis. Proper hand washing by the whole family is the best way to prevent the spread of disease. When a family member is sick, extra care should be taken to wash hands often. Hands should be washed briskly with soap and water for at least 10-15 seconds then dried on a clean towel.

What are the symptoms of gastroenteritis?

The most common symptoms are:

- Diarrhea (frequent, loose, watery stools) lasting 2-3 days but usually not more than a week
- Nausea and vomiting lasting 1-2 days
- Abdominal/stomach pain
- Possibly, fever

What can I do for the infant or child with gastroenteritis?

Usually, diarrhea and vomiting last only a short time. Therefore, you can safely care for your child at home. The child's diet may not need to change if the diarrhea is mild. If your infant is breastfeeding, continue to feed on demand. If your infant is bottle-fed, continue feeding as usual with full strength formula. Older children can continue their normal diet but should avoid foods that may make diarrhea worse, such as foods high in fat or sugar. The BRAT diet alone is no longer recommended because it does not provide enough nutrition for a child. Research has shown that this combination of foods given alone does not reduce diarrhea. The BRAT diet may be used for a short period while the child is recovering from recent episodes of emesis.

If diarrhea continues or becomes worse, offer your infant or child oral rehydration solutions (ORS) such as Naturalyte, Pedialyte, Rehydralyte, Infalyte, or a generic brand. ORS are available in a variety of flavors, and freezer pops and can be found at supermarkets, pharmacies, and discount stores. The child with mild diarrhea and no signs of dehydration may not like the taste of ORS. If this is the case, ORS can be flavored using low sugar additives such as sugar-free Kool-Aide. However, not all clear liquids are good to give the child with diarrhea, vomiting or signs of dehydration. Avoid giving only clear liquids such as tap water or weak tea. They don't replace necessary minerals lost from diarrhea or vomiting. Also avoid giving apple juice, carbonated drinks, Jell-O water, chicken broth or sports drinks. They contain sugars or fat that may make diarrhea worse or lack important minerals necessary for the infant or child who is dehydrated.

Foods good to offer your child are:

- Cereals, bread, potatoes, lean meats
- Plain yogurt, bananas, fresh apples
- Vegetables

(Foods may be better tolerated in smaller more frequent feedings.)

Children may need twice as much fluid as usual when they are vomiting or have diarrhea. To get more fluid in the child, continue regular feedings while giving them an oral rehydration solution (ORS) frequently between meals.

How can I treat diaper rash caused by diarrhea?

- Generally avoid diaper wipes
- Cleanse the diaper area gently and thoroughly with soap & water; pat dry apply zinc-based ointment thickly after cleansing bottom gently and thoroughly. This keeps the diarrhea stool away from your child's skin. Baking soda sitz baths may comfort your child.
- Wash hands well after each diaper change
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What if the problem continues?

Even with the best efforts to give fluids, the infant or child may become dehydrated (less fluid staying in the body than is going out of the body).

Call your doctor if:

- You are unable to get fluids into the child and diarrhea lasts longer than 24 hours
- You are able to get fluids into the child but diarrhea lasts more than 7-10 days
- Your child shows any of the following signs
 - less or no urine out in 8-12 hours
 - inside of mouth is dry
 - no tears when crying
 - eyes appear sunken
 - unusually drowsy or fussy
 - extreme thirst

Your doctor may ask to see your child or have your child seen in the emergency department. Your child will be examined and watched for signs of dehydration. The nurse or assistant will measure how much fluid goes in and comes out of your child. Your child will be weighed. You may be asked to help by giving the oral rehydration solutions (ORS) in measured amounts at scheduled times. This replaces the fluid lost from diarrhea and vomiting. This allows you to be active in your child's care and may keep your child from needing an I.V. If diarrhea and vomiting continue and the child refuses fluids by mouth, he or she may need an I.V. An I.V. will let special fluids go into the child through a small vein until the child can take liquids by mouth. Other procedures may need to be done. If you have questions about what is being done, ask the staff. ***Remember to comfort your child when he or she is sick.***

Adapted from: Children's Hospital Medical Center, Cincinnati, Ohio
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