

[back to story page](#)

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## Pre-trip care can help travelers avoid serious illnesses

[By Amanda Schoenberg](#)

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Before flying to South Africa this week, Troy Carl made another kind of trip for a final round of shots at New Mexico Travel Health in Albuquerque.

For this visit, medical director Dr. Francine Olmstead rolls up one of Carl's sleeves for a hepatitis A vaccine and the other for a hepatitis B vaccine, the final leg in a journey of preventive care that also included polio, tetanus and typhoid vaccines and a flu shot.

Carl, national director of Faith Comes by Hearing, a nonprofit that distributes audio versions of the Bible in 400 languages, has traveled widely in Thailand, China, Vietnam, Korea and Japan. Before each trip, he makes sure to schedule a visit with Olmstead.

"When you do as much international travel as we do, you shouldn't be reckless," he says.

Travel medicine specialists say a dose of prevention goes far to help travelers avoid everything from serious illnesses like malaria to traveler's diarrhea or H1N1 influenza. About 8 percent of travelers to developing countries need medical care during or after a trip, according to a review published in the New England Journal of Medicine of more than 17,000 ill patients who visited 30 international clinics.

But studies show that most travelers don't seek pre-travel advice, says Dr. Ralph Bryan, medical epidemiologist with the Centers for Disease Control and Prevention and director of the University of New Mexico International Travel Clinic.

"It's a little alarming to us in the business how many people don't seek out care," he says.

**Start early**

The first line of defense for international travelers is a visit to the CDC Web site, which lists health advisories for most countries. Next is a visit to a travel health specialist who can tailor preventive care. Travelers should also see a primary care doctor to be sure they don't have other problems, such as heart disease or diabetes, that may affect treatment, Olmstead says.

Ideally, Olmstead would like to see travelers several months before they leave the country.

"I tell people as soon as you book your ticket you should be booking an appointment with me," she says. "There's no too soon a time."

Many travelers don't know what immunizations they have. Routine vaccines for adults include measles, mumps, rubella and tetanus. Before travel, Olmstead also recommends flu shots, pneumonia shots for people over age 65 and shingles vaccines for people over 60.

Even for people who had routine immunizations as children, immunity can wane with age, Bryan says. To avoid contracting polio, the CDC recommends boosters before traveling to 41 countries, including India and Kenya.

Pre-travel care means weighing risks. A set of vaccines can cost hundreds of dollars and may not be covered by insurance. The priciest is rabies, which costs \$239 for each of three doses, Olmstead says.

### **Serious risks**

Travelers headed to Africa and South Asia are often more prepared for costly shots and likely to seek medical advice, Olmstead says. But many patients are surprised by how much they don't know.

"We're really naïve when we travel internationally that there are other risks," she says.

Olmstead points out that polio and typhoid fever were once serious threats in the United States but because they are no longer common here, travelers think they don't need to worry about them elsewhere.

"We have this sense that we're invincible and we're not at risk," she says. "That's why people can have serious trouble — because they're not prepared."

Each region has specific risks, and recommendations vary according to the

type of travel — a cruise ship passenger will likely receive different advice than a backpacker. For example, the CDC recommends that travelers headed to some rural areas of China should use anti-malarial drugs. But in urban areas the drugs aren't recommended. Olmstead typically asks patients to bring travel itineraries to consultations.

At the UNM Travel Clinic, Bryan says common travel destinations include Central and South America, followed by Southeast Asia and Africa. Some of the biggest risks come from mosquito-borne infections like malaria, dengue and chikungunya disease and water-borne illnesses like hepatitis A and typhoid.

Travelers also need to know that diseases aren't static. Mosquito-borne illnesses can spread into new terrain because of land use changes or new development, says Bryan. In 2009 more cases of dengue fever were reported in parts of Central and South America. Dengue causes fever, headaches, nausea, joint and muscle pain and rashes and can lead to dengue hemorrhagic fever, which can be fatal if left untreated.

"Dengue has come and gone and it moves in waves around the world," Bryan says.

### **Tourists beware**

Even people visiting tourist destinations like Mexico, Belize or Costa Rica should seek medical advice, Olmstead says. "They think about hotels and tours and they budget that for years but they don't think about vaccinations," she says.

Many travelers expect traveler's diarrhea in Mexico but may not think about more serious diseases like leishmaniasis, a parasite transmitted by sand flies. In Costa Rica, another popular tourist destination, river rafters have reported leptospirosis, a bacteria caused by exposure to contaminated water.

Poor countries don't have a monopoly on traveler's ailments. Carl came home with a respiratory illness from contaminated water in Ireland but had trouble finding a doctor to treat him when he returned.

"If you come back with something strange, a lot of times doctors are resistant to listen to you," Carl says.

Bryan says U.S. physicians are becoming more knowledgeable about international diseases but many still don't ask about travel. People who return home ill should be sure to mention their trip to doctors.

Another concern for travel specialists are immigrants to the U.S. who return home to visit friends and family. Many people mistakenly believe they are immune to diseases in their home countries. That has led to disproportionate numbers of malaria and typhoid fever cases in those travelers.

"They have a sense that, 'we grew up there, we've seen it before,' " Bryan says. "It's a particularly high-risk group because they don't seek care."

### **Best advice**

A typical day for Olmstead can start with hepatitis A and end with typhoid. After treating Carl, Olmstead meets with a business traveler headed to southeast and northwest India. She recommends hepatitis A and B and typhoid vaccines, a polio booster and a flu shot and prescribes Malarone, anti-malaria tablets he will take when he arrives in India.

But the recommendations don't end there. Olmstead emphasizes preventive measures like safe sex and avoiding bug bites with mosquito netting and repellent with at least 30 percent of the chemical DEET.

Tropical diseases aren't the only risk during international travel. Most deaths among U.S. travelers are due to injuries, heart problems and violence, Bryan says. He tells patients that even renting a moped or crossing a street can be risky in unfamiliar terrain.

To prevent typhoid, a strain of salmonella, Olmstead advises travelers to stick to well-cooked food, avoid dairy products and drink bottled water. To avoid H1N1 flu or regular influenza, Olmstead recommends getting a flu shot if possible. She tells all patients to wash their hands as much as possible and carry hand sanitizer and antibacterial wipes to sanitize seats and trays on planes.

"The best advice is to wash your hands with soap and water as often as you can," she says.

### **Before you travel**

Check the Centers for Disease Control and Prevention Web site at [cdc.gov/travel/](http://cdc.gov/travel/) for country-specific information, disease information, vaccinations and preventive care. The CDC also offers an interactive worldwide malaria map.

The State Department also has travel and safety tips at [travel.state.gov/](http://travel.state.gov/). The International Society of Travel Medicine has a list of travel health clinics in New

Mexico at [istm.org](http://istm.org).

#### Screening for H1N1

Some countries are now checking passengers for flu and H1N1 flu symptoms. Check country information at [usembassy.gov](http://usembassy.gov). Travelers may have to pass a temperature screening device, fill out health questionnaires or be quarantined.

The Centers for Disease Control and Prevention recommends that U.S. travelers buy travel insurance in case of delays or quarantine. People should not travel if they think they have H1N1 or seasonal flu.

[Back to story page](#)