RETURNING HOME

Many tropical diseases appear after you return home. It is important that you seek medical attention if you develop fever, flu-like illness or persistent diarrhea after returning home.

You should also seek medical advice from a specialist in tropical medicine if you were seriously ill while abroad in a developing country, had known exposure to an infectious disease, or had a prolonged stay in rural tropical areas.

As a word of reminder—any individual who has traveled to a malaria area is generally asked not to donate blood for the next 2-3 years. This is to protect donation recipients.
The Traveler’s Medical Practice is a division of the Tropical Medicine and Infectious Disease Practices at the University of California, San Francisco.

Our physician and nurse practitioner providers are knowledgeable about tropical diseases and are available to talk to you about your proposed travel plans and any associated health risks.

- Appointments are available for:
  - Consultation only
  - Vaccine administration only
  - Vaccine administration and brief consultation
  - Vaccine administration and comprehensive consultation
  - Pre and Post-travel physical examinations
- Visit fee schedule available upon request
- Bring immunization history information with you.
- Consultative visits are recommended for the less experienced traveler with multiple destinations, traveling for over 3 weeks.
- Vaccines are not recommended if you are feeling ill or having fevers over 101˚ F.
- Travel prescriptions can be obtained at any visit.

**ADVICE FOR TRAVELERS**

The information provided here is for the general traveler. Anyone traveling to developing countries should arrange an appointment in the Traveler’s Medical Practice to discuss the various issues involved in the prevention of tropical diseases. A full range of immunizations is available through the Practice.

These guidelines have been developed to assist you in staying healthy while traveling outside the United States. The recommendations closely follow those of the United States Public Health Service and the World Health Organization.

The Centers for Disease Control in Atlanta, Georgia is an additional resource for general travel-related information. The CDC Traveler’s Information line may be reached at 404/639-1610.

**ANIMAL BITES**

Animal bites may result in bacterial infections or rabies. All animal bites should be thoroughly washed immediately. Medical attention should be obtained if there is a break in the skin from the bite. Rabid animals rarely attack unprovoked. If you are bitten by any animal, immediately consult a physician and an attempt should be made to locate the animal.

Rabies is common in developing countries and may occur in cats, dogs, skunks, monkeys, mongooses, and bats. Rodents are rarely infected.

Individuals who plan to have close contact with animals such as veterinarians or biologists, or those who plan to do cave exploration or extensive backcountry travel, should discuss the possibility of receiving the rabies vaccine prior to departure.

**SEXUALLY TRANSMITTED DISEASES**

Sexually transmitted diseases are as easily acquired abroad as at home. Of special concern is AIDS (Acquired Immune Deficiency Syndrome). AIDS has been noted in virtually every country. It is transmitted by sexual contact and by contact with blood. Prostitutes represent a significant risk. Travelers should be careful to note that any injection they receive involves the use of a sterile needle and that any blood transfusion utilizes screened blood.

The reality of medical care in some developing countries is that it is very difficult to protect yourself from contaminated blood or needles. Many of the poorer countries lack large supplies of blood and needles and care is variable depending on location.
MALARIA

Malaria occurs in many countries. Travelers to the tropical or subtropical lowland rural areas are most at risk.

There are no immunizations against malaria. Individuals at risk of contracting the disease are given prophylactic (suppressive) medications. The most common medication used is Chloroquine phosphate 500 mg., which is taken once a week (adult dose). This medication is started 1–2 weeks before arriving in a malarial area and continued for 4 weeks after leaving the malaria area. Chloroquine is safe for use in children and pregnant women. Since many countries now have malaria that is resistant to Chloroquine, you may be given a different drug, Mefloquine. Mefloquine is also taken as a single dose once per week (250 mg., adult dose) and continued for 4 weeks after leaving the endemic area.

Because drug usage and recommendations for malaria can change, the CDC (Centers for Disease Control) has established a 24-hour Malaria Information Number (404) 332-4555.

Since no method or drug is always effective, additional precautions can reduce the risk of malaria. The mosquitoes that carry malaria are night feeders and are most active between dusk and dawn. While outdoors you should:

- Wear long pants and long sleeved shirts.
- Use insect repellent on all exposed skin.
- Sleep in screened areas and use bed nets.
- Spray sleeping quarters with insect spray before retiring.

A very effective method of protection from ticks and mosquitoes can be obtained by applying Permanone Tick Repellent to your clothing and any repellent that contains at least 30% DEET (n,n-diethylmetatoluamide) to your exposed skin. Permanone may be obtained by mail through the following supplier: Back Rub Archery at (414) 547-0535. The cost must be charged through Master Card or Visa. Delivery is by UPS and takes approximately 4 days.

PREPARATION

To prepare for your travel, allow 4-6 weeks before you leave the country to get the necessary immunizations, prescriptions and information you’ll need to protect yourself and enjoy a healthy trip.

Read about the particular places you will visit to become familiar with any health risks involved in those specific regions. If you travel in Canada, Europe, Japan, Australia and New Zealand as well as to many of the world’s larger cities, you will find that health problems are similar to those found in the United States. However, tropical and subtropical countries have a variety of health risks that may present themselves in different ways.

INSURANCE & TRAVELER’S RESOURCES

Resources for Travelers

U.S. State Department Overseas Citizens’ Emergency Center
Washington, DC 20520-4818 • (202) 647-5226
(Assistance to Americans traveling abroad who have medical, financial, or legal problems)
http://travel.state.gov

Traveling Healthy:
A Complete Guide to Medical Service in 23 Countries
Hillman SM, Hillman RS
Penguin Books • 1980
Middlesex, UK

International Assoc. for Medical Assistance to Travelers (IAMAT)
417 Center Street • Lewiston, NY 14092 • (716)754-4883
(List of English-speaking physicians overseas; information on malaria and other tropical diseases; world climate charts)

Medic Alert Foundation International
Turlock, CA 95380 • (209) 668-3333
Tanya Gloebrook, President CEO
(Source for Medic Alert identification bracelets and necklaces for travelers with chronic medical conditions)
Companies that Provide Direct Insurance Payments Plus Assistance

TravMed
Box 10623 Baltimore • MD 21204
(800) 732-5309
In Maryland (301) 296-5225

HealthCare Abroad, Health Care Global, MedHelp Worldwide
243 Church Street NW Vienna • VA 22180
(800) 237-6615
In Virginia (703) 281-9500

Travel Assistance International
(a EuropAssistance company)
1333 F Street • Washington, DC 20004
(800) 821-2828
In Washington, DC (202) 347-2025

WorldCare Travel Assistance
1995 West Commercial Blvd., Suite H
Ft. Lauderdale, FL 33309
(800) 521-4822 or
(305) 776-4201

International SOS
(provides assistance but not direct payments)
Box 11568
Philadelphia, PA 19116
(800) 523-8930 or
(215) 244-1500

Carefree Travel Insurance
Box 310, 120 Mineola Blvd.
Mineola, Long Island, NY 11501
(516) 294-0220 or
(800) 645-2424

Global Assistance
Box 18100
Philadelphia, PA 19116
(800) 523-8930

Immunizations are formulated for administration in several ways:

- **Toxoids (inactivated toxins):** Diphtheria, Tetanus
- **Live Virus:** Measles, Mumps, Rubella, Oral Polio/OPV (SABIN), Yellow Fever
- **Live Bacteria:** Oral Typhoid
- **Inactivated Virus (by heat or chemicals):** Hepatitis B, Influenza, Polio IePV (SALK), Rabies, Japanese Encephalitis
- **Bacteria Surface Antigens:** Cholera, Typhoid, H. Flu, Plague, Meningitis, Pneumovax
- **Immunoglobulins (prevent or modify infection):** Hepatitis B, Rabies, Varicella Zoster, Immune Globulin, Tetanus, CMV
**IMPORTANT VACCINE INFORMATION**

Immunizations are offered to stimulate the body’s production of specific antibodies. In the event of subsequent exposure to a disease causing virus or bacteria, the system may be better prepared to recognize and protect against it. **Vaccines may not provide 100% protection**

- **Reactions:** with any immunization there is always the risk of an adverse reaction. These may be mild to life-threatening and occur primarily in three ways:

- **Local reactions:** may occur immediately or gradually over several days and consist of swelling, tenderness and redness at the site of vaccination. Analgesics such as aspirin, acetaminophen, or ibuprofen and a warm compress may relieve discomfort.

- **General systemic reaction:** may resemble a flu-like syndrome with headache, fever, muscle aching, rash and fatigue. This may last for hours to days and may be seen up to weeks after vaccination. Care includes analgesics, rest and other symptom relief measures. The magnitude of this reaction is sometimes considered a reflection of the body’s protective response; the greater the reaction, the greater the antibody production. These may be considered uncomfortable but are generally not considered serious. If severe symptoms last for over 48 hours, you should notify your provider.

- **Anaphylaxis:** is an unpredictable, usually sudden over reaction which may cause hives, itching, trouble breathing and unconsciousness. Although anaphylaxis usually occurs immediately, symptoms can rarely occur up to fourteen days. This is a medical emergency. If you suspect such a reaction, you should seek medical attention immediately.

Should you have a serious reaction to any immunization, you should not receive it again.

**PRESCRIPTION MEDICATIONS**

If you regularly take prescription medicines, ask your doctor to give you a letter that states your major health problems and the dosage of each prescribed medicine to inform medical authorities abroad in case of an emergency. In addition, it’s helpful to carry an extra copy of your prescription with you to prove the medications are for your use.

Keep part of your medications in your carry-on luggage in case your main luggage is delayed or lost. Carry all prescription drugs in their original, properly labeled containers.

Avoid purchasing medicines in foreign countries as drugs have been found to be altered or mislabeled in many areas of the world.

**EYEGLASSES/CONTACT LENSES**

Take along an extra pair of eyeglasses or contact lenses as well as a prescription for your visual aids. Sunglasses are a necessity for travel in tropical or subtropical countries.

**DENTAL CARE**

Have your dentist check your teeth before departure. Adequate dental care is not available in many parts of the world.

**HEALTH IDENTIFICATION**

If you have any chronic health problems or medication needs (as in the case of diabetes) that may require emergency care, be sure to carry information that identifies your specific problem and needs.

Medical tags and bracelets are available from:

MedicAlert Foundation International
P.O. Box 1009
Turlock, California 95381-1009

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Should you have a serious reaction to any immunization, you should not receive it again.
MEDICATIONS & FIRST AID SUPPLIES

Depending on your travel plans, these medications and first aid supplies can be an extremely important addition to your packing.

- Pepto-Bismol - Useful for upset stomach or diarrhea. Avoid if pregnant.
- Antacids - Useful for indigestion or stomach acidity.
- Acetaminophen or Aspirin - Useful for pain relief.
- Insect Repellents (DEET - 30-50%) - Very important in malaria areas and tropical areas of the world in general. (Apply after sunscreen.)
- Calamine and Hydrocortisone Lotion - Useful for itchy rashes.
- Flying Insect Spray - Useful in sleeping quarters to decrease biting insects.
- Antibiotic Ointment (Neosporin, Bacitracin-Polymyxin-Neomycin)* - Useful for treatment of minor skin infections.
- Antifungal Cream or Powder (Desenex, Cruex, Aftate)* - Especially important in humid climates as fungal infections develop more rapidly.
- Sunscreen Lotion and Lip Balm (Rating of 15 or more) - A hat is additionally important in high altitudes and tropical areas.
- Anti-motion Medication (Dramamine)* - Due to its sedative effect, this is also useful for assistance with sleeping.
- Antihistamines (Chlorpheniramine) - Very useful for allergy problems and has sedating quality.
- Iodine Tablets or Drops - Directions on their use are included in the following "Food and Water" section.
- Antiseptic Skin Cleansers (Phisoderm or Hibiclens) - All cuts and animal bites should be washed immediately.

*The use of brand names is solely for assisting you in obtaining the appropriate medication and does not represent an endorsement.

SWIMMING AND BATHING

Generally, hot tap water is safe for bathing. For infants, it is best to use boiled water. Swimming in the sea is generally safe, except near sewage outlets. In some areas (tropical Africa, the Nile River Valley in Egypt, Amazon regions of South America and the Yangtze River Valley in China) you should avoid fresh water (lakes, ponds, rivers) because of a worm infection called schistosomiasis (bilharziasis, snail fever). Generally, chlorinated pools are safe for swimming.

You should also avoid walking barefoot due to hookworm and strongyloidiasis, which, in larval stages, can quickly penetrate the skin.

IMMUNIZATIONS

It's important to be aware of immunization requirements and recommendations for travel to specific countries. The Traveler's Medical Practice can provide you with assistance.

The following are general guidelines for your information:

- International travelers should have current immunizations against Tetanus, Diphtheria, Polio and Measles. You should check with your health care provider to obtain information about the last booster dose you received.
- For travel to parts of Africa, South America or Asia you may be required to obtain Yellow Fever or Cholera vaccine. Both these vaccines require official documentation on the International Certificates of Vaccination. These are available in the Traveler’s Medical Practice.
- Other vaccines that may be indicated, depending on your activities and destination, include Typhoid, Meningococcal Meningitis, Rabies, Plague, Japanese Encephalitis, or Gamma Globulin (for Hepatitis A prevention).
- As a word of caution, some vaccines may cause illness, so it is important to begin many of these vaccines early. There also may be complications and risks from these vaccines in some people such as infants, pregnant women, and those with chronic illnesses or egg allergies.
DIARRHEA

The most common concern and physical complaint among travelers involves diarrhea. Serious illness associated with diarrhea can be avoided by following the suggestions in the “Food and Water” section that follows.

Most diarrhea is self-limiting and resolves within 48 hours. Individuals may find that diarrhea symptoms are improved by the use of Imodium-AD. Lomotil is generally not recommended due to possible complications that may occur with its use. In the event that diarrhea persists or is associated with fever, blood or vomiting, and medical care is not available, antibiotics may be of benefit. It is always preferable to have the cause of the diarrhea identified before beginning treatment if possible.

In cases of severe diarrhea, the most important self-treatment is to maintain fluid intake. The following fluids should be drunk until your thirst is quenched.

(Alternate Glasses 1 and 2)

Glass 1

- Orange, apple or other fruit juice . . . . . . . 8 ounces
- Honey or corn syrup* . . . . . . . . . . . . . . . . . ½ tsp.
- Salt (Table) . . . . . . . . . . . . . . . . . . . . . A pinch

*Honey not for pediatric use.

Glass 2

- Water (Purified) . . . . . . . . . . . . . . . . . . . 8 ounces
- Baking Soda (Sodium Bicarbonate) . . . . . . . ¼ tsp.

Solid food, caffeine, alcohol and milk products should be avoided until the diarrhea is resolved.

WATER PURIFICATION

There are several methods available for purifying water. If the water is very cloudy, you should filter it through a clean cloth prior to boiling or chemical treatment. Boiling is still considered the simplest method. The water should boil vigorously for 10 minutes and then be transferred to a clean container and allowed to cool.

Tincture of Iodine (2%) drops may be used when boiling is not available. For clear water, 5 drops should be added to 1 quart of water. For cloudy water, 10 drops should be added.

Iodine Crystals are also usable, however, they are difficult to obtain. To use, fill the bottle of crystals with water and let stand for 1 hour. Add 2 teaspoons of this solution to each quart of water and let stand for 10 minutes. Since only a small portion of the iodine will be dissolved by the water you will be able to purify approximately 500 gallons of water with a 6 gram bottle.

Iodine tablets are more readily available and are an alternative to crystals. The time and temperature relationship is important when using the tablets, so follow the directions exactly. Timing should start when the tablets are completely dissolved.

Another chemical that may be used is tetracycline hydroperiodide tablets. Follow the manufacturer’s instructions.

Mechanical filters are also available. Generally they are expensive but are useful for individuals who dislike the taste of iodine or for medical reasons should limit their iodine intake. Filters do not filter out viruses such as Hepatitis A, so chemical treatment may also be necessary.

In an emergency liquid chlorine bleach (1-2 drops) or 2% tincture of iodine (4 drops) can be added to each liter of room temperature water. Shake frequently and wait at least 30 minutes before drinking.
**FOOD AND WATER**

While traveling in Europe special precautions are generally not needed to protect against diseases acquired through food or water contamination. However in parts of the developing world, the following precautions should be observed:

- Uncooked food and food available from sidewalk vendors should be avoided. Hot and thoroughly cooked food served from the kitchen is presumed to be safe. Avoid any food that has been sitting buffet-style for a prolonged or unknown length of time.

- Fruits and vegetables may be eaten raw only if you wash and peel them yourself. Avoid fresh salads. Rinsing food in permanganate solution is ineffective. Avoid milk and milk products as they are generally unpasteurized and may transmit a variety of diseases including tuberculosis.

- Drink only purified, bottled or disinfected water. Canned or bottled carbonated beverages are not always safe.

- Ice should not be added to drinks as it may have been made from contaminated water.

- Only purified water should be used while brushing your teeth or rinsing your mouth.

- Shellfish (clams, oysters, shrimp, crab, lobster) can transmit cholera and hepatitis A. All shellfish should be well-cooked. In cholera epidemic areas, it is best to avoid all shellfish.

**SOURCES FOR TRAVEL MEDICINE INFORMATION**

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<thead>
<tr>
<th>Telephone Information, Hotlines, Audio libraries</th>
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<tr>
<td>Centers for Disease Control and Prevention</td>
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<tr>
<td>Traveler’s Health Hotline (404) 332-4559</td>
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<td>Centers for Disease Control and Prevention</td>
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<tr>
<td>FAX Information Number (404) 332-4565</td>
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<tr>
<td>United States Department of State</td>
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<td>Citizens’ Emergency Center (202) 647-5225</td>
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<td>University of Washington Medical Center</td>
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<td>Travel Medicine Service Audio Library (206) 548-4888</td>
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<th>Electronic References (Internet)</th>
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<td>World-Wide Web Home Pages:</td>
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<tr>
<td>CDC Wonder <a href="http://www.wonder.cdc.gov">http://www.wonder.cdc.gov</a> (#8082)</td>
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<tr>
<td>CDC Travel <a href="http://www.cdc.gov/travel/travel.html">http://www.cdc.gov/travel/travel.html</a></td>
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<tr>
<td>World Health Organization <a href="http://www.who.ch/">http://www.who.ch/</a></td>
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<tr>
<td>University of Washington Travel Medicine Service</td>
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<tr>
<td><a href="http://weber.u.washington.edu/~travmed/">http://weber.u.washington.edu/~travmed/</a></td>
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<tr>
<td>U.S. State Department</td>
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<td><a href="http://www.stolaf.edu/network/travel">http://www.stolaf.edu/network/travel</a> advisories.html</td>
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<th>Bulletins and Newsletters</th>
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<tr>
<td>International Association for Medical Assistance</td>
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<tr>
<td>to Travellers:</td>
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<tr>
<td>World Climate Charts: IAMAT, 40 Regal Road,</td>
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<tr>
<td>Guelph, Ontario, Canada, N1K 1B5; telephone (519)</td>
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<tr>
<td>836-0102; fax (519) 836-3412</td>
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| International Association for Medical Assistance|
| to Travellers:                                   |
| World Malaria Risk Chart 1995 (revised annually): |
| IAMAT, 40 Regal Road, Guelph, Ontario, Canada,   |
| N1K 1B5; telephone (419) 836-0102; fax (519) 836-3412 |

Please order from Documents2Mail Services 415-514-2602