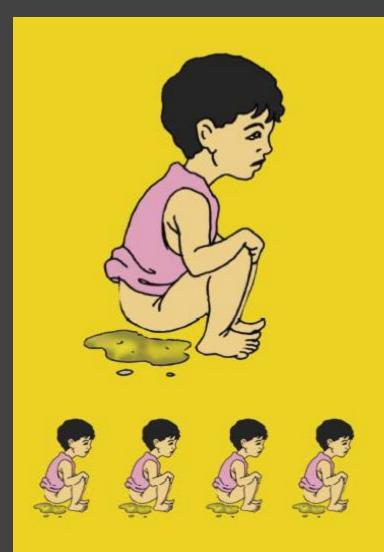
Childhood Diarrhea management

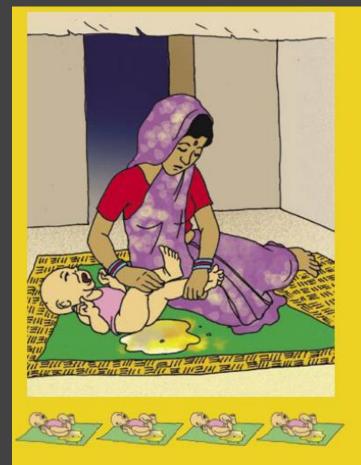
Diarrhea- 2-59 months

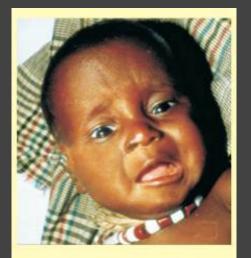
Three or more loose stools in 24 hours

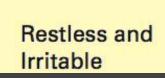


Diarrhea- 0-2 months

Recent change in consistency or pattern of stool as noticed by mother or caretaker

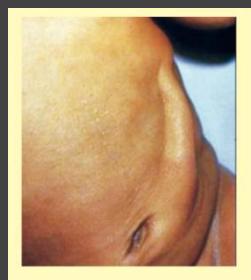








Sunken eyes

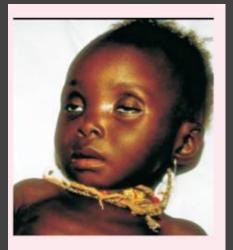


Skin pinch goes back slowly (less than 2 seconds)



Two or more signs

SOME DEHYDRATION



 Lethargy or unconscious







Skin pinch goes back very slowly (more than 2 seconds)

Two or more signs

SEVERE DEHYDRATION

Plan of Treatment

• No Dehydration: PLAN-A

Some Dehydration: PLAN-B

Severe Dehydration: PLAN-C

 Treat Diarrhea at Home. **4 Rules of Home Treatment:** GIVE EXTRA FLUID • CONTINUE FEEDING **[ADVICE TO** WHEN TO RETURN **MOTHER**] GIVE ORAL ZINC FOR 14 DAYS

Recommended drinks for a child with diarrhoea include:

- breastmilk (mothers should breastfeed more often than usual)
- ORS
- soups
- rice water
- fresh fruit juices
- coconut water
- clean water from a safe source.

• for a child under the age of 2 years: between 1/4 and 1/2 of a large (250-millilitre) cup

• for a child 2 years or older: between 1/2 and 1 whole large (250-millilitre) cup

- Drinks should be given from a clean cup.
- A feeding bottle should not be used.
- If the child vomits, the caregiver should wait 10 minutes and then begin again to give the drink to the child slowly, small sips at a time.
- The child should be given extra liquids in addition to regular foods and drinks until the diarrhea has stopped.

- Continue usual feeding, which the child was taking before becoming sick 3-4 times (6 times)
- Up to 6 months of age: Exclusive Breast feeding
- 6 months to 12 months of age: add Complementary Feeding
- 12 months and above: Family Food

Advise mother to return immediately if the child has any of these signs:

- passes several watery stools in an hour
- passes blood in the stool
- vomits frequently
- has a fever
- is extremely thirsty
- does not want to drink
- refuses to eat
- has sunken eyes
- looks weak or is lethargic
- has had diarrhoea for several days

PLAN – B

- Plan-B is carried out at ORT Corner in OPD/ clinic/ PHC
- Treat 'some' dehydration with ORS (50-100 ml/ kg
- Give 75 ml/kg of ORS in first 4 hours
- If the child wants more, give more
- After 4 hours:

Re-assess and classify degree of dehydration.

PLAN - C

• Give 100 ml/kg Ringers lactate solution or Normal saline as follows

Age	First give 30 ml/kg in	Then give 70 ml/kg in
Infants	1 hour	5 hours
1-5 years	30 minutes	$2\frac{1}{2}$ hours

PLAN – C

- Reassess child every 1-2 hours. If hydration status is not improving, give the IV fluid more rapidly.
- Also give ORS (about 5 ml/kg/hour) as soon as the child can drink, usually after 3-4 hours (infants) or 1-2 hours (children)
- Reassess an infant after 6 hours and a child after 3 hours. Classify dehydration. Then choose the appropriate plan (A, B, or C) to continue
- If IV treatment is not available immediately start rehydration by tube (or mouth) with ORS solution: 20 ml/kg/hour for 6 hours (total of 120 ml/kg)

ORS

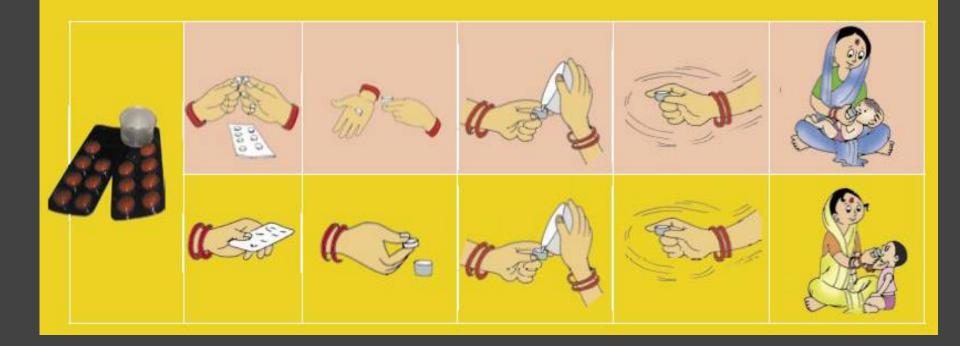
Sodium chloride	2.6 gm
Trisodium citrate dehydrate	2.9 gm
Potassium chloride	1.5 gm
Glucose	13.5 gm
Total	20.5 gm

ORS

Sodium	75 mmol
Citrate	10 mmol
Potassium	20 mmol
Glucose	75 mmol
Chloride	65 mmol
Total	245 mmol

Dose of Zinc

- 6 mo-5 yrs 20 mg for 14 days
- 2-6 months 10 mg for 14 days



DYSENTERY

Blood in the
stool but no
dehydrationDysenteryBlood in the
stool in a youngSevereStool in a young
infant (0-2
months)Dysentery

• Treat with oral Cotrimoxazole for 5 days.

- Give first dose of intramuscular ampicillin and gentamicin if the young infant has low weight, dehydration or another severe classification
- Refer the infant urgently to hospital.
- The mother should give frequent sips of ORS on the way and continue breastfeeding.

PERSISTENT DIARRHEA

Dehydration present	SEVERE PERSISTENT DIARRHOEA	 Treat dehydration before referral unless the child has another severe classification. Refer to hospital
No Dehydration	PERSISTENT DIARRHOEA	 Advise the mother on feeding a child who has PERSISTENT DIARRHOEA Give single dose of vitamin A Give zinc sulphate 20 mg daily for 14 days Follow-up in 5 days.

• Exclusive Breastfeeding



• Improved dietary Habits



• Safe and clean water



PREVENTION OF DIARRHEA