

Diarrhea

Diarrhea is a frequent occurrence during childhood. In fact, it is second only to the common cold in the number of phone calls and visits to a Pediatrician's office. Diarrhea is often accompanied by other symptoms including stomach cramps, diaper rash in younger children/infants, and decreased appetite. Although there are a number of potential causes of diarrhea, viral infection is the cause in the majority of cases of acute diarrhea. In most cases, diarrhea is preceded by vomiting and/or nausea with fever and usually resolves within less than 2 weeks. Cases of diarrhea lasting more than 2 weeks should be addressed by your physician, especially if associated with weight loss, abdominal pain or other similar complaints.

Before treating diarrhea, a parent should focus on addressing vomiting and/or fever that might be present. The following is a typical approach to the child/infant with diarrhea +/- vomiting.

- 1) **If vomiting, rest the stomach for 1-2 hours before giving anything by mouth.**
- 2) **Start with Pedialyte, Ricalyte or similar fluid in small but frequent amounts. (Start with 1-2 teaspoons every 10-20 minutes and advance the volume as tolerated.)**
- 3) **When your child has had no vomiting for 8-12 hours, you may start solid foods. Often the BRAT diet is suggested in a child with diarrhea (Bananas, Rice, Applesauce and Toast) along with other starchy and/or bland foods. Many sources suggest that if the child is doing well and has no worsening of his/her diarrhea, resuming their normal diet sooner may also cause their diarrhea to resolve more quickly. Try to avoid fruit or vegetable juices until your child's stools have returned to "normal". At this time, Pedialyte may be stopped as the sweeteners in Pedialyte may prolong watery stools.**
- 4) **Sometimes, giving your child soy formula (or soy milk) instead of regular formula or milk until the diarrhea resolves can decrease the amount of watery stools.**
- 5) **DO NOT give anti-diarrhea medications (such as Immodium), antibiotics or other prescription medications to your child unless told to do so by your child's physician.**

Symptoms/signs that would warrant contacting your child's pediatrician would include:

- 1) **Vomiting (not just nausea) for more than 4 hours, despite stomach rest.**
- 2) **Any evidence of dehydration, including dry lips/mouth, less than 3 episodes of urine output in 24 hours, no tears, or a sunken soft spot in infants.**
- 3) **Lethargy or difficulty in arousing your child/infant.**
- 4) **Blood, mucus or both in stools.**
- 5) **Severe and/or localizing abdominal pain.**
- 6) **Diarrhea lasting more than 1-2 weeks. (Remember, Pedialyte is for use in the first 1-2 days of illness with vomiting/cramping, not for prolonged use with diarrhea.)**

If you contact your doctor's office, be prepared to answer some or all of the following questions with regards to your child's diarrhea:

- 1) **How long has the diarrhea been present?**
- 2) **How often is your child having a diarrhea stool?**
- 3) **What is the consistency of your child's stools (e.g. watery, pasty, etc...)**
- 4) **Is the diarrhea associated with eating or does it occur even when not eating?**
- 5) **Does the stool have any blood and/or mucus in it?**
- 6) **Does your child have a fever and, if so, how high?**
- 7) **Does your child have any symptoms associated with stooling problems?**
- 8) **Has your child had any recent travel or animal exposures?**
- 9) **Has your child had any ill contacts at home, Day Care or school?**
- 10) **Is your child taking, or recently finished taking any antibiotics or other medications?**
- 11) **How often and how much urine output has your child had in the last 24 hours?**
- 12) **What, if anything, has your child been able to eat or drink in the last 24 hours?**

The answers to the above questions should help your child's pediatrician decide an appropriate course of action with regards to diagnosis and treatment of your child's diarrhea. We may want to schedule an appointment and/or collect a sample of your child's diarrhea for studies if needed. In some cases of severe diarrhea or dehydration, you may be directed to an Emergency Department for further evaluation and treatment.