Heat Illness

Dehydration

Children get dehydrated if they do not replace body fluids lost by sweating. Dehydration puts children at risk for more dangerous heat illnesses.

<u>Signs and Symptoms</u>: dry mouth, thirst, being irritable or cranky, headache, seeming bored or disinterested, dizziness, cramps, excessive fatigue, child not able to run as fast or play as well as usual.

<u>Treatment</u>: Move child to a shaded or air-conditioned area. Give him or her fluids to drink.

"When can I play again?" A child may be active again as soon as he or she is symptom-free. However, it's important to continue to watch the child.

Heat Cramps

Heat cramps are a mild heat illness that can be easily treated. These intense muscle spasms usually develop after a child has been exercising for a while and has lost large amounts of fluid and salt from sweating. Children who sweat a lot or have a high concentration of salt in their sweat may be more likely to get heat cramps. Heat cramps can largely be avoided by being adequately conditioned, getting used to the heat and humidity slowly and being sure a child eats and drinks properly. **Signs and Symptoms:** Intense pain (not associated with pulling a muscle), persistent muscle contractions that continue during and after exercise.

<u>Treatment:</u> The child should be given a sports drink to help replace fluid and sodium losses. Light stretching, relaxation and massage of the cramped muscles may help.

"When can I play again?" A child may be active again when the cramp has gone away and he or she feels and acts ready to participate.

Heat Exhaustion

Heat exhaustion is a moderate heat illness that occurs when a child continues to be physically active even after he or she starts suffering from ill effects of the heat, like dehydration. The child's body struggles to keep up with the demands, leading to heat exhaustion.

<u>Signs and Symptoms</u>: The child finds it hard or impossible to keep playing, loss of coordination, dizziness or fainting, dehydration, profuse sweating or pale skin, headache, nausea, vomiting or diarrhea, stomach/intestinal cramps or persistent muscle cramps.

<u>Treatment:</u> Move child to a shaded or air-conditioned area, remove any extra clothing and equipment, cool the child with cold water, fans or cold towels (replace towels frequently), have child lie comfortably with legs raised above heart level, if the child is not nauseated or vomiting, have him or her drink chilled water or sports drink, the child's condition should improve rapidly, but if there is little or no improvement, take the child for emergency medical treatment.

"When can I play again?" A child should not be allowed to return to play until all symptoms of heat exhaustion and dehydration are gone. Avoid intense practice in heat until at least the next day, and if heat exhaustion was severe, wait longer. If the child received emergency medical treatment, he or she should not be allowed to return until his or her doctor approves and gives specific return-to-play instructions.

Exertional Heat Stroke

Heat stroke is a severe heat illness that occurs when a child's body creates more heat than it can release, due to the strain of exercising in the heat. This results in a rapid increase in core body temperature, which can lead to permanent disability or even death if left untreated.

<u>Signs and Symptoms</u>: An increase in core body temperature, usually above 104°f/40°c (rectal temperature) when the child falls ill, central nervous system dysfunction, such as altered

consciousness, seizures, confusion, emotional instability, irrational behavior or decreased mental acuity.

Other possible indicators include: nausea, vomiting or diarrhea, headache, dizziness or weakness, hot and wet or dry skin, increased heart rate, decreased blood pressure or fast breathing, dehydration, and combativeness.

<u>**Treatment:**</u> If there are no on-site medical personnel: Call emergency medical services for immediate transport to the nearest emergency medical facility. Begin cooling the child while waiting for and during transport to the emergency facility.

If there are on-site medical personnel, locate medical personnel immediately. Remove extra clothing or equipment. Begin aggressive whole-body cooling by immersing the child in a tub of cold water. If a tub is not available, use alternative cooling methods such as cold water, fans, ice or cold towels (replaced frequently), placed over as much of the body as possible. Call emergency medical services for transport to the nearest emergency medical facility.

"When can I play again?" No child who has suffered heat stroke should be allowed to return until his or her doctor approves and gives specific return-to-play instructions. Parents should work with the child's doctor to rule out or treat any other conditions or illnesses that may cause continued problems with heat stroke. The child should return to physical activity slowly, under the supervision of an athletic trainer or other qualified health care professional, especially for sports with equipment.

Parents: How Much Should Your Child Drink When Active?

Before activity in the heat, record your child's body weight. (Remember if your child has already been exercising in the heat, he or she may already be dehydrated.) Weigh your child again, after the activity is over. Compare your child's preactivity body weight to his or her post-activity body weight. If post-activity weight is less than pre-activity weight, your child is not drinking enough fluids while active. A loss of as little as 1 percent of body weight can cause a decrease in performance. Scientists have proven that children replace less of their fluid losses when drinking water. Therefore, you may want to offer a flavored sports drink to increase the amount of fluid your child consumes.

Tips for Parents

Before your child starts playing a sport, he or she should have a physical examination that includes specific questions about any history of heat illness. Tell your child's coach about any history of heat illness. Make sure your child is properly hydrated before he or she heads out the door to practice or a game. Give your children their own water bottles. Make sure your child's coach has your emergency contact numbers. Check that your child's league/team has an emergency action plan

For more informatiion visit www.nata.org/practice-patient-care/healthissues/heat-illness