

# Diarrhea

## DEFINITION

Diarrhea is diagnosed when stool weight increases by 300 grams a day. This increase is caused by the quantity of water in the stools.

A person has diarrhea if passing soft or liquid stools more than three times per day. Diarrhea can also be accompanied by cramps along with irritation around the anus. Sometimes it is also characterized by an urgent need to go to the bathroom, at times leading to fecal incontinence (loss of bowel control).

Diarrhea is considered to be chronic when it persists for more than three weeks.

## WHAT CAUSES IT?

Diarrhea has many causes. There is the actual HIV, other viruses, bacteria, parasites, lactose intolerance (milk and dairy products), bowel or thyroid disease, or a problem with fat absorption.

A number of drugs can cause diarrhea, including HIV drugs such as the viral protease inhibitors Viracept®, Kaletra™, Telzir®, Aptivus®, Invirase®, Norvir®, Prezista® and Reyataz®.

When diarrhea is caused by medication, it begins shortly after the initial doses of the drug are taken.

## WHY TALK ABOUT IT?

It is useful to inform a health professional if you have diarrhea for several reasons, the first being to correctly identify what is causing the diarrhea and determine possible types of treatment.

Since diarrhea can affect your quality of life, it may also decrease your treatment adherence.

Diarrhea can also result in major water and mineral loss. It can also decrease the absorption of your medication and, as a result, its effectiveness.

It is therefore important to not wait to be dehydrated and to have lost weight before seeing your doctor.

## WHAT TO DO?

**Don't give up:** diarrhea is generally worse at the start of treatment and tends to go away after two or three weeks, once the body has grown accustomed to the medication.

**Talk to your pharmacist about it:** changing the time at which the medication is taken and the way it is taken help control diarrhea. For instance, if your medication must be taken with food, maybe you could take it in the middle or end of the meal. Talk to your doctor or pharmacist about it.

**Meeting with a nutritionist** can help you pinpoint the foods that worsen diarrhea and those that help decrease it.

- a) For instance, you may benefit from decreasing your consumption of foods that irritate or stimulate the intestine such as fat, spices, alcohol, tobacco, caffeine, chocolate, very sweet foods and insoluble fibre (found in foods such as wheat bran and whole wheat bread).
- b) Conversely, agents that contain soluble fibre (e.g. psyllium, pectin, oats, bananas, oat bran, white rice, barley) absorb water and can thus help decrease diarrhea.
- c) The nutritionist can also suggest ways to prevent dehydration.
- d) She can also give you tips on how to eat balanced meals and not lose weight.

**Pharmaceutical advice:** there are also products or drugs sold in the drug store to control diarrhea. Examples include calcium supplements, psyllium (Metamucil®), loperamide (Imodium®) and diphenoxylate (Lomotil®, Benefiber®).

Talk to your pharmacist or doctor about when and how you should take them.

## WHEN SHOULD YOU SEE A DOCTOR?

- When diarrhea is chronic (persistent for more than three weeks), or when it is affecting your quality of life.
- When fever is present in addition to the diarrhea.
- When you feel dehydrated, i.e. when you feel thirsty and your mouth is dry, you do not urinate a lot, you feel dizzy, and have trouble remaining standing.
- If you have lost weight due to diarrhea.
- When there is blood in your stools.
- When the diarrhea is accompanied by severe stomach pain.
- If diarrhea occurs after antibiotic treatment.
- If you have recently been on a trip.

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