Be Healthy When You Travel

Sponsored By UF’s International Travel Clinic at the Student Health Care Center
Childhood Diseases

- Remember to check your childhood immunizations
- Get chickenpox vaccine if never had the disease
Tetanus, Diphtheria and Pertussis

- Tetanus—bacterial disease transmitted through contaminated soil
- Diphtheria—bacterial disease of the respiratory tract
  - High risk in Eastern European and undeveloped countries
  - 60% adults have little to no immunity
- Pertussis (Whooping Cough)—bacterial disease of the respiratory tract with increase in cases in US
- Vaccine preventable
Influenza

Stop the spread of germs that make you and others sick!

Cover your Cough

Put your used tissue in the waste basket.

Cover your mouth and nose with a tissue when you cough or sneeze or cough or sneeze into your upper sleeve, not your hands.

Clean your Hands after coughing or sneezing.

Wash hands with soap and warm water or clean with alcohol-based hand cleaners.
Malaria

- Mosquito-born disease caused by parasite
- Majority of deaths in sub-Saharan Africa
- 219 million cases in 2010 with 660,000 deaths worldwide (WHO)
- Every year about 1500 cases of malaria and 5 deaths occur among international travelers from the United States
Malaria

**Process**
- Mosquito feeds on human blood
- Parasite incubates in liver
- Then invades red blood cells
- Blood cells rupture and illness occurs

**Symptoms of Disease**
- Headache, fever, body aches, chills 1-2 days
- Progresses to high fever and worsening aches
- Nausea and vomiting
- Can develop anemia, hypoglycemia, kidney & liver failure, fluid in lungs
<table>
<thead>
<tr>
<th>Country</th>
<th>Areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carribean/Cuba/China</td>
<td>should be no risk in all areas</td>
</tr>
<tr>
<td>Dominican Republic</td>
<td>all areas including resorts except Santo Domingo and Santiago</td>
</tr>
<tr>
<td>Ecuador</td>
<td>All areas below 1500m, no risk in Quito, Guayaquil or Galapagos Islands</td>
</tr>
<tr>
<td>Guatemala</td>
<td>Rural areas below 5000ft, no risk in Guatemala City, Antigua and Lake Atitlan</td>
</tr>
<tr>
<td>Haiti</td>
<td>All areas of country</td>
</tr>
<tr>
<td>Honduras</td>
<td>Present throughout the country at altitudes &lt;1,000 m (3,281 ft) and in Roatán and other Bay Islands. None in San Pedro Sula and Tegucigalpa</td>
</tr>
<tr>
<td>Mexico</td>
<td>No risk in Yucatan Peninsula or Campeche</td>
</tr>
<tr>
<td>Nicaragua</td>
<td>Chinandega, Leon, Managua, Matagalpa, Regions Autonoma del Atlantico Norte and Sur. Low to no risk in Managua</td>
</tr>
<tr>
<td>Thailand</td>
<td>Multi-drug resistant malaria in northern forested areas</td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td>?</td>
</tr>
</tbody>
</table>
Yellow Fever

- Viral Disease transmitted by mosquitoes
- Occurs in Africa & South America
- Proof of vaccination may be required
- If no vaccination, up to 60% fatality rate

Africa and South America
Yellow Fever

¹Current as of September 2012. This map, which aligns with recommendations also published by the World Health Organization (WHO), is an updated version of the 2010 map created by the Informal WHO Working Group on the Geographic Risk of Yellow Fever. Copied from CDC website
Yellow Fever

Yellow fever (YF) vaccination is generally not recommended in areas where there is low potential for YF virus exposure. However, vaccination might be considered for a small subset of travelers to these areas who are at increased risk for exposure to YF virus because of prolonged travel, heavy exposure to mosquitoes, or inability to avoid mosquito bites. Consideration for vaccination of any traveler must take into account the traveler’s risk of being infected with YF virus, country entry requirements, and individual risk factors for serious vaccine-associated adverse events (e.g., age, immune status).

Current as of September 2012. This map, which aligns with recommendations also published by the World Health Organization (WHO), is an updated version of the 2010 map created by the Informal WHO Working Group on the Geographic Risk of Yellow Fever.
Dengue Fever

- Viral Disease found in tropical & subtropical countries, in both urban and rural areas
- Transmitted by mosquitoes that tend to bite in daytime hours
- Symptoms: severe headache, joint & muscle aches, fever & chills, nausea & vomiting, rash for 5-7 days
- NO VACCINE to prevent! No specific treatment!
- Bed rest, fluids, Tylenol (Not Aspirin or Ibuprofen)
CHIKUNGUNYA VIRUS

- Mosquito borne- aggressive daytime biting mosquitos
- Incubation 3-7 days
- Main symptoms: fever and joint pains- often in hands and feet
  - Also headaches, myalgia, conjunctivitis, nausea/vomiting and rash

Symptoms usually resolve within seven to 10 days
May have persistent joint pain for months to years
Treatment and clinical management

• No specific antiviral therapy; treatment is symptomatic
• Evaluate for other serious conditions (e.g., dengue, malaria, and bacterial infections) and treat or manage appropriately
• Use acetaminophen for initial fever and pain control
• Persistent joint pain may benefit from use of NSAIDs, corticosteroids, or physiotherapy
Prevention is Key!

Prevent Mosquito Bites

- Long sleeves especially during evening and am hours
- Insect repellent with 30-50% DEET
- Sleep in screened areas
- Permethrin spray to clothing

Prophylactic Drugs

Chloroquine VS Resistant Meds

Depends on the Area

wwwnc.cdc.gov/travel
Rabies

- Viral Disease of the Central Nervous System
- Transmitted by the bite, scratch, or saliva of infected animal
- Symptoms: Convulsions, coma, & encephalitis
- In US, rabies mostly associated with Bats
- Dog rabies seen in Central America, India, Peru, Thailand, Nepal, Viet Nam, Philippines, Sri Lanka
- Also carried by skunks, raccoons, fox, cats, mongoose and wolves
Altitude sickness can occur at 3500-5500 meters

Symptoms of headache, loss of appetite, weakness fatigue, problems sleeping

At Altitude:
- Drink at least an extra liter of fluid
- Limit strenuous exercise
- Avoid alcohol for the first 48 hours
- Consider prophylactic medication if history of altitude sickness

Critically, a person whose symptoms are getting worse while resting at the same altitude must descend or risk serious illness or death

Typical high-altitude destinations include Cuzco, Peru (11,150ft; 3,400 m), La Paz, Bolivia (12,400ft; 3,780 m), Everest Base Camp in Nepal (17,598ft; 5,364 m), and Kilimanjaro in Tanzania (19,341ft; 5,895 m).

Quito, Ecuador (9300ft; 2835m), Denver, CO (6,035ft:1,839 m)
CHOLERA

- Bacterial disease that can cause diarrhea and dehydration
- Transmitted by contaminated food/water and is fecal/oral
- Chemoprophylaxis with antibiotics is not recommended by CDC for health care providers
5 Basic cholera prevention messages

- Drink and use safe water
  - Use safe water to brush teeth and wash/prepare food
- Wash hands often with soap and safe water
- Use latrines or bury feces away from food prep areas and water source
- Cook food well, eat it hot, keep it covered, peel fruits and vegetables
- Clean up safely- wash self at least 30meters from water source
Be Careful with Water
Use Common Sense

- Bottled water for drinking
- Treated or bottled water for rinsing mouth and toothbrush
- No ice unless use treated water
- Carbonated beverages, beer, wine, sodas safe
- Hot tea and coffee generally considered safe
Food and Water Precautions

Boil It, Cook It, Peel It Or Forget It!

- Thoroughly cook meat and eat it while hot.
- No raw seafood, shellfish, sushi
- Cook all vegetables
- Only eat fruits you have peeled
Food and Water Precautions

- Avoid unpasteurized milk and juices
- No raw or undercooked eggs
- Stay away from street vendors
- Wash hands often
Prevention is Key!

Hand Washing

#1 Defense Against Foodborne Illness!
Traveler’s Diarrhea

- Can occur no matter how careful you are!
- Lasts 3-7 days
- Symptoms: Diarrhea, nausea, vomiting, fever, abdominal cramping
- Push/force fluids to stay HYDRATED
- Pepto-Bismol 2 tabs/1oz four times a day (Not if aspirin allergies, ulcers, bleeding disorders) for prevention
If you Get Traveler’s Diarrhea

- Can treat with Pepto-Bismol if not using as preventative
- 1 oz or 2 tabs every 30 min. for total 8 doses in 24 hour period
- Imodium - use cautiously to slow diarrhea down, not stop it
- Ciprofloxacin 500mg by mouth every 12 hours if more than 3 episodes of diarrhea in a day - usually start to feel better after one tablet but complete Rx (2 doses)
If you Get Traveler’s Diarrhea

Seek Medical care if:

- If you become dehydrated
- See Blood in stool or vomit
- Diarrhea lasts more than 7 days
- High Fevers Persist
- Symptoms don’t improve if on antibiotics
Hepatitis B

- **Transmitted via:**
  - contaminated blood & body fluids
  - Sexual intercourse
  - Sharing dirty needles

- **Asymptomatic infection**
  - 90-95% Recover
  - 5% chronic carriers
  - Liver cancer & death
STANDARD PRECAUTIONS

- If you get exposed to contaminated blood/body fluid
  - Wash well with soap and water - no bleach
  - Irrigate mucous membranes copiously
  - Inform your medical advisor and get a good history on the source patient
  - Make an appt. with the Student Health Care Center as soon as your return
  - D2-49  352-294-5700
Hepatitis A

- Transmitted by contaminated food & water and by fecal-oral route
- Disease is self-limiting with no treatment
- If acquire disease, develop life long immunity
- VACCINE preventable
Hepatitis A Vaccine

Safe and effective
  - Two dose series
    - Initial 2-4 weeks before departure
    - Second 6-12 months after first
    - Provides almost 100% immunity for at least 25 years when received as an adult

Side Effects:
  - Soreness/redness at site
  - Headache, Fatigue
Typhoid Fever

- Bacterial Infection of the digestive tract
- Caused by Salmonella typhi
- Transmitted through contaminated food & water and fecal/oral route

Endemic in Africa, Asia, Central & South America

- High prevalence in developing countries
- Common in warm climates with poor sewage
Traveler’s Tips

- Be aware that motor vehicle accidents are the most common cause of death in the traveler
- Take Malaria preventive medicine
- Prevent mosquito and insect bites
- Be careful with what you eat
- Use bottled water or purify own water
- Do not go barefoot
- No swimming in rivers and streams
- Avoid piercing/acupuncture and manicures out of US
- No drinking and driving
Recommended First Aid Supplies

- Aspirin or Tylenol
- Allergy medications, Benadryl
- Laxative and anti-diarrhea meds
- Anti-fungal cream
- Antibiotic ointment, bandaids
- Tweezers, Scissors, alcohol pads
- Extra glasses or contact lenses
- Birth control / condoms
- Sunscreen and insect repellent
Taking Prescription Medications?

- Make sure have adequate supply
- Take in pharmacy bottle with: label that includes your name, medication, dose and frequency taken, prescribing provider and phone number.
- Check with US Embassy and/or State Department if okay to bring in medication

www.travel.state.gov
Travel and Stress

Ways to Manage Stress

- Exercise
- Avoid alcohol and stimulants
- Relaxation breathing
- E-mail family & friends
- Keep journal
- Talk with others
- Take pictures
- Laugh!!!
Everyone should get vaccinated for Hepatitis A and Typhoid Fever vaccines and be current on Td/Tdap

Get other vaccines and malaria prophylaxis as indicated - check wwwnc.cdc.gov/travel

Handwashing! Handwashing! Handwashing!

Pay attention to surroundings and use common sense

Stay healthy so you can enjoy your trip
SHCC’s Travel Clinic

- Available for all registered students & exchange students that have paid the health fee
- BY APPOINTMENT, 294-7472 at SHCC or see your assigned provider in the main SHCC building (If not a registered UF student, you can be seen through SHCC for a fee)

- SHCC at Shands also offers Travel Clinic, 294-5700
  
  Check with insurance before you come in for vaccines

International Travel at the University of Florida 265-5625
The Alachua Co Health Department also offers a Travel Clinic, 334-7900