

Viral Gastroenteritis (Stomach Flu)

Brown Health Services Patient Education Series

What is viral gastroenteritis?

Commonly referred to as “Stomach flu” or a “stomach bug,” viral gastroenteritis is a self-limited infection of the stomach and intestines caused by a virus.

While other viruses (rotavirus, adenovirus) can cause gastroenteritis, norovirus is the culprit the majority of the time in adults and children. Isolated gastroenteritis cases are common and occur sporadically any time of year, but can sometimes occur in a more “epidemic” pattern with virus rapidly spreading to others, including on college campuses. Good hand hygiene is essential to limit spread.

Viral stomach flu usually lasts 12 - 60 hours, and can often be self-managed by following these guidelines, including the gastro diet.

Gastroenteritis cases arising after travel may involve different organisms, bacterial, viral, parasitic, and are managed case by case depending on history.

Bacterial gastroenteritis may also occur outside of the context of travel, for example from eating contaminated foods (salmonella, campylobacter). Initially treatment is the same as for viral stomach flu, but if your symptoms are unusual or prolonged, your provider may consider tests to rule this out as a cause of your symptoms.

How is it transmitted?

Gastrointestinal (GI) viruses are spread primarily by touching another infected person, food,

water or surface contaminated with the virus from an infected person’s stool. Less often, inhaling droplets in the air when someone is vomiting can infect others.

The incubation period is typically 24 - 60 hours.

To prevent the spread:

- wash hands frequently with soap and water or using alcohol-based cleansers
- limit contact with others while sick
- do not share food, drinks, and utensils
- avoid food preparation.

What are the symptoms?

Symptoms often have a sudden onset:

- Diarrhea (stools which are loose, watery, 3 or more times per day)
- Vomiting/Nausea/Loss of appetite
- Stomach cramps
- Headache/ Muscle aches
- Fatigue
- Low grade fever

When should I be concerned about my symptoms?

The vast majority of time in healthy young adults viral gastroenteritis is a very unpleasant but brief illness. However, dehydration is a potentially serious complication of stomach flu. It can occur if your body loses too much fluid because you keep vomiting or having diarrhea. If you are severely dehydrated, you may need to be given fluids intravenously (IV). Note that while stomach flu rarely lasts longer than 1 to 3

days, it may be 1 to 2 weeks before your bowel habits return completely to normal.

Call Health Services if you are not improving over time as expected or any of the symptoms below which may indicate dehydration, other complications, or a cause other than viral infection:

- Blood in your stool
- High fever (101 degrees F / 38.3 degrees C or more)
- You are very lightheaded or dizzy when standing
- Feel as if will faint/have fainted
- Confusion
- Not putting out urine
- Diarrhea over 10 stools per day or persistent after 3 days
- Vomiting that won't stop (even when you have rested from taking in fluids/food)
- Severe or localized abdominal pain

How is viral gastroenteritis diagnosed?

Your medical provider will ask you questions and examine you. It is rare that lab tests are required unless there are alarming symptoms, significant dehydration, a history of travel, or symptoms not improving over time.

How should I take care of myself?

- If vomiting, initially REST the stomach by having nothing to eat or drink for 2 hours after vomiting.
- Two hours after vomiting stops, you may suck on hard candy, a popsicle or ice chips.
- Next drink just small frequent sips of clear liquids (see GI diet) every 10 to 15 minutes. Drinking too much at once, even an ounce or two, may cause more vomiting.
- When you can drink clear fluids without vomiting, you will slowly advance the GI diet to include soft bland foods that are easy to digest.

Can medicines help ?

If you have fever, headache, or muscle aches, acetaminophen may help - 2 regular strength (325 mg each) pills every 4 hours. Avoid ibuprofen and aspirin as these may make your symptoms worse if taken on an empty stomach.

- Usually, following the GI diet is often all that is needed to settle your stomach in a short time frame.
- For severe nausea and vomiting your provider may consider a short course of an anti-nausea medicine (Ondansetron/ Zofran).
- Non-prescription loperamide (Imodium) can be very effective for diarrhea with cramping, but should not be used if there is fever or bloody stool. Imodium does not "cure" the diarrhea, but acts as a chemical cork, and is primarily useful if there is a period of time when it is necessary to avoid using the toilet.
- Pepto-Bismol OTC is also used for diarrhea, in pill or liquid form. It can turn tongue and stools black; a harmless and transient side effect.
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Managing Stomach Flu on Campus at Brown

Sickness Support

- On the Student Support Dean website select [Sickness Support](#). The Sickness Support form is a google form students can complete to request a Dean's Note for academic flexibility due to illness.

Or

- On the Brown Health Services home page select [Report Illness to Support Deans](#)

***See next page for guidelines on what to eat and drink**

Gastroenteritis Diet: What Do I Eat and Drink?

In general:

- It is OK to sip water initially, but if you have been vomiting frequently, you must replace sodium, potassium that are lost when you vomit.
- Fluids that predominantly contain sugar do not promote rehydration adequately, including many sports drinks which are marketed as restoring minerals. Oral rehydration solutions/powders (such as pedialyte) or other salty fluids are preferred to prevent dehydration.
- Chilling the liquids may help you keep them down. Avoid liquids that are acidic (such as orange juice), caffeinated (such as coffee), artificially sweetened, or have a lot of carbonation.
- Do not drink milk until diarrhea is gone as you can be lactose intolerant temporarily.
- Avoid foods that are acidic, spicy, fatty, or fibrous (meats, coarse grains, legumes, raw vegetables), and dairy products.
- When food from one step is tolerated, go to the next step.
- Progression through the steps may be rapid, from one meal to the next as you feel better; most people are back to a normal diet in 2 to 3 days' time.
- If any particular food aggravates your system or makes your condition worse, eliminate this food temporarily.

Avoid entirely until you are feeling better:

- No spicy or fried foods
- No alcohol/caffeine
- No dried peas or beans
- No raw or dried vegetables or fruits (except bananas)
- No coarse grain breads, cereals, or bran
- No milk or milk products (cheese, yogurt, ice cream, or creamy foods)
- No nuts, seeds, coconut, popcorn

- No heavily sugary foods (cake/candy)

Step 1 Choices (asterixed *are most important to include):

- *Clear soups or bouillon, miso broth
- *Oral rehydration solutions such as Pedialyte
- Decaffeinated flat soda (add a little sugar and stir to “de-fizz” it); not diet soda.
- Diluted apple or cranberry juice (not citrus)
- Gatorade/Powerade
- Water/ice chips
- Popsicles/jello
- Plain saltines, soda crackers
- Decaffeinated tea with honey/sweetener
- Rice water (water in which rice has been cooked)

Step 2 choices:

Anything from Step 1 plus:

- Applesauce
- Bananas
- Mashed potatoes
- Rice /plain pasta
- Cereals without milk, such as Rice Krispies, puffed wheat, puffed rice, corn flakes, Cream of Wheat, Farina, Cream of Rice
- Toast (white or light rye bread) with jelly

Step 3 choices:

Anything from Steps 1 and 2 plus:

- Broiled or boiled lean meat, white poultry or fish
- Poached or boiled eggs
- Well-cooked vegetables and fruits without seeds or skins
- Sherbet or sorbet

Source: Up to Date/CDC