

Protocols: derived from 2005 AIEPI/WHO guidelines for treatment of kids <5yo in ES

Diarrhea

Birth to 2 months:

Questions:

How long?

Is the stool bloody?

Breast feeding? Well?

Exam:

Signs of dehydration? Prolonged cap refill? Lethargic or extremely irritable? Sunken eyes, fontanel?

Classification/Treatment:

Diarrhea with any signs of Dehydration: Referral to Hospital. Continue Breastfeeding as frequently as possible

Diarrhea withOUT Dehydration: Treat the diarrhea at home.

1. Provide the baby with more liquids: longer and more frequent breastfeeds.
2. Make sure breastfeeding is going well.
3. Indicate to mom when to follow up.
4. If diarrhea persists, return en control in 2 days.

Diarrhea > 14days: If NO dehydration:

1. Ensure breast feeding is going well.
2. Longer and more frequent breast feeds
3. Provide with Vitamin A: 50,000 UI if not already received

Bloody stools: Referral to Hospital. Make sure mom continues to breastfeed

2 months to Childhood:

Questions:

How long?

Is the stool bloody?

Exam:

Signs of dehydration? Thirsty? Prolonged cap refill? Lethargic or irritable?

Taking Po's well? Breastfeeding well?

Classification/Treatment:

Diarrhea with signs of serious Dehydration:

1. Referral to Hospital for rehydration.
2. Provide with SRO(oral rehydration) and/or frequent breastfeeding
3. Initiate SRO orally or by NG Tube: 30 mL/kg/hour

Diarrhea with Mild Dehydration:

1. Initiate rehydration: Breastfeeding and/or SRO.
2. Teach mom to prepare SRO with potable water.
3. Stool replace: SRO: If <1 year old → 50-100 mL for each stool; If >1 year old → 100-200mL for each stool
4. Administer Therapeutic Zinc according to age: 6-11 months → 10mg/day(1 cdita.) for 24 days; 1-4 years → 20mg/day(2cdita.) for 12 days
5. Indicate to mom when to follow up.
6. Return en control in 2 days

Diarrhea withOUT Dehydration: Treat the diarrhea at home.

1. Provide the child with more liquids: longer and more frequent breastfeeds, other liquids: SRO, atole, ricewater, potable water
2. Make sure child is drinking/feeding.
3. Indicate to mom when to follow up. If diarrhea persists, return en control in 5 days.

Diarrhea > 14days: If NO dehydration:

1. Ensure breast feeding, po-ing is going well.
2. Provide the child with more liquids: longer and more frequent breastfeeds, other liquids: SRO, atole, ricewater, potable water
3. Provide with Vit A if not recently given: 0-4 months → 50,000 UI; 5-11 months → 100,000 UI; 1-4 years → 200,000 UI
4. Administer Therapeutic Zinc according to age: 6-11 months → 10mg/day(1 cdita.) for 24 days; 1-4 years → 20mg/day(2cdita.) for 12 days
5. Consider EGH(Examen General de Heces = stool studies for culture, O&P)
6. Indicate to mom when to follow up.

Bloody stools: (Disenteria)

1. Administer antibiotic for shigella: Trimetoprim Sulfametoxazol(4mg/kg/dose, give q 12 hours x 5days)

TMP-SMX suspension(40mg tmp+200 sulfa)

2-3months(4-6kg)- 1.5 mL

4-11 months(6-10kg)- 2.5 mL

1-2 years(10-14kg)- 5mL

3-4 years(14-20kg)- 7.5 mL

TMP-SMX tabs(160 mg tmp+ 800mg sulfa)

3-4 years: ½ tab

2. Indicate to mom when to return immediately
3. Return en control in 2 days if bloody stools persist