

HiPP ORS 200 Carrot and Rice-based

Dietetic food indicated for the treatment of diarrhoea in infants and toddlers - only in the context of a medical prescription.

- Ready to drink
- Homogenized, sterilized
- Shake well before use, consume cooled
- If closed, the opened bottle can be stored in the fridge for up to 24 hours.
- **Packing unit:** 6 bottles à 200 ml
- Makes treatment of diarrhoea easy even when **travelling** and on **holidays**.
- **Recommendation:** originally sealed and unused bottles can be stored and used immediately if diarrhoea recurs.

Composition: 100 ml HiPP ORS 200 contains

Energy	88 kJ/21 kcal	Fat	0,1 g
Protein	0,3 g	Fibres	1,0 g
Carbohydrates	4,2 g	Sodium	120 mg
- of which:		Potassium	98 mg
Fructose*	0,5 g	Chloride	160 mg
Glucose	1,2 g	Osmolarity	240 mosm/l
Saccharose*	0,8 g	pH-value	5,20
Starch	1,7 g		

* from carrot

Ingredients: Water, carrots (26%), rice (2%), glucose syrup, iodized table salt, sodium citrate, potassium citrate, acidity regulator citric acid.

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For the most valuable in life.

ORS 200

Carrot and Rice-based

(Oral Rehydration Solution)

helps in case of diarrhoea · ready to drink



for infants and toddlers
from 4 months*

- ✓ without added lactose
- ✓ without added milk protein
- ✓ gluten-free

*In certain special cases and in combination with a doctor's prescription, HiPP ORS 200 may be used before the completed 4th month.

Dietetic food for special medical purposes
Only available in pharmacies!

Directions for Use

Indicated for dietetic treatment of diarrhoea in infants after the completed 4th month and toddlers (in certain special cases and in combination with a doctor's prescription, HiPP ORS 200 may be used before the completed 4th month)

HiPP ORS 200 is intended for natural treatment of diarrhoea. Diarrhoea depletes the body of fluids and important minerals; HiPP ORS 200 immediately helps to replenish these lost substances and promotes early realimentation. This way, dehydration of the body and circulation problems can be avoided. The combination of carrots, rice and minerals in HiPP ORS 200 makes it possible to supply the body with easily digestible nutrients from the very beginning of the treatment. Thus, the intestinal flora will be restored quickly.

IMPORTANT NOTICE: In infants and toddlers, even light diarrhoea may lead to serious illness. This is why in case of diarrhoea it is always necessary to consult a doctor. If your child has recurring bouts of vomiting and if treatment with HiPP ORS 200 does not bring any relief in terms of diarrhoea bouts after at least 8 hours, a doctor must be consulted again!

1. Fluid and Mineral Replacement (rehydration) during the first 3–4 hours:

Unless prescribed otherwise, infants and children are given about 10 ml per body weight and percent dehydration:

- **In the case of minimal dehydration** (loss of up to 3% of the body weight): HiPP ORS 200 in a quantity of 20-30 ml/kg body weight within 3-4 hours.
- **In the case of mild to moderate dehydration** (loss of 3-8% of the body weight): oral administration of HiPP ORS 200 in a quantity of 30-80 ml/kg body weight in 3-4 hours.

In a child weighing 10 kg with a 5% loss in body weight this equals approx. 500 ml HiPP ORS 200 given over 3 to 4 hours, i.e. 125-165 ml/hour.

Breastfed infants should continue to be breastfed ad lib from the beginning in parallel to the administration of HiPP ORS 200. Between breastfeeds, HiPP ORS 200 is given in small portions.

It is best if HiPP ORS 200 is given in several small portions, possibly even by the spoonful. When the diarrhoea improves and depending on the child's condition, the quantity of HiPP ORS 200 may be reduced slowly until the diarrhoea has disappeared. In case of persistent diarrhoea, however, a doctor should be consulted again.

Advice on vomiting: If vomiting occurs, the refrigerated HiPP ORS 200 (4 to 8°C) is given in small quantities and at short intervals or ideally repeatedly by the spoonful (e.g. every 5 to 10 minutes 5-10 ml, which is equivalent to about 1 to 2 teaspoons). HiPP ORS 200 is only suitable as exclusive nutrition during the rehydration phase.

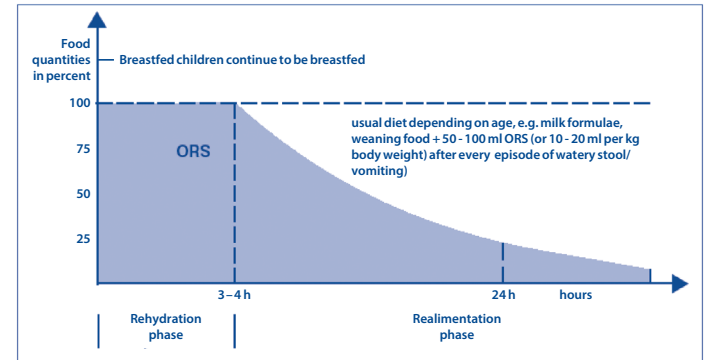
2. Realimentation after 3 to 4 hours

In this phase, feeding with well-tolerated foods is started again:

- **Breastfed infants** continue to be breastfed.
- **Bottle-fed infants in the 1st half year of life** receive their accustomed milk formula again after the rehydration phase, number of bottles a day and drinking quantity as usual. It is not necessary to use lactose-free or lactose-reduced milk formulae.
- **Infants that are already on weaning foods** receive their usual milk formulae and weaning food in full quantity and concentration after the rehydration phase. In severe cases, however, realimentation may also be provided in increments.
- **Older children** initially receive a light diet and teas, starting e.g. with HiPP Baby's First Carrot, HiPP Baby Carrots with Potatoes, HiPP Baby's First Pumpkin, HiPP Pumpkin

with Potatoes, HiPP Baby's First Parsnip, HiPP Baby's First Banana or HiPP Apple and Banana. Juices with a high sugar content (saccharose, fructose, sorbitol) should be avoided. The diet should return to a normal age-adequate diet after two to not more than five days.

In addition to the child's usual foods, **further fluid losses due to diarrhoea and vomiting are replaced by HiPP ORS 200:** 50 to 100 ml after every episode of watery stool/vomiting. In children younger than three months or in the case of massive diarrhoea: 10 to 20 ml/kg body weight/hour until the diarrhoea stops. HiPP ORS 200 contains carrots and rice, providing the child with an easily digestible polymer carbohydrate diet and thus with adequate energy right from the start.



Dietetic therapy: oral rehydration and subsequent realimentation (diagramm)

Contraindications: Acute and chronic kidney failure, metabolic alkalosis, uncontrollable vomiting, clouded consciousness/shock, carbohydrate resorption disorders, bowel occlusion, allergy or intolerance to any of the ingredients contained in the product.