



Understanding Diarrhoea in Newborns

Department of Paediatric Gastroenterology

What Is Diarrhoea?

Diarrhoea is defined as the passage of unusually loose or watery stools, typically three or more times in a 24-hour period. It is a common condition in newborns and young children and can range from mild to severe.

Acute vs Chronic Diarrhoea

- **Acute Diarrhoea:** Lasts less than 14 days. It is often sudden and usually caused by infections (viral, bacterial, or sometimes parasites).
 - **Chronic/Persistent Diarrhoea:** Lasts 14 days or more. This can be caused by ongoing infections, food intolerances, or underlying health issues.
- Key Difference:** Acute diarrhoea is short-term and often related to infections, while chronic diarrhoea lasts longer and may indicate deeper problems.

Causes of Diarrhoea in Children

- **Infections:** Rotavirus, norovirus, bacteria (E. coli, Shigella, Salmonella), parasites (Giardia)
- **Food intolerances/allergies:** Cow's milk protein allergy
- **Antibiotic use:** Can disrupt normal gut flora
- **Congenital disorders:** Rare enzyme deficiencies

Alarming Signs of Diarrhoea in Children

Seek immediate medical attention if you notice:

- Signs of **dehydration:** Sunken eyes, dry mouth, decreased urine, lethargy, no tears when crying
- Persistent vomiting
- High fever
- Blood in stool
- Refusal to feed or breastfeed
- Weakness or unusual drowsiness

Blood in Stool - What Does It Mean?

Blood in the stool may indicate:

- A bacterial infection (like Shigella)
- Intestinal inflammation or injury
- Possible intestinal intussusception (medical emergency)

Immediate medical review is essential for bloody diarrhoea.

When Should You Rush to the Doctor or Hospital?

Go to the hospital/doctor if:

- The child is unable to keep fluids down
- There are signs of dehydration
- There's blood in the stool
- Diarrhoea persists for more than 24-48 hours in a newborn
- The baby has a high or persistent fever



Home Management of Diarrhoea

- Continue **breastfeeding** or formula feeding, as appropriate.
- Give **oral rehydration solution (ORS)** as recommended.
- Avoid over-the-counter anti-diarrhoeal medications unless prescribed.
- Monitor for worsening symptoms.

Preventive Measures

- **Hand hygiene:** Wash hands thoroughly after diaper changes and before feeding.
- **Safe feeding:** Ensure bottles, nipples and utensils are sterilized.
- **Vaccination:** Rotavirus vaccine reduces risk.
- **Safe drinking water** and food hygiene.

Diet During Diarrhoea

- Continue regular feeding (breast milk/formula).
- Avoid fruit juices or sugary drinks.
- Do not withhold food; normal feeding helps recovery.
- When age-appropriate, easily digestible foods (rice, bananas, cooked apple) may be introduced.

Complications of Untreated or Recurrent Diarrhoea

- **Dehydration:** Can be life-threatening in infants.
- **Malnutrition:** Prolonged diarrhoea can affect growth and development.
- **Electrolyte imbalances:** Affect heart and muscle function.
- **Developmental delays:** From prolonged poor nutrition.

Remember: Early recognition, prompt ORS, maintaining hydration and seeking help for warning signs can save lives.

For concerns or urgent care, Neotia Bhagirathi Woman and Child Care Centre's paediatric gastroenterology team is here for you at New Town.