Vomiting

What is vomiting?

Vomiting is the forceful emptying ("throwing up") of a large portion of the stomach's contents through the mouth. Strong stomach contractions against a closed stomach outlet result in vomiting. In contrast, reflux is the effortless spitting up of one or two mouthfuls of stomach contents that occurs in babies.

What is the cause?

Most vomiting is caused by a viral infection of the stomach or food poisoning from eating poorly refrigerated food. Usually, a child whose vomiting is caused by a virus also has diarrhea. If your child has vomiting without diarrhea and it lasts more than 24 hours, your child may have something more serious.

How long does it last?

The vomiting usually stops in 6 to 24 hours. Changes in the diet can prevent excessive vomiting and dehydration. If your child also has diarrhea, the diarrhea will usually continue for several days.

How can I take care of my child?

- **Offer small amounts of clear fluids for 8 hours (no solid food)**

  Offer clear fluids (not milk) in small amounts until 8 hours have passed without vomiting. For infants less than 1 year old, always use an oral electrolyte solution (such as Pedialyte or the store brand). Spoon or syringe feed your baby 1 to 2 teaspoons (5 to 10 ml) every 5 minutes. Until you get some Pedialyte, give formula by teaspoonful in the same way.

  For a child over 1 year old with vomiting (but no diarrhea), the best fluid is water or ice chips because water can be directly absorbed across the stomach wall. If your child is 2 years old or older water is best, but half-strength lemon-lime soda or Popsicles are also okay. Stir the soda until no fizz remains. However, if the vomiting continues for over 12 hours, switch to Pedialyte.

  Start with 1 teaspoon (5 ml) to 1 tablespoon (15 ml) of the clear fluid, depending on your child's age, every 5 minutes. After 4 hours without vomiting, double the amount. If your child vomits using this treatment, rest the stomach completely for 1 hour and then start over but with smaller amounts. This one-swallow-at-a-time spoonfed approach rarely fails.

- **Offer bland foods after 8 hours without vomiting**

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

  Infants can start with bland foods such as cereal. If your baby only takes formula, give 1 or 2 ounces less per feeding than usual.

Older children can start with such foods as saltine crackers, cereals, white bread, bland soups, rice, and mashed potatoes.

Usually your child can be back 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 vomits once, make no changes. If your baby vomits twice, continue breast-feeding but nurse on only one side for 5 minutes every 30 to 60 minutes. As soon as 4 hours have passed without vomiting, return to regular nursing on both sides.

  Pedialyte is rarely needed for breast-fed babies. If vomiting continues, however, switch to Pedialyte for 4 hours. Spoon or syringe feed 1 to 2 teaspoons (5 to 10 ml) of Pedialyte every 5 minutes. If your baby is urinating less frequently than normal, you can also offer your baby Pedialyte between breast-feedings for up to 24 hours.

- **Medicines**

  Do not give your child any medicines by mouth for 8 hours. Oral medicines can irritate the stomach and make vomiting worse. If your child has a fever over 102°F (39°C), use acetaminophen suppositories. Call your healthcare provider if your child needs to continue taking a prescription medicine.

- **Common mistakes in the treatment of vomiting**

  A common error is to give as much fluid at one time as your child wants rather than gradually increasing the amount. This almost always leads to continued vomiting.

  There is no effective drug or suppository for vomiting. Changing the diet is the best treatment. Vomiting alone (without diarrhea) rarely causes dehydration.

When should I call my child's healthcare provider?

Call IMMEDIATELY if:

- Your child shows any signs of dehydration (such as no urine in over 8 hours, very dry mouth, no tears when crying).
- Your child vomits up blood or something that looks like coffee grounds.
- Your child vomits repeatedly AND also has watery diarrhea.
- Your child has abdominal pain when not vomiting.
- Your child is confused or difficult to awaken.
- Your child starts acting very sick.

Call during office hours if:

- The vomiting continues for more than 24 hours if your child is under age 2 years or 48 hours if over age 2.
- You have other concerns or questions.

Written by Barton D. Schmitt, MD, author of "My Child Is Sick," American Academy of Pediatrics Books.

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Vomiting Diary

Time and Place Date: Time of day: Place (home, school, etc.): People present:				
Description of Vomiting How much (ounces)? Food or mucus? For how long (minutes)? What did it keep your child from doing?				
Triggers for Vomiting Thoughts or stresses before the vomiting (within 1 hour): Feelings (for example, upset or afraid) before the vomiting (within 1 hour): Activities before the vomiting (within 2 hours): Food eaten before the vomiting (within 2 hours):				
Treatment What did you do to help your child feel better?				
Your Observation What do you think caused the vomiting this time?				

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