

Vomiting and Diarrhea

- Vomiting (throwing up) and diarrhea (frequent, watery stools) are common symptoms in children and are usually caused by a viral infection
- Children can have vomiting and diarrhea together, or just one of either vomiting and diarrhea
- The virus that causes these symptoms spreads very easily
- Most children get better on their own and do not require any special treatment. The most important thing is to keep your child hydrated



Key Points

- Vomiting and diarrhea are very common symptoms in children and can happen at any time of the year
- The most common cause is a viral infection
- The best way to care for your child is to keep them comfortable – control fevers and encourage them to drink and eat
- These symptoms are rarely treated with antibiotics

Symptoms

General:

- Cramping pain around the belly button
- Fever
- Decreased energy and sleeping more
- Loss of appetite

Vomiting:

- Throwing up frequently, especially after eating or drinking
- Feeling nauseous or gagging



Seek Immediate Medical Attention if:

- Your child appears severely dehydrated
- Your child has blood in their diarrhea
- Your child continues to have vomiting or diarrhea that is not getting better after 10 days
- Your child has worsening abdominal pain or discomfort (swollen, painful stomach)

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- Mild stomach pains, especially right before or after throwing up

Diarrhea:

- Frequent, large watery stools
- Mild stomach cramps, especially right before they stool and usually improved after a bowel movement

Dehydration:

- Mild:
 - Normal activity level and behavior
 - Moist mouth (inside of cheeks, saliva)
 - Tears with crying
 - Peeing smaller amounts but as often as usual:
 - 3 to 5 months – wet diaper usually every 3 hours
 - 6 to 23 months – wet diaper usually every 6 hours
 - 24 months and older – wet diaper usually every 8 hours
- Moderate:
 - Decreased activity level – playing less and wanting to sleep more
 - Moist mouth (inside of cheeks, saliva)
 - Less tears when crying
 - Peeing less often than usual:
 - 3 to 5 months – dry diaper for more than 4 hours
 - 6 to 23 months – dry diaper for more than 8 hours
 - 24 months and older – no pee in more than 10 hours
- Severe:
 - Pale, cool skin
 - Very sleepy, hard to wake up and not responding normally
 - Dry mouth, lips and tongue
 - No tears when crying
 - Peeing much less often than usual:
 - 3 to 5 months – dry diaper for more than 6 hours
 - 6 to 23 months – dry diaper for more than 10 hours
 - 24 months and older – no pee in more than 12 hours

Treatment

The best way to prevent the spread of vomiting and diarrhea is to regularly wash your hands. Washing your hands is the most important after activities like changing diapers or going to the bathroom, and before handling or preparing food.

Hydration

- Make sure your child is always drinking enough fluids. If your child is 3 to 12 months old, continue feeding them breast milk or formula. If your child is over 12 months, they may consume water, milk, or diluted fruit juice (1 part juice to 2 parts water). If your baby (under 12 months old) is drinking from a cup, you can offer 60 to 90mL (2 to 3 ounces) of water with meals
- However, make sure water does not replace the amount of milk your baby drinks. If your child is over 12 months, you may also offer the same amount of fluid with meals
- Even if your child is vomiting, continue to offer them fluids 3 to 4 minutes after vomiting. If they continue to vomit, give them smaller amounts of fluids more often than before

Foods

- Continue to feed your child their regular diet, in smaller amounts. If less than 6 months old, your child should only consume breast milk or formula
- If your child is 6 to 12 months old, normal foods include breastmilk and formula, as well as infant cereal, toast, cereals, rice, pasta, potatoes, crackers, lean meat, egg yolk, yoghurt, fruits, and vegetables. A mix of breastmilk/formula with the foods above often helps the child get better sooner
- If your child is over 12 months old, normal foods to give include soup, bread, toast, cereals, rice, pasta, crackers, potatoes, lean meat, milk, eggs, cheese, yoghurt, fruit, and vegetables
- Do not give your child high sugar foods or fatty/greasy foods, such as candy, jell-o, French fries, or gravy

Medicine

- Continue to give any medication your child normally takes. Speak with your doctor if your child can not keep down these prescription medications
- If your child has a fever, you can give them acetaminophen (eg. Tylenol® or Tempra®) or Ibuprofen (eg. Advil® or Motrin®)

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- You can offer your child oral rehydration solutions such as Pedialyte® or Enfalyte®, especially if they have dry lips, tongue, or mouth
- Canadian probiotics have not been shown to shorten how long diarrhea lasts
- Vomiting and diarrhea are usually caused by viruses, therefore antibiotics are not needed. They will not help your child get better, and may actually harm your child
- Do not give over the counter medicines such as Gravol® or Imodium®. These medicines do not help and may actually harm your child

Know Your Options

It can be scary when your child is sick. But in most cases, you don't need to go to the emergency department. If you're unsure, [we're here to help](#).



Please Note

The content provided on these pages is not intended to replace medical advice. If you have concerns about the health of your child, contact your health care provider directly. If your child has an emergency, go to the nearest emergency department or call 911. Alberta Health Services and Project HEAL strive to ensure that all material is correct but will not be held liable for errors or incomplete information contained in these pages.