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Headline: [WATCH] How to diagnose & treat cholera: A guide for health workers

Blurb: Health workers, this is your cheat sheet to detecting and treating #cholera in your patients. Watch this video for the details.

Bullets:

- Health workers in all South Africa's clinics and hospitals should keep their eyes peeled for signs of cholera in their patients, according to the health department.
- Not all people with cholera will experience nausea, but any child or adult who has watery diarrhoea could be infected and should be treated quickly.
- This short video pulls together expert tips to help doctors and nurses detect the disease. You'll also find tips for which medicines to use and which to avoid.

Byline: Joan van Dyk

The health department says health workers in all hospitals and clinics in South Africa should be on the lookout for signs of cholera.

SA is having its first cholera outbreak in 14 years.

How will I know when a patient has cholera?

Any child or adult who has watery diarrhoea could have cholera.

Patients may also be vomiting, but not everyone experiences this.

What does watery diarrhoea look like?

- Lasts less than 7 days
- No blood
- May be slightly slimy (contain mucus)
- Three or more loose stools a day

Red flags to look out for

Watery diarrhoea is rare in adults, so this would be a strong sign to suspect cholera infection, according to infectious diseases expert Jeremy Nel of Wits University.

If someone's stool is so pale that it resembles the milky colour of water that runs off cooked rice — called rice water stool — it could be a sign that the person is already very ill, needing help urgently.

In such a case, a health worker has to act fast. Dehydration can be quick and deadly at this point.

What should I do if I think my patient has cholera?

Start treatment immediately. Don't wait for a lab test to confirm your suspicions.

How should health workers help patients?

1. Check the patient's dehydration levels every 15 to 30 minutes. The drugs and dosages you should use depend on how dehydrated the person is. The National Institute for Communicable Diseases website has detailed instructions to help you.
2. Do antibiotics work? Yes. The strain of cholera that's causing South Africa's outbreak can be treated with ciprofloxacin.
3. Who should get ciprofloxacin? Hospitalised cholera patients, people who don't respond to oral rehydration treatment within four hours, patients who pass one watery stool an hour during the first four hours of treatment, pregnant women and people with HIV.
4. Children younger than five years should get a zinc supplement.
5. Make sure patients eat as soon as they can.
6. If possible, cholera patients should use a separate toilet in hospital to cut the chances of others becoming infected.

What about anti-diarrhoea medicines?

Do not use drugs that stop diarrhoea, for instance Imodium. These medicines won't work and they could make your patient's symptoms worse and lead to nausea. Instead, Imodium works at [stopping less severe diarrhoea](#) than what cholera patients experience.

When can I discharge a patient?

They're no longer dehydrated

They have a normal pulse and thirst

Their eyes aren't sunken

Their diarrhoea is less frequent

When you pinch their skin between your fingers, it goes back to its normal state quickly

Sources:

https://www.nicd.ac.za/wp-content/uploads/2023/05/Cholera-Diagnosis-and-Case-Management_v2_22-May.pdf

<https://bhekisisa.org/health-news-south-africa/2023-05-23-live-what-you-need-to-know-about-sa-s-cholera-outbreak>

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