

Patient information

Gastroenteritis - management of babies and children

Gastroenteritis is a common illness in infants and young children. It usually causes frequent loose/watery bowel motions (diarrhoea) and often vomiting. Most children with gastroenteritis can be safely managed at home, with advice and support from a healthcare professional if necessary.

What causes it?

Viruses cause most gastroenteritis and there are many kinds, so gastroenteritis can occur more than once and is more common in the winter. Bacteria and food poisoning can also cause gastroenteritis.

How do you get it?

Gastroenteritis is easy to catch and spreads quickly, usually from person to person. It is almost impossible to stop children coming into contact with gastroenteritis, especially at pre-school.

How long will my child be unwell?

- The usual duration of diarrhoea is 5-7 days and in most children it stops within 2 weeks.
- The usual duration of vomiting is 1 or 2 days and in most children it stops within 3 days.

Viral gastroenteritis

This may start with vomiting or diarrhoea. The motions are watery, frequent and may be greenish-brown in colour. There is not normally blood or mucus in the motions and your child may have a mild fever. Vomiting usually settles quickly, but the diarrhoea can last for a week or more.

Bacterial gastroenteritis

Symptoms of bacterial gastroenteritis may be similar to viral but:

- Fever tends to be higher and lasts longer
- Tummy pains are often more severe
- Diarrhoea often has blood and mucus in it

How to treat gastroenteritis

Medicine is usually not necessary or helpful; it just has to run its course. Sometimes vomiting, diarrhoea, fever and loss of appetite can make your child lose more fluid than they can take in, which may lead to dehydration (see signs and symptoms of dehydration for more information). Replacing the fluid your child has lost is most important, so it is essential that your child keeps drinking. The more vomiting and loose stools the more fluid your child is losing so the more fluid they need to replace this.

Your child will be more likely to keep fluids down if:

- You give small amounts but often – don't let your child gulp large amounts as this will increase the likelihood of them feeling or being sick.
- You could give them fluids from a syringe or from a teaspoon.
- Do not expect them to eat meals – try to replace the meals with fluids.

The fluids do not stop the loose stools or vomiting but decreases the likelihood of your child becoming dehydrated. Aim to reintroduce food slowly as soon as possible once your child's vomiting and diarrhoea has stopped or after 12-24hrs. If vomiting reoccurs go back to just giving fluid. **Do not** give fruit juice or fizzy drinks until after the diarrhoea has stopped.

Signs of dehydration

- Passing less urine than usual e.g. dry nappies
- Increased thirst, dry mouth, no tears
- Sunken eyes, sunken fontanelle (soft spot on babies head)
- Changing responsiveness e.g. irritable, tiredness, drowsy
- Pale or mottled skin
- Cold extremities

Oral electrolyte solutions: Dioralyte™ (other makes available) is a specially designed drink to replace fluids and body salts lost during vomiting or diarrhoea. They are available from chemists and off the shelf at supermarkets, they are generally the best early treatment for gastroenteritis. Different flavours are available or squash could be added to them to make them taste better.

Feeding babies

Breast feeding: If you are breast feeding your baby do not stop breastfeeding. Offer you baby more frequent feeds and water or oral electrolyte solution between feeds. Breast fed babies require extra clear fluids.

Bottle feeding: Formula milk should be stopped and clear fluids should be given until the vomiting and diarrhoea has improved or for 12-24 hours. When these have settled and your infant seems hungry reintroduce milk.

How to prevent the spread of gastroenteritis

- Wash hands with soap and warm water and dry thoroughly after helping your child with the toilet, changing nappies or before preparing food
- Towels used by infected children should not be shared
- Children should not attend any school or any other childcare facility until 48 hours after the last episode of diarrhoea or vomiting
- Children should not swim in swimming pools for 2 weeks after the last episode of diarrhoea
- Ensure your food preparation area is clean
- Keep raw meat separate from other foods and ensure meat is cooked thoroughly before giving it to children

When should you be worried?

Call 999 or go to your nearest Emergency Department (A & E) if your child:

- has the above signs of dehydration
- becomes unresponsive
- has unusually pale or mottled skin
- has cold extremities
- is breathing faster than normal
- has blood or mucus in stools
- has green (bile) or blood in vomit

Contact your GP/out of hours GP, or use open access to Rainbow Ward if still valid if your child:

- is starting to get signs of dehydration
- seeming unwell
- is irritable or lethargic
- is passing less urine than normal
- is not drinking and has had 6 or more episodes of diarrhoea in 24 hours or 3 or more vomits in 24 hours

Call NHS 111, your GP or Rainbow Ward if you still have valid open access if:

- you have concerns about your baby or child

Further advice

If you are worried or need advice you can call the following departments who can best advise you on what to do:

- Rainbow Ward 01284 713315 (24hrs a day)
- Your own GP / GP out of hours
- NHS 111

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (formerly DisabledGo)

<https://www.accessable.co.uk>

