

Diarrhoea

Diarrhoea is the passing of frequent, watery stools. Diarrhoea is a symptom and can be acute or chronic. Acute diarrhoea is usually caused by a viral infection or a bacterial infection and affects almost everyone from time to time. It usually clears up in a couple of days and is not serious. However it can be serious in babies and the frail and elderly, because of the risk of dehydration.

Chronic diarrhoea may be a result of a more serious disorder and should always be investigated by your doctor.

Symptoms

Symptoms can range from slightly watery stools and a brief upset tummy, to longer-term extremely watery stools and cramp.

Common symptoms include:

- Crampy tummy pains
- Nausea or vomiting
- Fever
- Headache
- Loss of appetite

If the diarrhoea lasts more than two weeks (in an adult), it is considered chronic. If your child has diarrhoea for more than five days you should take them to the GP.

Causes

Diarrhoea occurs when the lining of the small or large intestine is irritated. This leads to increased water being passed in the stools. The irritation also causes tummy pains as it contracts strongly and irregularly.

The most frequent cause is an infection with a virus or bacteria. The infection may come from infected food (food poisoning). Water is a common cause when travelling in some countries. Often the infection is spread between people by physical contact. You should therefore always wash your hands with soap and water before preparing food and after using the toilet.

Other, usually short-term causes include emotional upset or anxiety, drinking too much alcohol, coffee or sweets or the side effect from some medicines.

There are many long- term conditions that cause chronic diarrhoea, such as ulcerative colitis, Crohns disease, irritable bowel syndrome (IBS), lactose intolerance, and pancreatitis. These should be investigated by your doctor.

Diagnosis

If you have acute diarrhoea, the symptoms are very likely to settle down within a week and tests are usually unnecessary.

However if your diarrhoea becomes more persistent or if you have other symptoms (such as blood in your stools or dehydration) your doctor may ask for a stool sample to investigate for bacteria or parasites.

Treatment

If you have acute diarrhoea you are advised to keep to the following until your symptoms settle:

- Avoid dehydration by drinking lots of fluids. You are more likely to be dehydrated if you are also vomiting. Try to take small frequent sips of water or diluted fruit juices. It is especially important that babies and small children do not become dehydrated. Even if your child vomits, you should still give frequent sips of water. A small amount of fluid is better than none. If your child shows signs of dehydration (drowsiness, passing little urine, few or no wet nappies, a dry mouth and tongue, unresponsiveness, or glazed eyes) you should call your GP urgently.
- If you are worried that you are becoming dehydrated, your doctor or pharmacist may advise rehydration drinks. You can buy these sachets from your pharmacy and add them to water. They provide the correct balance of water, salt, and sugar. They do not help cure the diarrhoea, but are ideal to prevent or treat dehydration. Rehydration drinks may also be advised for your child if you are worried that they may become dehydrated. Do not use home made salt/sugar drinks - consult your pharmacist.
- You should eat as soon as you can. The old advice was to not eat anything for a day or two but now it is advised that you should eat foods high in carbohydrates such as bread, pasta, rice, or potatoes, and other foods as soon as you feel like it. If however you feel you can't eat, it will do you no harm, but continue drinking, and eat as soon as you are able. If your child wants to eat, offer soups and foods high in carbohydrates at first. Your child can eat normally as soon as possible. Do not starve your child. If your child refuses to eat, continue to offer drinks and wait until their appetite returns.
- Anti-diarrhoea medicines relieve symptoms of acute (severe) diarrhoea and can be useful to reduce discomfort and social disruption, except where there is blood in your stools or if you have a high temperature. Check with your pharmacist. Never give anti-diarrhoea medicines to your child.
- If you are breastfeeding or bottle-feeding your child and they have diarrhoea, continue, if they will still feed (use their normal strength feed if they are bottle feed). Rehydration drinks should also be given if necessary.
- You can take recommended doses of paracetamol or ibuprofen if you have a fever or headache. Liquid paracetamol or ibuprofen can also be given to your child if necessary.
- Always continue with good standards of hygiene; this is especially important if you or anyone in your family has diarrhoea.

If you or your child has severe or persistent symptoms you should see your doctor. Further tests may be necessary. Occasionally antibiotics or other treatments are necessary.

Complications

Complications are uncommon, but see your doctor if you or your child has the following symptoms:

- If you or your child is dehydrated (symptoms include passing little urine, a dry mouth and tongue, unresponsiveness, glazed eyes, drowsiness, confusion)
- If there is blood in your stools
- If vomiting continues for more than a day
- If diarrhoea does not start to clear up after 3-4 days
- If you caught the infection while travelling abroad

You or your child may be admitted to hospital if symptoms are severe, or if complications develop. Sometimes an intravenous fluid drip might be needed if dehydration occurs.

Prevention

Cleanliness and good hand hygiene will help to prevent you and your family from catching infectious diarrhoea. You should always wash your hands after using the toilet, potty, playing with pets, doing gardening and before you touch food. Your child should be taught to wash their hands regularly, as soon as they are old enough to understand.

If you have diarrhoea you must be especially careful with your hygiene and not share towels. Check your child's bottom for any signs of redness. Apply a recognised barrier cream if necessary.

If your job involves preparing food, you should not work for 48 hours after symptoms clear up.

Why choose 'Optibac[®]- For Bowel Calm'?

Probiotics have been shown to be beneficial in preventing and treating various forms of gastroenteritis. 'Opibac[®] for Bowel Calm' is a powerful natural relief for diarrhoea. It contains pure *Saccharomyces boulardii*, a natural and safe probiotic yeast. *S. boulardii* has undergone extensive clinical research demonstrating its ability to flush out pathogenic bacteria such as E. coli and Salmonella, in order to work against conditions such as diarrhoea. Unlike traditional OTC diarrhoea treatments like Imodium[®] and Arret[®] which are only "plugging" the problem without treating the actual cause, 'Opibac[®] for Bowel Calm' actually kills the infection that is causing the problem; hence it can quickly clear up diarrhoea.

Directions

'Optibac[®] for Bowel Calm' can be given to adults and children from 3 years old upwards:

- For **Diarrhoea**: take 1 to 4 capsules depending on severity of symptoms; take again in the event of further loose stools, and up to 6 capsules per day.
- For **Irritable Bowel Syndrome (IBS)**, take 1 capsule, twice a day. (daily dose: 2 capsules)
- For **Inflammatory Bowel Disease (IBD)** eg. Ulcerative Colitis, Diverticulitis, Crohn's Disease: take 1 capsule, three times a day (daily dose: 3 capsules)
- For **Clostridium difficile** infection, take 2 caps twice daily for 4 weeks (daily dose: 4 caps)
- Drink plenty of water with your probiotics course.
- For anyone unable to swallow capsules, capsule can be opened and contents mixed with a cold meal or beverage.

The 16 pack of "Optibac[®]- For Bowel Calm[®]" costs €8.12 in Whelehans.

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