



**PHILIPPINE SOCIETY FOR PEDIATRIC GASTROENTEROLOGY,  
HEPATOLOGY AND NUTRITION (PSPGHAN)**  
A component society of Philippine Pediatric Society, Inc.



**GUIDELINES FOR HEALTH CARE PROFESSIONALS ON THE TREATMENT OF  
ACUTE GASTROENTERITIS WITH NO SIGNS OF DEHYDRATION**

**Symptoms:**

- Diarrhea (loose, watery, NON-BLOODY stools) 3 or more times in a 24-hour period, with a duration of less than 14 days
- No signs: patient is well, alert, drinks normally, with non-sunken eyeballs, with tears, with normal respiration, skin goes back quickly, CRT <2 secs, with normal urine output

**Management:**

1. **FEEDING:** Diet for age. Exclusive breastfeeding is recommended for infants < 6 months old and combined with proper, adequate and safe complementary foods from 6 months to 2 years of age.
2. **FLUIDS:** Give fluids as tolerated. Do not give carbonated (e.g. softdrinks), sweetened (e.g. iced tea, milk tea, artificial fruit juice), caffeinated drinks (e.g. coffee), sports drinks (e.g. Gatorade, Pocari Sweat ), and electrolyte drinks not conforming with the WHO low-osmolarity ORS (e.g. Vivalyte, Vivity) as initial rehydrating solution
3. **ORS:** preparation will depend on the type and brand:  
examples: a. Glucolyte sachet : flavored; 1 sachet to be dissolved in 100 ml of cool boiled water  
b. Hydrite sachet: unflavored (for infants and young children) and flavored;  
1 sachet to be dissolved in 200 ml of cool boiled water
  - for <2 YRS old: 50 -100 mL (<sup>1</sup>/<sub>4</sub> to <sup>1</sup>/<sub>2</sub> cup) after each loose stool
  - for >2 YRS old: 100 mL ( <sup>1</sup>/<sub>2</sub> cup) after each loose stool
  - for >10 YRS old: as much fluids as tolerated
4. **ZINC** (as single preparation and not part of multivitamin preparations)
  - examples: a. E-Zinc drops (10 mg/mL) and syrup (20 mg/5mL),
  - b. Immuzinc drops (10 mg/mL) and syrup (20 mg/5 mL)

Age group	Dose
6 months old and above	drops: 2 ml daily for 14 days (equivalent to 20 mg elemental Zinc) syrup: 5 ml daily for 14 days

5. **ANTIBIOTICS:** NOT to be given unless with comorbidities (pneumonia, sepsis, meningitis)

6. **ADJUNCTS:** (Disclaimer: will not be reimbursed by Philhealth if patient will be confined)

### 6.1. PROBIOTICS

Note: Recommendations based on the 2019 Philippine Clinical Practice Guidelines on the Management of Acute Infectious Diarrhea in Children and Adults developed with DOH.

6.1.1. *Lactobacillus rhamnosus GG* : dose:  $\geq 10^{10}$  CFU/day for 5-7 days

- example : GI Protec 1+ (1B CFU/sachet) - 1 sachet 2x a day for 5-7days

6.1.2 *Saccharomyces boulardii* CNCM I-745: dose: 250-750 mg/day for 5-7 days

- example : Normagut capsule 250 mg/cap

Age group	Dose
2-12 years old	250 mg/day or 1 capsule ( contents only, take off the cap shell for small children) mixed with a glass of water or juice once a day for 5-7 days
>12 years old	250-750 mg/day or 1 capsule once or twice a day for 5-7 days

6.2. **RACECADOTRIL-** given during the first 3 days of watery diarrhea

- example : Hidrasec 10 mg/sachet, 30 mg/sachet, 100 mg/cap

Diatriil 30 mg/sachet

Age group	Dose
Infants 3 months old and above	1.5 mg/kg/dose or 10 mg sachet mixed with milk or water 3x a day until patient has 2 normal stools
Children	1.5 mg/kg/dose or 30 mg sachet mixed with food or water 3x a day until patient has 2 normal stools
Adolescent	100 mg capsule 3x a day until patient has 2 normal stools

**NOTE : INSTRUCT MOTHERS OR CAREGIVERS TO FOLLOW-UP WITH THE DOCTOR IF SYMPTOMS PERSIST OR DO NOT IMPROVE WITHIN 3 DAYS.**

**PREVENTION:**

1. Drinking water should be clean and safe.
2. Wash raw foods. Cook food well. Store foods properly
3. Always practice diligent hand washing, particularly after touching surfaces in public or after going to the toilet. Ideally, use liquid soap in running water, but any soap is better than none. Dry properly after washing. Use of hand sanitizer that contains at least 60 percent alcohol is a reasonable alternative if the hands are not visibly dirty.
4. Hand sanitizers, moist hand wipes or towelettes are not recommended when hands are visibly dirty or greasy.
5. Regularly clean the toilet including the handle and lid. Flush with the lid down.
6. All efforts should be made to get access to clean water, soap and hand-drying materials.
7. Safe stool disposal and hand hygiene should always be practiced.

**DISCLAIMER:** The PSPGHAN is not endorsing any of the brands or companies mentioned in these guidelines. Brands indicated are just examples and do not in any way show our preference.