Avoiding and Dealing with Diarrhea and Constipation

(Adapted from: http://www.cdc.gov/ncidod/dbmd/diseaseinfo/travelersdiarrhea_g.htm#treatment)

**DIARRHEA: CAUSES, PREVENTION AND TREATMENT**

**Who gets diarrhea?**
Each year about 5% of all the mission trip participants develop diarrhea. The illness is typically self-limited, usually does not require drug therapy and does not limit participation in group activities. The primary cause appears to be viral infection, presumably passed by hand-to-hand contact.

**What are common symptoms?**
The diarrhea is typically characterized by increased frequency and decreased consistency of bowel movements. Other symptoms may include nausea, vomiting, abdominal cramping, bloating, fever, urgency, and malaise. Most cases resolve in 1-2 days without treatment.

**What preventive measures are taken?**
- Group members can minimize their risk of diarrhea by following these preventive measures:
- Always wash hands with soap and water and/or use anti-bacterial hand-sanitizer before consuming food. It is preferable to scrub for 20 seconds to get the benefit of either method.
- Avoid eating foods not prepared by FFP-designated personnel.
- Do not drink beverages where you do not know that the source was purified water/ice.
- Do not purchase food from street vendors unless cleared by an experienced FFP staff member.

**What can be considered safe?**
- Packaged foods (e.g. candy bars, chips) usually are safe.
- Bottled water, bottled carbonated beverages, hot tea or coffee.

**Is prophylaxis to prevent diarrhea needed or recommended?**
- For most people, nothing is needed, other than following the precautions listed above.

**When and how is the diarrhea treated?**
Since the diarrhea is usually a self-limited disorder, resolving without specific treatment, in most cases, only oral rehydration is needed to replace lost fluids. Clear liquids are routinely recommended for adults. Travelers who develop three or more loose stools in an 8-hour period—especially if associated with nausea, vomiting, abdominal cramps, fever, or blood in stools—may benefit from antimicrobial therapy. Antibiotics usually are given for 3-5 days. Currently, ciprofloxacin 500 mg twice a day for 3-5 days is the recommended treatment. If diarrhea persists despite therapy, members should be evaluated by a doctor and treated for possible parasitic infection.

**When should anti-motility agents not be used to treat diarrhea?**
In general, use of anti-motility agents such as lomotil and Imodium is not recommended. These agents do not affect the underlying disease process. They should never be used by persons with fever or bloody diarrhea, because they can increase the severity of disease by delaying clearance of causative organisms. Adverse reactions have been reported as a result of using these medications.
CONSTIPATION: CAUSES, PREVENTION AND TREATMENT

While we worry most about traveler’s diarrhea, the fact is that more team members have a problem with constipation.

To avoid constipation, try the following:

- Don’t use medicines for diarrhea unless you actually have diarrhea. The flushing action of the condition removes the disease-causing organisms from your system, and a little bout of diarrhea is usually best left untreated.
- A day without a bowel movement is no cause for concern. When you feel the urge, it is important to respond promptly. Don’t postpone it if you can.
- Lack of adequate fluid intake, and a diet high in starch and processed foods can lead to hard, infrequent stools. To prevent the discomfort associated with constipation, drink plenty of water even when not thirsty, and eat fruit and fiber every day.
- If you do become constipated, increase the fruit and fluid intake. Pineapple and papaya often help relieve constipation. If you are prone to this condition, bring your own high-fiber snacks, such as granola bars, fresh or dried fruit, or dry cereal, to munch on between meals or medication for use during the trip.

Medicinal Treatment of Constipation

- If you develop a stomachache and or headache that you believe are or may be associated with constipation, a laxative may be beneficial.
- Bisacodyl 5mg tablets are a useful alternative if increasing water, fruit and fiber do not work. Bisacodyl is sold under the trade names Dulcolax, Fleet, Alophen, Correctol, and Carter’s Little Pills.
- Adults and children over 12 years of age can take 1 to 3 tablets in a single daily dose for up to 7 days, 30 to 60 minutes before your normal bedtime in order to produce a bowel movement in the morning.
- If this is the first time you are taking this product, we recommend taking 1 to 2 tablets in a single daily dose. With experience, you may increase your daily dosage to 2 or 3 tablets, if needed.
- Secondary options in the Dominican Republic are: Fisiolax or Copalax 10mg tablets or capsules. Take one before bedtime. it may be repeated up to 3 nights in a row.