

Tamang Sagot for PhilHealth

Circular No. 1, series 2016

Policy statements on the **Diagnosis and Management of Acute Gastroenteritis** as reference by the Corporation in ensuring quality of care

1. What is Acute Gastroenteritis (AGE) ?

Acute gastroenteritis or diarrhea is defined as a decrease in stool consistency (loose or liquid) and/or increase in frequency of evacuation 3 or more times in 24 hours with or without vomiting or fever, usually lasting for 7 days but not more than 14 days.

2. Is the policy statement applicable to children and adult? Yes

3. What are the recommended diagnostic tests for AGE?

- **Stool examination with or without stool culture and sensitivity**
 - for acute bloody diarrhea
- **Diagnostic work-up in chronic conditions:**
 - malignancies
 - inflammatory bowel disease
 - bloody diarrhea unresponsive to initial empirical antibiotic treatment,
 - outbreaks or epidemics and other immunocompromised hosts.
- **Serum electrolytes for hospitalized patients**
 - If patient's history and physical examination are inconsistent with the diarrheal illness and hydration status of the child.
 - If patient started on parenteral fluids and symptoms of electrolyte imbalance/s after hydration are still present.
 - Guidance to clinicians on the rate of intravenous hydration
 - Patients with anuria, undernutrition, seizures or ileus.

4. What are the recommended indications for hospital admission?

- Patients with severe dehydration, as well as patients who remain to have some dehydration despite initial treatment and any child with bloody diarrhea and severe malnutrition
- Patients who are in shock, with neurological abnormalities, intractable or bilious vomiting, failure of oral rehydration at home or the emergency room, or suspected surgical conditions
- Infants less than six (6) months of age, regardless of hydration status
- Children with rapid stool losses of more than 15-20 ml/kg/hour

5. What is the recommended length of stay (LOS) for patients with moderate or severe diarrhea?

- At least 3 days (72 hours), otherwise, the claim shall be denied.

6. What are the recommended treatment for AGE?

- **Oral Rehydration Solution** (ORS) and IV fluids
- Intravenous rehydration for children with severe dehydration
- **Zinc supplementation** at a dose of 10-20 mg per day may be given for 10-14 days to all children

Malnourished children or children who develop diarrhea during or shortly after measles may be given **oral vitamin A** at once and again the next day at the following doses:

- 200,000 units/dose for age 12 months to 5 years
 - 100,000 units/dose for age 6 months to 12 months
 - 50,000 units for age less than 6 months
- **Antimicrobials (refer to Annex A)** for the following conditions:
 - Cases of bloody diarrhea (dysentery)
 - Suspected cases of cholera with severe dehydration
 - Laboratory proven, symptomatic infection with *Giardia duodenalis*
 - Diarrhea associated with another acute infection (eg, pneumonia, UTI)
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7. Are anti-diarrheal” drugs indicated for acute diarrhea?

No, they have no proven benefit for acute diarrhea, such as adsorbents, antimotility and products combined with adsorbents, antimicrobials, antimotility drugs.

Annex A. Antimicrobials used to treat specific causes of diarrhea (Adapted from WHO, 2005)

| ANTIBIOTICS | | DOSE, FREQUENCY, DURATION |
|---------------------------|---------------|---|
| Cholera | | |
| Antibiotic of choice | Doxycycline | Adults: 300 mg once |
| | Tetracycline | Children: 12.5 mg/kg 4 times a day x 3 days Adult: 500 mg 4 times a day x 3 days |
| Alternative | Erythromycin | Children: 12.5 mg/kg 4 times a day x 3 days Adults: 250 mg 4 times a day x 3 days |
| Shigella dysentery | | |
| Antibiotic of choice | Ciprofloxacin | Children: 15 mg/kg 2 times a day x 3 days Adults: 500 mg 2 times a day x 3 days |
| Alternative | Ceftriaxone | Children: 50-100 mg/kg once a day IM x 2-5 days |
| Amoebiasis | | |
| Antibiotic of choice | Metronidazole | Children: 10 mg/kg 3 times a day (10 days for severe disease) Adults: 750 mg 3 times a day x 5 days (10 days for severe disease) |
| Giardiasis | | |
| Antibiotic of choice | Metronidazole | Children: 5 mg/kg 3 times a day Adults: 250 mg 3 times a day x 5 days |