

ACUTE DIARRHEA

A person with 3 or more liquid, or semi-liquid, stools in 24 hours is said to have diarrhea. Diarrhea is a symptom or result of some type of digestive problem. Normally, food moves slowly through the digestive system from the stomach into the intestines. As digestion takes place, the intestines absorb nutrients and water for use in the body. Diarrhea occurs if the intestines become irritated and food passes too quickly before the water has been reabsorbed back into the body. Causes may be minor, serious, and even life-threatening. Possible causes include infections; certain foods or drinks; side effects of medicines; strong emotions, physical changes or disorders. Occasional loose bowel movements (BMs) are not of great concern if they occur only once or twice and then return to normal. Risk increases with high stress; food poisoning; food allergies; use of laxatives, some antibiotics, and some antacids; digestive tract disorders including Diverticulitis, Crohn's disease, and Pancreatic disease; bone marrow transplants; certain food products including dairy, shellfish, sorbitol, and mannitol; radiation treatments for cancer; immunosuppression due to illness or drugs; excessive alcohol intake; unsanitary living conditions or untreated water sources; travel abroad; and following surgery of the digestive tract.

Symptoms may include:

- Cramping abdominal pain
- Frequent loose, watery, or unformed bowel movements
- Lack of bowel control
- Fever and chills
- Vomiting
- Weakness
- *Dehydration* (dry skin, sunken eyeballs, thirst, and foul and concentrated urine) if diarrhea is severe or lasts a long time

What your doctor can do:

- Assess and diagnose the condition by asking about your symptoms and medical history, and doing a physical exam.
- Order blood tests, stool tests including cultures, and abdominal X-rays if necessary.

Treatment includes:

- Avoiding or treating the underlying cause when the cause can be identified. If the cause is a virus, or due to minor irritation, the diarrhea should resolve on its own in 1-3 days. If a specific *germ* (bacteria or parasite) is identified, antibiotics or similar drugs may be given to help eliminate them. If prescription medications are the cause, your doctor may change the medication or adjust the dosage. If the diarrhea is severe and adequate fluids cannot be taken by mouth, intravenous (IV) fluid replacement may be necessary.
- Your doctor may recommend the use of antidiarrheal medications such as Pepto Bismol or Imodium.

What you can do:

- Rest when possible.
- Apply hot compresses or a moist heating to abdomen. Helps to relieve cramping.
- Drink small amounts of clear liquids only (e.g., water, non-cola sodas, herbal tea, clear broth). Try to drink as much as possible to prevent dehydration.
- If you are nauseated and unable to drink fluids, try sucking ice chips.
- For the first 1-2 days after diarrhea has stopped, eat only soft, non-irritating foods, such as

cooked cereals and grains, yogurt, puddings, rice, and potatoes.

- Avoid fruit, alcohol, any highly seasoned foods, meats, fatty foods, caffeine, and milk products.
- Gradually return to your normal diet but continue to avoid fruit, alcohol and highly seasoned foods for several more days.

What you can expect:

- Diarrhea usually resolves completely within a few days.
- Possible complications include dehydration if the diarrhea is prolonged, severe, and accompanies vomiting.

Contact your doctor if diarrhea lasts more than 3 days; if you notice mucous, blood, or worms in the stool; if fever is above 101°F; if severe pain develops in the abdomen or rectum; if you suffer dehydration; or if you have chronic diarrhea.