



VOMITING

Vomiting is the forceful ejection of a large portion of the stomach's contents through the mouth. It is caused by strong stomach contractions against a closed stomach outlet. By contrast, regurgitation (spitting up) is the effortless ejection of one or two mouthfuls of stomach contents that is commonly seen in babies less than 1 year of age.

Cause

Most vomiting is caused by a viral infection of the stomach or eating something that disagrees with your child. Often, the viral type is associated with diarrhea. The viral illness is called gastroenteritis.

Expected Course.

The vomiting usually stops in 6 to 24 hours. Dietary changes usually speed recovery.

HOME CARE FOR VOMITING

Special Diet for vomiting

No Solids for 8 Hours

Clear Fluids for 8 hours. Offer child clear fluids (not milk) in small amounts until 8 hours have passed without vomiting. For vomiting without any diarrhea, the best clear fluid at any age is water. For infants you can also use one of the oral electrolyte solutions (such as Pedialyte,

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Resol, or Kaoelectrolyte). After this age electrolyte solutions should still be tried. If these are refused, soft drinks (cola, lemon-lime, or ginger ale) are also acceptable. Stir until no fizz remains (the bubbles inflate the stomach and increase the chances of continued vomiting).

Start with 1 teaspoon to 1 tablespoon, depending on age, every 10 minutes. Double the amount each hour. If your child vomits using this treatment, rest the stomach completely for 1 hour and then start over but with smaller amounts. The one-swallow-at-a time approach rarely fails.

Bland Foods after 8 Hours without Vomiting.

After 8 hours without vomiting, your child can gradually return to a normal diet.

For older children, start with foods such as saltine crackers, honey on white bread, bland soups (for example, “chicken with stars”) rice, and mashed potatoes.

For babies, start with foods such as applesauce, strained bananas, and rice cereal. If your baby only takes formula, give 1 or 2 ounces less per feeding than usual.

Usually your child can be back on a normal on a normal diet within 24 hours after recovery from vomiting.

Diet for Breast-fed Babies.

The key to treatment is providing breast milk in smaller amounts than usual. If your baby has only vomited once or twice, continue breast-feeding but nurse on only one side each time for 10 minutes. After 8 hours have passed since your baby last vomited, return to both sides.

If vomiting occurs three or more times, put your baby on water or an oral electrolyte solution. As soon as 4 hours elapse without vomiting, return to nursing, but again with smaller than usual amounts for 8 hours.

Medicines. Discontinue all medicines (other than Emetrol) for 8 hours. Oral medicines can irritate the stomach and make vomiting worse. If your child has a fever over 101 degrees or higher, use acetaminophen suppositories. Call our office if your child needs to be taking a prescription medicine.

A medicine that can help settle the stomach (and lessen vomiting and nausea) is called Emetrol. You can buy Emetrol without a prescription. Follow the dosage guidelines on the bottle.

Common Mistakes in Treatment of Vomiting. A common error is to give as much clear fluid as your child wants rather than gradually increasing the amount. This almost always leads to continued vomiting. Keep in mind that Emetrol alone can only help lessen the vomiting somewhat. Diet therapy is the primary approach.

CALL OUR OFFICE

Immediately if:

- Your child does not urinate in more than 12 hours.
- Crying produces no tears.
- Any blood appears in the vomited material and it's not from a recent nosebleed.
- Abdominal pain develops and lasts for more than 4 hours.
- Your child becomes difficult to awaken or confused.
- Poisoning with a plant, bad food, medicine, or other chemical becomes a possibility.
- Your child starts acting very sick.

During regular hours if:

The vomiting continues for more than 12 hours in children under 6 months old, for more than 24 hours in children 6 months to 2 years old, or for more than 48 hours in children over 2 years old.

You have other concerns or questions.