



Managing Fever and Diarrhoea

**Fever and diarrhoea are
two common childhood
illnesses.**

**This book tells you how to
deal with these illnesses.**

Fever

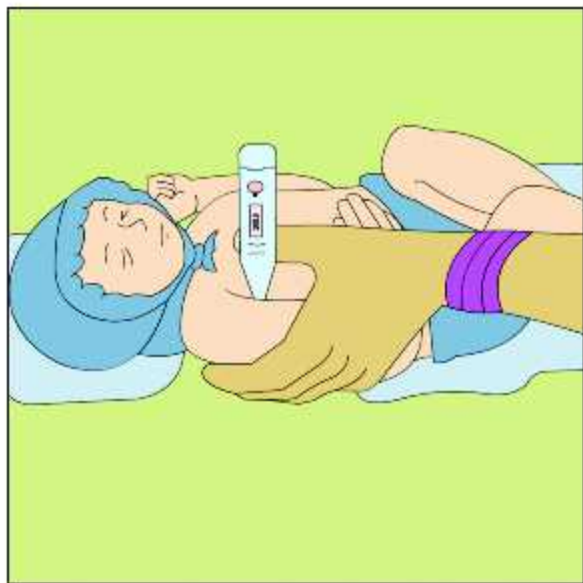


A child with fever may have a simple cough or cold or a viral infection. In such cases, the fever can be treated with home remedies.

Fever may also be a sign of a more serious illness like acute respiratory infection, malaria or meningitis. In such cases, the child should be referred immediately to a doctor.

ASHA could help make out the difference.





Check if the child has fever by measuring temperature. Another way is to feel the child's stomach; if it feels hot, it is an indication of fever. But this is not as reliable as checking with thermometer.





If a child has fever for seven days or more, even if fever is not very high, refer the child to a doctor.





Check if a child with fever has a stiff neck. If the child is not able to bend her/his neck or move it easily, it means the child has a stiff neck. A stiff neck along with fever is an indication of meningitis. Such children also have other danger signs like refusal to feed, fits, loss of consciousness and lethargy. Refer the child to a doctor immediately.



**More than
3 days**



Cough or difficult breathing with fever for more than 3 days, must also be referred.





A child who has fever and lives in a malarial area should have her/his blood tested for malaria.





A child with fever along with any of these general danger signs needs to be referred urgently to a hospital:

- **Not** able to breastfeed or drink fluids
- Vomits everything
- **Has** convulsions
- Is lethargic or unconscious





A child with fever should be given plenty of fluids. Paracetamol, Cotrimoxazole and anti-malarial pills may also be required, depending on the diagnosis. These are provided in ASHA's drug kit.



Managing Fever in a Newborn



Check temperature.

A baby has fever if the temperature is above 99 degree F (37.2 degree C).





If it is summer, check whether the baby has fever or is just overdressed.

Unwrap the baby and ventilate the room.

Also check if there are other reasons (like a fire) why the baby is warm.





Take the baby away from the source of heat.





The baby should then be breastfed.





Check temperature again after 30 minutes.





If temperature is normal, then it means the baby was overdressed.

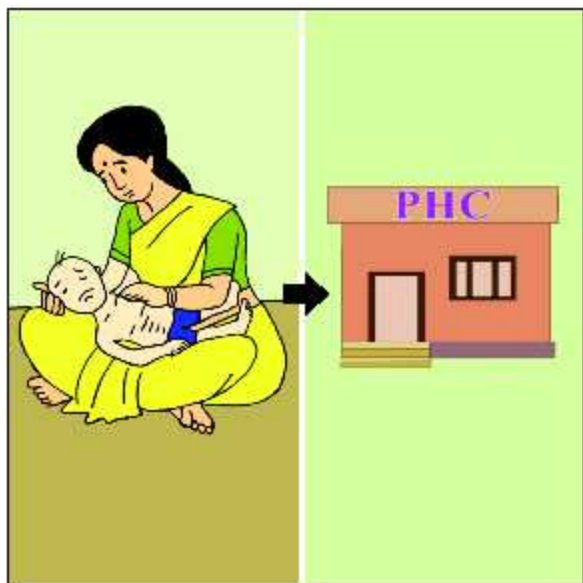




If temperature is still high, then the baby needs to be referred for treatment.



Managing ARI



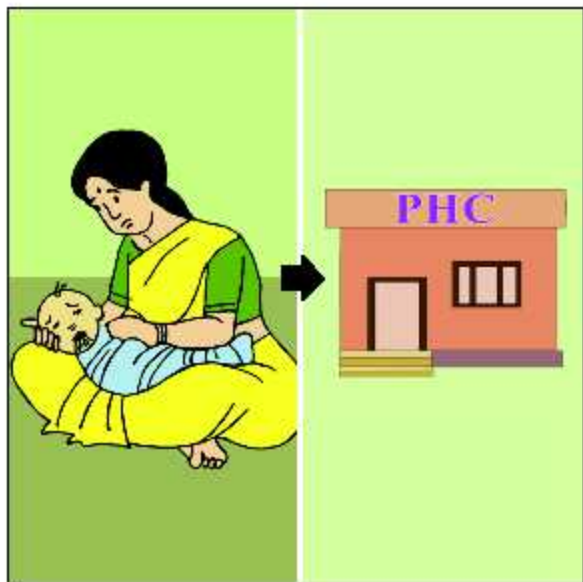
Any danger sign or chest indrawing : Refer urgently to hospital .





Fast breathing: Referral to doctor is first choice. Failing which ASHA can give Cotrimoxazole for 5 days. Follow up after two days. If baby is improving, continue home care and medication. If there is no improvement, refer to a doctor.

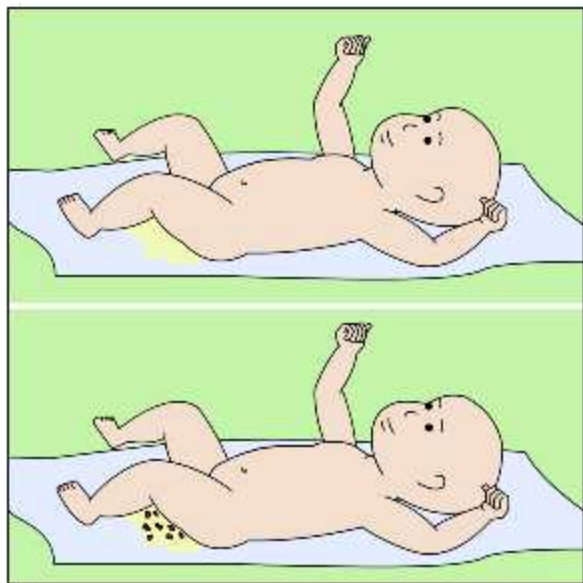




Cough or cold without any danger sign or chest indrawing or fast breathing: **Provide** home care. If cough persists for more than 25 days, referral is required.



Diarrhoea

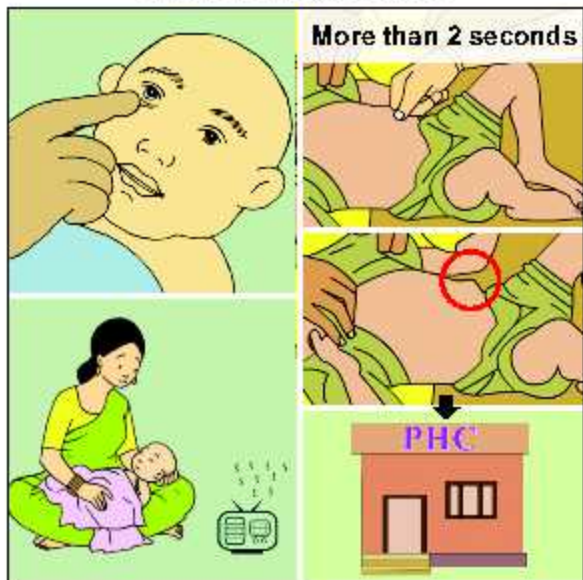


If a child passes more than three stools a day, and the stools are watery, it means the child has diarrhoea. If this persists for 7 days or more, the child needs to be referred to a hospital.

If a child passes blood in the stools, it means the child has dysentery. Such a child should also be referred to a hospital, but treatment can begin at home, with the ASHA's help.



Severe Dehydration



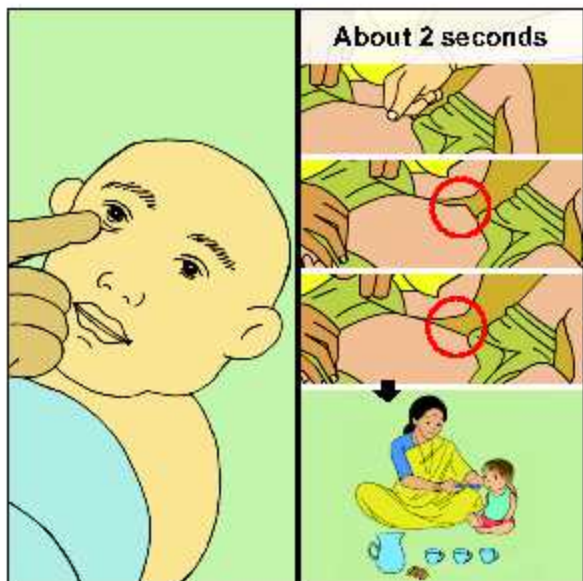
A child with diarrhoea needs to be assessed for dehydration.

If the child has sunken eyes, or is lethargic or unconscious, or is not able to drink fluids without help or is not passing urine, it means the child has **severe dehydration**.

Another way to check this is to pinch the skin of the child's abdomen. If it takes more than two seconds to go back, it means the child is severely dehydrated.

Such a child needs to be referred urgently to a hospital, with the mother giving her/him fluids to sip along the way.





If a child is restless and irritable, or has sunken eyes, or drinks fluids thirstily, it means the child has **some dehydration**. If such a child's skin on the abdomen is pinched, it goes back slowly, in about 2 seconds or so.

In such a case treatment can begin at home, although the child needs to be referred to a hospital if there is no improvement after two days.

If the child passes urine normally and does not show signs of dehydration, she/he can be treated at home.



Home treatment for diarrhoea

**(If the child has diarrhoea and
not dehydration)**

Less than 6 months old



What to feed

If the child is being breastfed, continue breastfeeding, preferably for longer periods.

If the child is less than six months old: In addition to breast milk, give ORS and clean, boiled water.



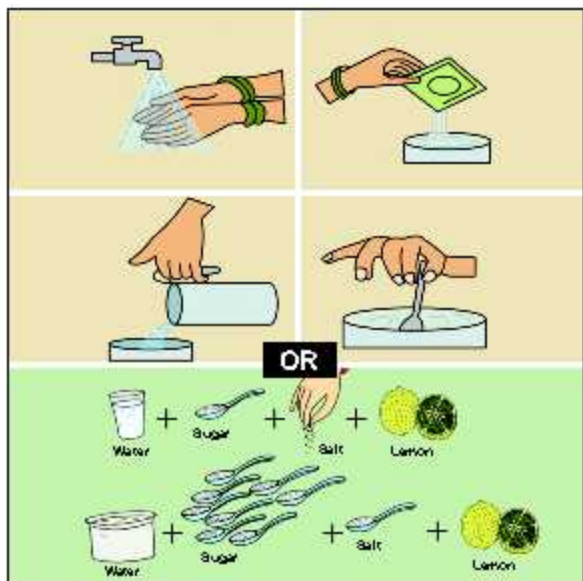
More than 6 months old



If the child is more than six months old: In addition to breast milk, give ORS and other fluids like soups, rice-water, dal-water, narialpani, nimbupani.

The child's normal feeding should be continued. The additional fluids should also be continued until diarrhoea stops.





Making ORS at home

Wash hands with soap.

Pour ORS powder (one packet) into a large vessel.

Measure a litre of drinking water (use a one litre bottle) and pour it into the vessel.

Stir well until the powder is mixed.

If you do not have an ORS packet available readily, add a large pinch of salt and a spoon of sugar to a glass of drinking water (about 200 ml). Stir well. You could also add a few drops of lime juice.

Taste it before you give it to make sure that it is not too salty - like the taste of tears - nor too sweet.





How to feed ORS and other fluids

- Give frequent, small sips from the cup.
- If the child vomits, wait for 10 minutes.
- Then continue, but more slowly.



No Dehydration

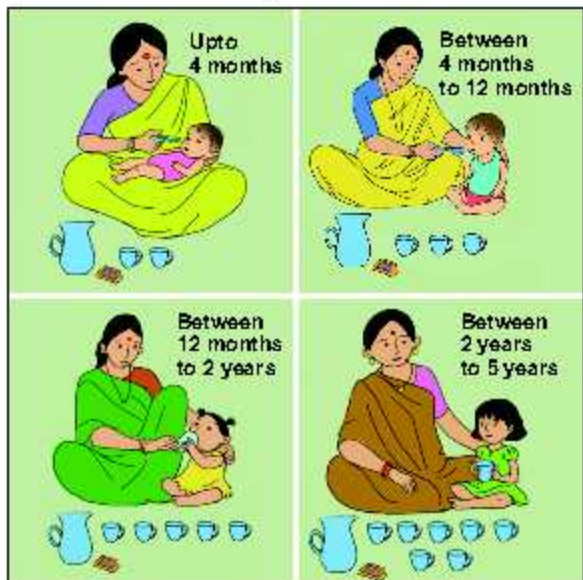


If the child has no dehydration

- If the child is up to two months of age, give five spoonfuls after every loose stool.
- If the child is less than two years old, give about half a cup after every loose stool.
- Older children can have up to half a cup or one cup after every stool.



Dehydration



If the child has some dehydration, then she/he should be given ORS over a four-hour period as follows:

- If the child is up to 4 months of age: at least 2 cups
- If the child is between 4 months and 12 months old: at least 3 cups
- If the child is between 12 months and 2 years old: at least 5 cups
- If the child is between 2 and 5 years old: at least 7 cups





