

Dehydration

Parent information sheet

Welcome to the Southern Adelaide Local Health Network. This information sheet is designed to answer any questions you may have about dehydration in your child.

What is dehydration?

Dehydration occurs when there isn't enough fluid in the body to keep it working properly. The body needs water to maintain body temperature, make body fluids, and for day-to-day functioning.

What causes dehydration?

Children are more likely to become dehydrated:

- after lots of physical activity or exercise
- with severe vomiting or diarrhoea
- if they have a fever
- if they take certain medications, such as diuretics
- if they don't drink enough, especially during times of illness
- if they are younger than six months of age
- in hot weather.
- A lot of sweating

Making sure your child drinks enough water each day can help prevent dehydration. Providing extra drinks of water in hot weather, during and after exercise and during illness is particularly important. If your child loses a lot of body fluids or isn't drinking enough, they might get dehydrated.

Young children and babies are at greater risk of becoming dehydrated than adults. Keeping your child hydrated is always important, but especially when they are unwell.

If your child is very thirsty, they are probably already dehydrated, and the effects of severe dehydration can be serious.

Signs and symptoms of dehydration

If your child is mildly dehydrated, they may have:

- dizziness or light-headedness
- nausea or headaches
- dark yellow or brown urine (wee) – urine should be pale yellow
- fewer wet nappies or nappies not as wet as usual; or older children will not go to the toilet as much
- dry lips, tongue, mouth or throat.

If your child has severe dehydration, they may:

- be extremely thirsty
- lethargic or less active than usual

- pale and have sunken eyes, tears may be absent when crying
- cold – especially their hands or feet
- breathing faster than usual and have a fast heart rate
- irritable, drowsy or confused.
- Urinate less often or have fewer wet nappies
- Lose weight
- Have a coated and dry tongue and mouth

If your child shows signs of severe dehydration go to your closest hospital emergency department.

Infants.

For babies under six months:

You should see your GP if your child is under 6 months and has vomiting or diarrhoea.

For babies over six months:

- If you are breastfeeding your baby, continue to do this but feed more often. You can also give an oral rehydration solution or water for the first 12 hours.
- If you are bottle feeding your baby, replace formula feeds with oral rehydration solution or water for the first 12 hours, then give normal formula in small, but more frequent amounts.

You should take them to the GP if they:

- have been vomiting often, can't keep any fluids down, or have been vomiting for more than 24 hours
- have diarrhoea lasting longer than 2 weeks
- aren't gaining weight or are losing weight because of vomiting or diarrhoea.

Take your child to a hospital emergency department straight away if they:

- have symptoms of severe dehydration – they are not urinating, are pale and thin, have sunken eyes, cold hands and feet, and are drowsy or cranky
- seem very unwell

Older children

For older children (over 10 kg) who are dehydrated, give at least one cup (250 mL) of water (or oral rehydration solution) to drink, every hour for four hours. Give them more than this to drink if they are vomiting or have diarrhoea. Your child may want to drink it all at once or drink smaller sips frequently.

Smaller children will need less to drink than older children.

When to see a doctor

Babies and young children are at greater risk of becoming dehydrated. If your child is under six months of age or has a chronic (long-term) illness, see your GP if you think your child is dehydrated.

If your child shows signs of severe dehydration or you are concerned for any reason, see your GP or go to your closest hospital emergency department.

If your child is unwell, they may need medical treatment to help replace lost fluids. This can involve using a feeding tube that goes into the stomach via the nose, or fluids given directly into a vein through a drip (intravenous or IV therapy).

Care at home for mild dehydration

The best treatment for mild dehydration is to give your child more fluid to drink, such as water or oral rehydration solutions. Gastrolyte, HYDRALyte, Pedialyte are different types of oral rehydration solutions (fluids) that can be used to replace fluids and body salts. These are the best option if your child is dehydrated and can be purchased from your local pharmacy or supermarket. These products might come as premade liquid, soluble tablet, powder or icy poles for freezing. Make sure that you make up the liquid carefully according to the instructions on the packet.

If you can't get oral rehydration fluid, you can use diluted lemonade, cordial or fruit juice.

If you're using a sugary drink, it's important to dilute it – use one part of lemonade, cordial or juice to four parts of water.

You can also give your child their usual milk.

Your child might not want to drink extra fluids. You can encourage them to drink more by giving them drinks with a syringe or spoon or letting them suck icy poles.

If your child is vomiting, it's usually better to offer small amounts of fluid, but more frequently. For example, give your child a few mouthfuls every 10 minutes.

For more information

Womens and Childrens Division

Flinders Medical Centre

Flinders Drive, Bedford Park, South Australia 5042

Telephone: 08 8204 5511

www.sahealth.sa.gov.au/fmc

© Department for Health and Wellbeing, Government of South Australia.

Reviewed August 2023. Next review August 2026.

If you have a breastfed baby, keep breastfeeding but feed more often. You can give your child extra oral rehydration fluid between feeds.

The child can return to their normal diet once they are no longer dehydrated. Keep giving extra fluids if your child's vomiting or diarrhea continues.

What and how much should my child drink?

Water is the best drink for children. Avoid sports drinks, fruit juices, soft drinks and flavoured mineral waters since they all contain sugar and are acidic, which can lead to tooth decay.

The recommended daily intake of water for children is:

- 4 to 8 years old: 5 cups
- 9 to 13 years old: 5 to 6 cups
- 14 to 18 years old: 6 to 8 cups

Children need extra water when they are exercising or in hot climates. Remember that children need to drink whatever the weather, even in the winter. Encourage your child to drink before, during and after physical activity even if they aren't thirsty, as this can help prevent dehydration.

Key points to remember

- Young children and babies are at most risk of becoming dehydrated.
- If your child is very thirsty, they are probably already dehydrated.
- Mild dehydration can be treated at home by giving oral rehydration fluids or water. Do not give drinks that are high in sugar.
- If your child show signs of severe dehydration, see your GP or go to your closest hospital emergency department.

For more information

See your family doctor

For 24 hour health advice call - Health direct Australia

1800 022 222

Parent Helpline 1300 364 100

Local emergency department

Adapted from

Kids health information fact sheet (RCH) Dehydration

Raising children network – Dehydration

Uptodate -dehydration in children

Health direct – Hydration tips for children



This document has been reviewed and endorsed by consumers.



Health
Southern Adelaide
Local Health Network