

Upset Tummy

Vomiting is usually not a sign of anything serious and tends to only last one or two days. Vomiting is the body's way of ridding itself of harmful substances from the stomach, or it may be a reaction to something that has irritated the gut. The most common cause in both children and babies is gastroenteritis. This is an infection of the gut usually caused by a virus or bacteria and is unusual in breastfed babies. It also causes diarrhoea. Your child's immune system will usually fight off the infection after a few days.



Prevention

Most children get gastroenteritis at some time no matter how high the standards of hygiene at home. Always encourage your child to wash hands with soap especially after visiting the toilet and before handling food.

If your child has got gastroenteritis prevent spread to others by:

- washing your hands after changing a nappy
- not sharing towels
- cleaning the toilet with disinfectant
- not letting your child prepare food for others

Looking after your child at home

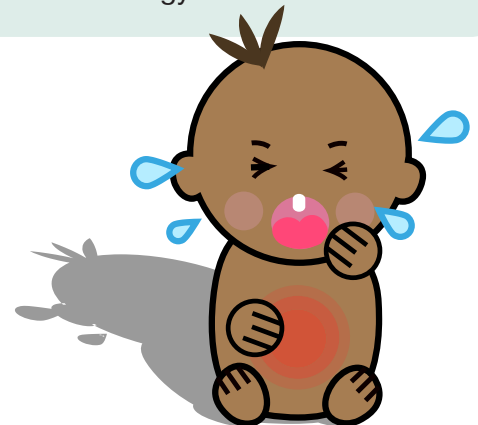
Diarrhoea can last up to three weeks. Keep your child away from public places/school for 48 hours after symptoms have settled. Your child should not go swimming until at least 2 weeks after last diarrhoea. If they seem dehydrated (see below), they will need extra fluids. Ask your pharmacist if they would recommend oral rehydration fluids (ORS).

Oral rehydration solution is a special powder that you make up into a drink, which contains sugar and salts in specific amounts to help replace the water and salts lost through vomiting and diarrhoea. Brands include Dioralyte, Electrolade and Rehidrat.

Severe vomiting and diarrhoea can easily lead to dehydration, especially in young babies. This means your child's body does not have enough water or the right balance of salts to carry out its normal functions.

Signs of dehydration

Children with dehydration often feel and look unwell. The signs of dehydration are; dry mouth, crying without producing tears, passing urine (wee) less than usual, or not wetting many nappies, increased thirst, floppiness and lethargy



For more information, help and support go to www.choosewellmanchester.org.uk or visit NHS Choices at www.nhs.uk

Choose the right care

What to do next...



Choose care at home if...

- Your child has had less than six episodes of diarrhoea in the past 24 hours
- Your child has been vomiting for less than 24 hours
- Continue to offer your child their usual feeds, including breast or other milk feeds. Do not starve your child.
- Encourage your child to drink plenty of fluids, offer small amounts often
- Do not give fizzy drinks and/or fruit juices
- Give oral rehydration solution (eg Dioralyte) if advised. Follow the instructions carefully.
- Reintroduce solids slowly when vomiting has stopped, starting with plain foods like toast, pasta or soup.
- Keep ORS sachets, Paracetamol and Ibuprofen suspension eg; Calpol and Nurofen (never give ibuprofen to asthmatics unless it has been prescribed by a doctor) in your medicine cabinet.



Choose your GP if...

- Your child has had six or more episodes of diarrhoea in the past 24 hours
- Your child has diarrhoea and is vomiting at the same time
- Your child has diarrhoea that is particularly watery
- Your child has diarrhoea that has blood in it
- Your child has diarrhoea that lasts for longer than two weeks
- Your child has a high temperature (fever) of 38°C (100.4°F) or above if they are less than three months old, or 39°C (102.2°F) or above if they are between three and six months old (call your GP or GP out-of-hours service)
- Your child has been vomiting for more than 24 hours
- Your child has not been able to hold down fluids for the last eight hours, or you think they are dehydrated
- They are floppy, irritable, off their food or generally not their usual self
- They have severe tummy pain
- They have a stiff neck - call your GP immediately, even if it's the middle of the night



Call 999 A&E if...

- Your child has a high temperature but their hands and feet feel cold
- Your child has a bulging fontanelle (the soft spot at the top of a baby's head)
- Your child has a fit (seizure)
- Your child turns blue, blotchy or very pale
- Your child has a stiff neck and headache
- Your child has breathing problems, like breathing fast or grunting while breathing, or they seem to be working harder than usual to breathe (for example, sucking in under the ribcage)
- Your child has a spotty, purple-red rash anywhere on their body (this could be sign of meningitis, which is a serious infection)



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