

Diarrhoea and Vomiting

Common causes

Diarrhoea and vomiting is most commonly caused by viral gastroenteritis or food poisoning.

Viral gastroenteritis can be due to a variety of viruses, commonly *rotavirus* or *norovirus*. Symptoms may include nausea and vomiting, watery diarrhoea and abdominal cramps. It is often associated with other symptoms of viral infection such as fever, headache and muscle aches. Viral gastroenteritis is very contagious and is spread via the vomit or faeces of infected persons either by direct contact (e.g. shaking hands) or using contaminated objects (e.g. utensils). Symptoms generally last less than three days but some rotavirus infections can have a longer duration.

Other less common causes of gastroenteritis include bacteria and parasite infections.

Food poisoning is caused by bacterial toxins present in contaminated food. Symptoms can occur often less than 4 hours but up to 12 hours after eating, and may involve vomiting and/or diarrhoea. Symptoms usually come on suddenly and last less than 24 hours. Fever and other viral symptoms are uncommon. It is not contagious.

Tests

Laboratory testing of faeces (stool cultures) is not usually necessary, except in viral outbreaks when they can be useful for public health reasons or when there is bloody or prolonged diarrhoea. Blood tests are also unnecessary unless you are severely dehydrated or have other medical conditions.

Treatment

There is no specific treatment for most common causes of gastroenteritis. The most important treatment is replacing lost fluids and preventing dehydration. Your doctor may prescribe medication to control diarrhoea or abdominal cramps, or to relieve nausea and vomiting.

Fluid replacement

Most people will have no or mild dehydration and can be managed with oral fluids. Water or dilute (1:4) juices are recommended. Commercial rehydration fluids can be used but are not necessary in most mild episodes.

Undiluted fruit juices and soft drinks worsen diarrhoea.

Rapidly drinking large amounts will irritate the stomach and cause vomiting.

Even when vomiting is persistent, as long as **regular** and **small** amounts of fluid are taken, sufficient fluid should still be absorbed to prevent dehydration.

Suggested intake:

Vomiting	Not vomiting
½ cup fluid every 5 minutes	1 – 2 cups (300 - 600mL) fluid per hour

Drinking fluids **does not** worsen diarrhoea and oral fluids do not “pass straight through”. However, filling the stomach may result in a desire to open your bowels.

Signs of dehydration include feeling very thirsty, feeling dizzy and faint and passing dark urine. When adequately hydrated your urine should be clear/pale yellow and you should no longer feel thirsty.

Severely dehydrated patients will require intravenous fluids and admission to hospital.

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Diet

Once fluids are tolerated you can start eating. An adult or child with diarrhoea should continue to eat, and infants should continue to breast-feed. Specific foods and diets have not demonstrated benefit over a normal diet. Some probiotics have been shown to be beneficial in reducing both the duration of symptoms and the frequency of stools.

Avoid caffeine, high sugar foods, chocolate and alcohol. Dairy products are usually OK for most people.

Hygiene

Wash your hands thoroughly with soap and water and dry with a clean towel

- after using the toilet
- after changing nappies
- before eating or preparing food.

These precautions should continue for 48 hours after the vomiting or diarrhoea ceases.

When cleaning up vomit or faeces ensure that you wear gloves and wash your hands afterwards.

Clean any soiled object or surface with hot water and detergent and allow to dry thoroughly.

Medications

While not always needed, you may be prescribed one or more of these drugs:

Your doctor will advise you of the recommended dosage.

Drug	Brand name	Dose	For
Metoclopramide	"Maxolon"		Nausea, vomiting
Ondansetron	"Zofran"		Nausea, vomiting
Paracetamol	"Panadol"		Pain, fever
Loperamide	"Imodium"		Diarrhoea, cramps

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