WHAT’S THE BEST WAY TO TREAT CHILDHOOD DIARRHOEA?

RECOVER. RESTORE. GROW.

For ALL cases of childhood diarrhoea, start with zinc + oral rehydration salts (ORS), proven to:

- Speed recovery\(^1\)\(^-\)\(^3\)
- Restore strength, energy, and appetite\(^1\),\(^2\),\(^4\)
- Help keep children thriving\(^2\)
CHILDHOOD DIARRHOEA:

A loss of life and health

Among children under 5 worldwide, diarrhoeal diseases are the second-leading cause of death.

- Each year in Uganda, diarrhoea—and the dehydration and malnutrition it causes—kills close to 14,000 children under the age of 5. That is about 38 children every day.

Children who survive persistent diarrhea are likely to suffer from:

- Malnutrition
- Stunted growth
- Learning difficulties

It only takes 2 or 3 days of diarrhoea to start affecting a child’s growth. That’s one reason treating right away is so important.

- Malnutrition happens fast because the body does not absorb nutrients as it should.

A loss of strength and immunity

When diarrhoea affects the child, serious digestive system consequences can happen fast:

1. Most diarrhoea in children is caused by viruses, not bacteria.
   — Remember that viruses are not affected by antibiotics

2. These viruses cause changes to the digestive system:
   - The body is less able to absorb fluids and nutrients
   - Also, there is an increase in the amount of fluids and minerals that the body secretes

3. These changes cause the body to lose fluids and minerals, like zinc, sodium, and potassium.

When these fluids and minerals aren’t replaced, this can lead quickly to dehydration and malnutrition. And zinc loss weakens the immune system, leaving a child less able to fight disease.
**Why Zinc?**

Zinc helps the child:

- **Recover quickly**
  - Reduce stool output by up to 30%

- **Fight disease**
  - Reduce duration of acute diarrhoea by 25%

- **Improve appetite and growth**
  - A 10-day course prevents diarrhoea for 2-3 months

**Zinc + ORS—Together, they are proven to keep children strong and thriving**

**How MUCH ZINC TO GIVE**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Zinc Dose</th>
<th>How Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child younger than 6 months</td>
<td>10 mg</td>
<td>Once a day (for 10 days)</td>
</tr>
<tr>
<td>Child older than 6 months</td>
<td>20 mg</td>
<td>Once a day (for 10 days)</td>
</tr>
</tbody>
</table>

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**Why ORS?**

Dehydration drains strength and energy. ORS treats dehydration.

- Dehydration is the main reason children die from diarrhoea

**How to give ORS**

- The general rule is: give as much fluid as the child wants until diarrhoea stops

**AS A GUIDE, AFTER EACH LOOSE STOOL, GIVE**:

<table>
<thead>
<tr>
<th>Age Group</th>
<th>ORS Dose</th>
<th>How Often</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child under 2</td>
<td>One half cup (50-100 mL)</td>
<td>Once a day (for 10 days)</td>
</tr>
<tr>
<td>Children ages 2 to 10</td>
<td>One whole cup (100-200 mL)</td>
<td>Once a day (for 10 days)</td>
</tr>
</tbody>
</table>

ORS should be given until the diarrhoea stops. This may last several days.
For childhood diarrhoea:

Antibiotics—Rarely
Antimotility drugs—Never

Antibiotics often don’t work and they don’t improve the child’s energy

■ They are not effective against most diarrhoea-causing organisms. They rarely help and can make some people sicker in the long term
■ Unnecessary use of antibiotics can lead to resistant organisms, meaning that these drugs won’t work as well when they are necessary
■ Antibiotics are only recommended for children with bloody diarrhoea and episodes of cholera

Antimotility drugs are dangerous. Don’t use them.

■ WHO/UNICEF and the Ministry of Health strongly discourage the use of antimotility drugs (such as tincture of opium, loperamide, or other opiate derivatives) in infants and children
■ They can make the illness last longer. That’s because the germs causing the illness stay inside the child longer

References: