

Gastroenteritis in children

What is gastroenteritis?

Gastroenteritis (often called 'gastro') is a common infection of the bowel that can cause diarrhoea (runny faeces or poo), vomiting, or both. Gastroenteritis normally settles quickly without treatment. Vomiting may last a day or two. Diarrhoea usually lasts two to three days but can last up to 10 days.

Gastroenteritis can cause dehydration (a loss of water). Babies under six months of age are most at risk.

The most common cause of gastro is a virus, which tends to spread very easily. Less common causes of gastro include bacteria or food poisoning. Most causes of gastro are not helped by antibiotics.

What are the symptoms?

Gastroenteritis often starts with vomiting and then diarrhoea follows. The motions are frequent, loose, and watery. Your child may cry through hunger, thirst, fever or pain. They may want to sleep more. Older children may complain of a cramping tummy pain, while infants may have episodes of crying associated with cramping.

Treatment

Gastroenteritis can be mild and treatment is all about fluids. Most children recover with simple treatment at home.

- Offer your child small amounts (a few sips at a time) of 'clear fluids' (see below) such as water often (a mouthful every 10-15 minutes). The fluids will not stop the vomiting and diarrhoea but will stop your child becoming dehydrated. It is important to give fluids, even if the diarrhoea gets worse.
- Make sure your child has plenty of rest
- Do not give your child medication to stop the vomiting or diarrhoea. These will not work and may be harmful.
- If the child continues to vomit, still continue to offer small sips of fluid. It may seem it is vomited straight back up, but some is retained and helps prevent dehydration.

What are 'clear fluids'?

- The best clear fluids are solutions such as Gastrolyte®, Pedialyte® or Repalyte®, which replace the water, sugar and body salts lost to vomiting and diarrhoea. Hydralyte® icy poles are an alternative. You can buy these at the chemist or supermarket. Follow instructions on the packet.

- Watered down unsweetened fruit juice (one cup of juice to four cups of water)
- Watered down flat lemonade (one cup of lemonade to four cups of water)
- Cordial watered down by adding eight cups of water to half a cup of cordial
- Avoid giving fizzy drinks, sports drinks or full strength fruit juice as this may worsen the diarrhoea

What if I am breastfeeding?

Do not stop breastfeeding. Give your baby smaller feeds more often and offer Gastrolyte® or Hydralyte®, or cooled, boiled water between feeds if your baby is under nine months of age.

What if my baby is bottle-fed?

- Give your child Gastrolyte® or Hydralyte® or clear fluids for the first 12-24 hours of symptoms. Use cooled, boiled water to dilute drinks for babies under nine months of age.
- If there is no vomiting or diarrhoea after 12 hours, introduce full-strength formula in smaller, frequent amounts. Half-strength formula is not helpful, and may be harmful.

Children can eat their usual foods

- If your child is hungry at any time, give them the food they would normally eat or something they feel like eating. Do not force your child to eat if they are vomiting frequently or feeling unwell. They will start to eat when they feel better.
- Your child should be back on normal fluids and diet in 48-72 hours, even if diarrhoea continues. This will make your child better quicker.

Stopping the spread of gastroenteritis

- Make sure that you and your family wash hands well with warm soapy water after changing nappies, cleaning up vomit, using the toilet and before eating
- Wipe things that may be shared between children, such as books and toys
- Keep your child away from other children while they are unwell. Do not send your child to school, kindergarten, childcare or crèche until 24 hours after the last vomiting and diarrhoea.
- Do not let your children share drinks or food or use the same cutlery

Follow up

Your child may be dehydrated and need a check-up by a doctor if they have one or more of these signs:

- Sunken eyes
- Lethargy (sleepiness)
- Dry mouth and tongue
- Cold hands and feet
- Patchy/mottled/blotchy or pale skin
- Passing little or no urine (nappies are dry or less than four wet nappies a day)
- Not drinking and still has frequent vomiting, diarrhoea or both

Seeking help

Cabrini Emergency Department (ED) is staffed by experienced emergency doctors and nurses 24 hours a day, 7 days per week. If you have any questions about your ED treatment our qualified ED staff can be contacted on **(03) 9508 1500** at any time. If you need to return to Cabrini ED for ongoing care we would be glad to take care of you again and if this occurs within a week of your initial consultation the doctor's fee will be bulk-billed.

You can also expect to receive a phone call or SMS message from one of our emergency nurses the day after you have been discharged. The nurse will be able to clarify any aspect of your diagnosis, treatment, or follow-up.

In a medical emergency return to Cabrini ED if it is safe to do so or go to the nearest hospital emergency department or call an ambulance – dial triple zero (000).

Return to Cabrini ED if your child:

- Has any sign of dehydration (see 'Follow up')
- Is younger than six months
- Has tummy pain that is getting worse
- Has green vomit
- Has blood or mucus in their diarrhoea
- Has more than eight to 10 bowel motions (diarrhoea) in a day, or diarrhoea lasting 10 days or more
- Is causing you concern for any other reason

Want to know more?

- Contact Cabrini ED on **(03) 9508 1500**
- Ask your local doctor or healthcare professional
- Visit the Royal Children's Hospital website www.rch.org.au/kidsinfo
- Visit the Better Health Channel at www.betterhealth.vic.gov.au