

EVERYDAY HYDRATION

Hydration beyond eight glasses a day

A practical guide to total water, changing fluid needs, heat, activity, illness, electrolytes, warning signs, and individualized care.

There is no universal eight-glass prescription. Water needs vary with age, sex, pregnancy or breastfeeding, body size, food intake, activity, climate, fever, vomiting, diarrhoea, medicines, and health conditions. Total water includes drinking water, other beverages, and moisture in food.

A practical daily approach

- Begin the day with access to safe drinking water.
- Drink regularly with meals and across the day instead of relying on one large catch-up.
- Increase attention during heat, activity, fever, vomiting, or diarrhoea.
- Use thirst, urine output, symptoms, and the situation together; no single sign is perfect.
- Follow individualized fluid instructions if you have a condition or medicine that affects fluid balance.

What this guide does

This guide supports general planning and safer questions. It does not prescribe an individual fluid amount, diagnose dehydration, replace oral rehydration treatment, or override instructions from a qualified healthcare professional.

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1. Total water is more than plain water

The National Academies' reference values describe total water from beverages and food. They are population-level Adequate Intakes for generally healthy people, not mandatory drinking-water targets for every individual.

REFERENCE CONTEXT	TOTAL WATER	IMPORTANT QUALIFICATION
Adult men	About 3.7 L/day	Includes all beverages and food moisture; based on observed intakes of healthy people.
Adult women	About 2.7 L/day	Includes all beverages and food moisture; pregnancy and breastfeeding references differ.

Do not subtract food water and then force the remainder. The references are context, not a requirement to measure every millilitre. Many healthy adults maintain hydration through thirst, beverages with meals, and water in foods, while needs rise in particular conditions.

What counts toward total water?

- Plain safe drinking water
- Other beverages such as milk, unsweetened tea, coffee, or soups
- Water-rich foods such as fruit, vegetables, yoghurt, and cooked dishes
- Fluid used in food preparation

When needs commonly rise

- Hot climates or heat exposure
- Physical activity or outdoor work
- Fever
- Vomiting or diarrhoea
- Pregnancy or breastfeeding
- Higher losses from certain medicines or health conditions

Fluid restriction changes the plan. Some people with heart, kidney, liver, or other conditions may be told to limit or carefully manage fluids and sodium. Follow the treating team's instructions rather than general hydration advice.

2. Build a realistic hydration routine

A routine should fit your day and make adjustments visible. Use this worksheet as a memory aid, not a prescription.

My usual hydration anchors

TIME OR ROUTINE	MY USUAL DRINK / FOOD SOURCE	NOTES

Today may require an adjustment because of:

- ☐ Heat or sun exposure
- ☐ Vomiting or diarrhoea
- ☐ More activity than usual
- ☐ Pregnancy or breastfeeding
- ☐ Fever
- ☐ Medicine or condition affecting fluid balance

Questions or observations

Simple access strategies

- Keep safe water where you work, travel, and spend time.
- Pair a drink with regular meals or breaks.
- Use a refillable bottle if it improves access; it does not need to become a rigid quota.
- Choose water or unsweetened drinks more often than sugary beverages.
- Plan extra access before heat, travel, outdoor work, or prolonged activity.

3. Water, electrolytes, sports drinks, and ORS

These products are not interchangeable. Choose the tool for the situation rather than assuming that more minerals are always better.

OPTION	TYPICAL ROLE	CAUTION
Water	Usually sufficient for ordinary daily hydration and many shorter or lower-intensity activities.	Needs still vary; excessive intake over a short period can be dangerous.
Food and ordinary meals	Provide fluid plus sodium, potassium, carbohydrate, and other nutrients.	Medical sodium, potassium, or fluid restrictions require individualized planning.
Sports or electrolyte drink	May be useful in selected prolonged, high-sweat, heat, or endurance situations.	Formulas vary and may contain substantial sugar, sodium, caffeine, or other ingredients.
Oral rehydration solution	A specifically balanced glucose-electrolyte solution used to prevent or treat dehydration from diarrhoea and some other losses.	Mix exactly as directed with safe water. ORS is not simply a sports drink or everyday wellness beverage.

Heat and prolonged activity

Fluid loss can rise substantially during hot work or prolonged activity. Begin with access to water and regular opportunities to drink. Occupational or sports guidance may use situation-specific rates, but they should not be treated as universal personal prescriptions. Body size, acclimatization, work intensity, clothing, environment, sweat rate, duration, and medical factors all matter.

Avoid both underdrinking and forced overdrinking. Drinking very large volumes rapidly can dilute blood sodium and cause a medical emergency. More water is not always safer.

Illness with vomiting or diarrhoea

Fluid and electrolytes can be lost together. Use a correctly prepared oral rehydration solution when appropriate and seek professional guidance for infants, older adults, pregnancy, significant health conditions, persistent losses, or concerning symptoms. Severe dehydration or shock may require urgent intravenous treatment.

4. Recognize warning signs

Symptoms must be interpreted in context. Dehydration can become life-threatening, and excessive fluid intake can also cause dangerous electrolyte disturbance.

Possible dehydration signs

- Strong thirst or dry mouth
- Urinating less than usual or dark urine
- Unusual tiredness, weakness, headache, or dizziness
- Reduced sweating despite heat exposure
- In infants: fewer wet diapers, no tears, unusual sleepiness, or sunken eyes

Seek urgent medical help for

- Confusion, fainting, inability to wake, or seizure
- Little or no urination
- Rapid breathing, rapid heartbeat, or signs of shock
- Severe overheating, worsening weakness, or loss of coordination
- Persistent inability to keep fluids down, blood in stool or vomit, or severe diarrhoea
- New severe headache, nausea, confusion, or swelling after consuming very large fluid volumes

Urine colour is only one clue. Medicines, foods, vitamins, and health conditions can change it. Use symptoms, urine output, exposure, losses, and professional advice together.

References and further reading

CDC. About Water and Healthier Drinks. [cdc.gov/healthy-weight-growth/water-healthy-drinks/](https://www.cdc.gov/healthy-weight-growth/water-healthy-drinks/)

National Academies. Dietary Reference Intakes for Water, Potassium, Sodium, Chloride, and Sulfate. [nationalacademies.org/read/10925/chapter/6](https://www.nationalacademies.org/read/10925/chapter/6)

CDC. About Heat and Your Health. [cdc.gov/extreme-heat/prevention/](https://www.cdc.gov/extreme-heat/prevention/)

MedlinePlus. Dehydration. medlineplus.gov/dehydration.html

WHO. Diarrhoea. [who.int/health-topics/diarrhoea](https://www.who.int/health-topics/diarrhoea)

NIOSH. Heat Stress: Hydration. stacks.cdc.gov/view/cdc/45851

This guide provides general education and is not medical advice. Follow local public-health guidance and individualized instructions from qualified healthcare professionals.