

PATIENT INFORMATION · URGENT CARE

Diarrhoea and vomiting *gastroenteritis, and getting fluid back in*

Gastroenteritis is an infection of the gut, almost always caused by a virus. It is unpleasant and usually short. Nothing shortens it — the treatment is replacing the fluid you are losing and waiting it out. Vomiting typically settles within one to two days, diarrhoea within five to seven.

Seek medical help urgently if you or your child have

- **blood in the stool or vomit**, or black tarry stools;
- **severe or constant abdominal pain**, particularly if it is worse in one place;
- **been unable to keep any fluid down for more than 12 hours** in an adult, or 6 hours in a child;
- signs of **significant dehydration** — no urine for 8 to 12 hours, dizziness on standing, sunken eyes, drowsiness or confusion;
- a **high fever with shivering**, or a stiff neck, headache and dislike of light;
- diarrhoea lasting **more than a week**, or vomiting more than two days.

Contact us sooner rather than later if the person affected is a baby under one, is elderly or frail, is pregnant, has a weakened immune system, has recently taken antibiotics, has inflammatory bowel disease or diabetes, or has recently returned from travelling abroad. In an emergency call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

Getting fluids in

This is the whole of the treatment. Someone who stays hydrated recovers at home; someone who does not ends up on a drip.

- **Little and often beats large drinks.** A few sips every five to ten minutes stays down when a full glass will not. Use a spoon or syringe for a small child.
- **Oral rehydration sachets** from a pharmacy are better than water alone, because they replace salts and sugar in the proportions that help the gut absorb fluid. They are particularly worth using for children, older people, and anyone losing a lot.
- **Keep breastfeeding or bottle feeding** a baby as normal, and offer extra fluids between feeds.
- **Eat when you feel able.** There is no need to starve yourself or stick to dry toast — eat what appeals, in small amounts. Children should go back to their normal diet as soon as they want it.
- **You do not need to avoid milk or dairy** unless it clearly upsets you.

Helps

- Water, oral rehydration solution, diluted squash.
- Rest, and staying near a bathroom for the first day.
- Paracetamol for fever or aching.
- Washing hands with soap and water after every trip to the toilet.

Avoid

- Fruit juice and fizzy drinks — the sugar concentration can worsen diarrhoea.
- Anti-diarrhoeal medicines such as loperamide if there is blood in the stool or a high fever. Never give them to children.
- Alcohol, caffeine and very fatty or spicy food until you are better.
- Preparing food for other people while you are unwell.

Antibiotics are not the answer. Almost all gastroenteritis is viral, and antibiotics do nothing for it. They are occasionally needed for a specific bacterial or parasitic infection — usually after travel abroad, or where a stool sample confirms it — but taking them unnecessarily can prolong the illness and cause a further, harder-to-treat bowel infection.

48

Stay away from work, school or nursery until 48 hours after the last episode of diarrhoea or vomiting. This is the single most effective thing you can do to stop it spreading. If you are a food handler, a healthcare or care worker, or work with young children or vulnerable adults, this is a requirement rather than a suggestion — tell your employer.

Stopping it spreading at home

- **Wash hands with soap and warm water** after using the toilet, before preparing food, and after caring for someone who is unwell. **Alcohol hand gel does not kill norovirus** — soap and water is essential, not optional.
- Clean toilet seats, flush handles, taps, door handles and surfaces daily with a bleach-based cleaner.
- Do not share towels, flannels, cutlery or cups.
- Wash soiled clothing and bedding separately on a hot wash.
- Avoid swimming pools for two weeks after the diarrhoea has stopped.

Signs of dehydration to watch for

In adults: thirst, dark strong-smelling urine, passing urine less often, dizziness or lightheadedness on standing, tiredness, dry mouth.

In children and babies: fewer wet nappies than usual, no tears when crying, a dry mouth or tongue, sunken eyes, a sunken soft spot on a baby's head, unusual sleepiness or floppiness, cold hands and feet.

Book an appointment if you are not improving after a few days, you cannot keep fluids down, you have recently returned from abroad, you need a stool test, or you need a fitness-to-work letter. We can assess hydration, take samples, prescribe where it is genuinely indicated, and arrange intravenous fluids if you need them.

Seen today, not next week

Same-day appointments most days, seven days a week, 9am–7pm, on Whitechapel Road.

Book an appointment

or call 020 7916 0029

Where to get help

Tower Bridge Hospital London

97–99 Whitechapel Road, London E1 1DT

020 7916 0029

WhatsApp **07903 284 189**

info@mhwclinic.co.uk

Open 7 days, 9am–7pm

In an emergency

Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency

Call NHS 111 or visit 111.nhs.uk.

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This leaflet is based on current NHS, NICE and UKHSA guidance on gastroenteritis and infection control. It is general information and does not replace advice from a clinician who has examined you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.

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