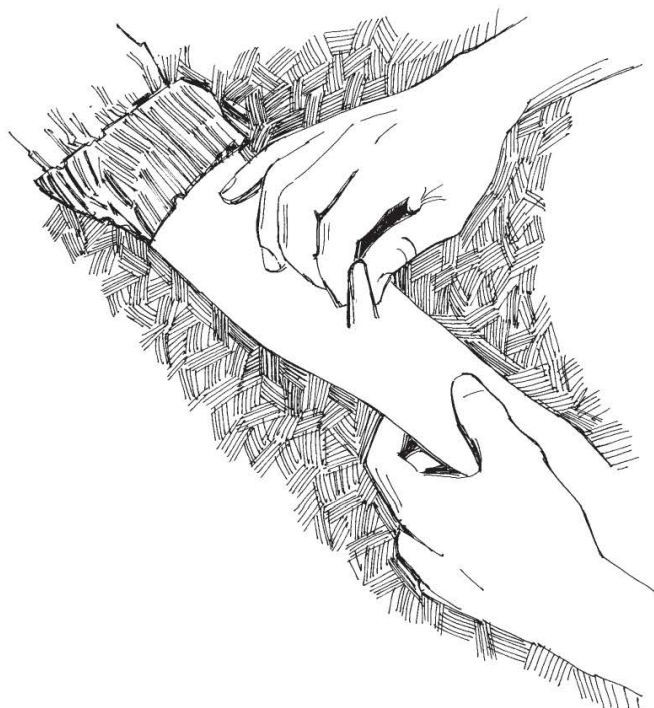


Overview

- Patients with diarrhoea, especially children, can lose a lot of fluid from their bodies and suffer dehydration.
- Dehydration can cause very severe illness and sometimes death, especially in association with acute watery diarrhoea and cholera.



A dehydrated child. Skin pinch.

How to assess whether a patient has dehydration, and its extent:

Dehydration stage	Signs	Treatment
No dehydration	Skin recovers its shape normally when pinched; thirst has subsided; urine has been passed; the pulse is strong.	Oral rehydration solution (ORS) at home; zinc supplements for children up to 15 years of age.
Moderate dehydration	Restlessness and irritability; sunken eyes, dry mouth and tongue, increased thirst; skin recovers its normal shape slowly when pinched; reduced urine; decreased tears; depressed fontanels (soft membranes on head) in infants.	ORS and very close surveillance; zinc supplements for children up to 15 years of age.

Dehydration stage	Signs	Treatment
Severe dehydration	Lethargy or unconsciousness; very dry mouth and tongue; skin recovers shape very slowly when pinched (“tenting”); weak or absent pulse; low blood pressure; minimal or no urine.	In a health facility or in a hospital: IV therapy plus antibiotics plus ORS; zinc supplements for children up to 15 years of age.

After the assessment, and according to the degree of dehydration, the following actions should be taken:

- Diarrhoea patient
 - No dehydration → Give ORS and zinc. (Action tools 9 , 10 , and 11)
 - Some dehydration → Give ORS and zinc. (Action tools 9 , 10 , and 11)
 - Severe dehydration → Refer immediately to health facility or hospital. (Action tool 4)

Community messages

See the following community messages to support assessment of dehydration:

- 1 - Preparing and giving oral rehydration solution (ORS)
- 3 - Breastfeeding