Abstract

Oral rehydration therapy (ORT) has been in the last decades the corner stone of the therapy for diarrheic diseases, this type of treatment produced a great improvement in safety and efficiency in the therapy of diarrheas of diverse etiologies, in all ages, with the only exception of serious dehydration. The therapy of diarrheas with oral rehydration solutions (ORS) has triggered numerous controversies related to the composition of the solutions on the basis of electrolytes content, sodium bicarbonate, osmolality, transporters, and micronutrients. However, the results of the research conducted, in 2001, by the World Health Organization (WHO) and the United Nations International Children’s Emergency Fund (UNICEF), recommend the use of the ORS of reduced osmolality (ORS-R), because this kind of therapy shows a meaningful superiority in the clinical outcome of the patients, when compared with the ORS of standard osmolality (ORS-S). In the text, we describe the physiological basis for oral therapy rehydration, the composition and characteristics of ORS, the clinical evaluation of dehydration, different therapy treatments for hydration in diarrheic disease, and the use of therapy of oral rehydration in malnourished infant.

Keywords

Oral rehydration therapy, reduced osmolality solution, acute diarrhea.