

LETTERS

INTRAVENOUS FLUID REPLACEMENT

Dangers of overhydration in children

P Janos Baombe *emergency medicine consultant*

Royal Manchester Children's Hospital, Manchester M13 9WL, UK

As opposed to my colleagues who work in developing countries,¹ I encounter the problem of overhydration on almost a daily basis.

Overzealous intravenous fluid replacement therapy is a regular feature, despite recently emerging evidence (ironically coming from developing countries) of potential harm.

The recent FEAST study found that giving children fluids slowly to maintain normal levels, rather than rapid fluid resuscitation, aids recovery more safely and effectively.² There is also ample published evidence of harm.³

These studies have problems related to external validity, but their results suggest that cautious intravenous fluid replacement is preferable to the traditional administration of fluid boluses.

As much as we need to educate patients and families about sanitation and oral rehydration, we need to educate ourselves about a potentially harmful treatment: intravenous fluid replacement therapy.

Competing interests: None declared.

- 1 Parashar UD, Nelson EAS, Kang G. Diagnosis, management, and prevention of rotavirus gastroenteritis in children. *BMJ* 2013;347:f7204. (30 December.)
- 2 Fluid Expansion As Supportive Therapy (FEAST). Publications and references. www.feast-trial.org/publications.
- 3 Maitland K, Kiguli S, Opoka RO, Engoru C, Olupot-Olupot P, Akec SO, et al. Mortality after fluid bolus in African children with severe infection. *N Engl J Med* 2011;364:2483-95.

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