Use of Intravenous Therapy in the Management of Acute Gastroenteritis in Young Children: A Retrospective Analysis

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Abstract
Oral rehydration therapy is underused in the management of dehydration secondary to acute gastroenteritis in young children in developed countries. We have reviewed the situation in a regional hospital. Methods: Medical records of 413 young children admitted because of acute gastroenteritis were reviewed. Comparison was made between the group that was given intravenous fluid (IV) and the group that was not (No-IV). Results: 241 (58.4%) patients received intravenous therapy. Vomiting and decreased oral intake before admission were factors most commonly found in the group who had been given intravenous fluid (85% & 81% vs 52% & 58% respectively, P<0.001). Electrolytes abnormalities were found in 14 patients (3.6%). The duration of hospital stay was significantly longer (4.12±1.61 days vs, 3.48±1.4 days P<0.001) in the group who had received intravenous fluid. Conclusion: Acute gastroenteritis in our locality was commonly managed with intravenous fluids. Vomiting and decreased oral intake are major determinants for starting intravenous fluid. Routine blood examination was of little value in majority of patients admitted for acute diarrhoea and the patients given intravenous therapy had a longer duration of hospital stay. (HK J Paediatr (new series) 2005;10:10-14)

Key words: Children; Gastroenteritis; Oral rehydration