INTERNATIONAL TRAVEL INFORMATION

International travel to tropical climates and third world countries raises certain medical concerns not present in the USA. Travelers will want to be informed of the health risks in those areas and how to take reasonable precautions through vaccines, prophylactic medications and other appropriate measures. Our international travel consultants (ITC) specialize in the unique considerations of children and young adults. We also provide the same service to the parents and other adults who will be traveling with the children. Preparation and information are the keys to a safe and healthy experience abroad. The following provides information about the issues that should be considered.

VACCINES

HEPATITIS A:

1. This vaccine is now a part of the standard immunizations given to all children in the USA. It is usually given between 1 and 2 years of age. Once given, the protection is good for life. Your child may have received the series already. If not, the first dose should be given at least 4 weeks prior to departure.

2. Protection against Hepatitis A is recommended for all international travelers.

3. The complete series consists of two separate injections separated by 6 to 28 months, but very good protection begins 4 weeks after the first injection. Reactions are relatively mild, and the vaccine can be given at the same visit with other vaccines.

4. Hepatitis A disease is contracted through contaminated food or water. It is a viral infection of the liver causing nausea, vomiting, diarrhea, fever and jaundice. The infection can be fairly mild lasting a couple of weeks; or it can be quite serious resulting in permanent damage to the liver.

TYPHOID:

1. This vaccine is available in two forms: oral and injectable.

2. The oral form is a live virus vaccine that must be kept refrigerated at home. It consists of 4 separate capsules which must be taken every other day on an empty stomach. This is usually best done in the morning over an eight day period. The capsule should be swallowed with a glass of water, followed by nothing else to eat or drink for one hour. When taken this way there are usually no side effects from the vaccine, but occasionally moderately severe nausea, vomiting, fever and diarrhea do occur. Immunity is conferred one week after completing the series and lasts up to five years. Children 6 years and older who can swallow the capsules whole may choose this version of the vaccine.

3. The injectable form of the vaccine may be preferred for younger children or for those who cannot swallow the capsules. Immunity is conferred within two weeks and lasts up to two years. Mild local reactions, fever and headache are not uncommon after this injection. It can be given to children as young as 2 years of age.

4. Typhoid disease is contracted through contaminated food and water. It is somewhat common in third world countries, particularly South Asia. Vaccine protection is recommended for most travelers to these areas, unless they will be spending all their time at resorts with high sanitation standards.
YELLOW FEVER:

1. *Yellow Fever Vaccine* can only be administered by licensed international travel specialists like those at this clinic. It is a single injection, recommended for travelers to high risk areas, who are at least 9 months of age. Protection is quick and lasts 10 years. The vaccine can be given at the same time as other vaccines. Reactions are generally mild and may include fever, headache, and body aches.

2. This vaccine is *required* for entrance into a number of countries in equatorial Africa and South America. An official International Certificate of Vaccination or Prophylaxis (ICVP), attached to the passport, must be presented upon entry to such countries. It may be *recommended* for international travel even if it is not officially required.

3. *Yellow Fever disease* is a very serious mosquito-borne illness, causing severe headache, chills, fever, nausea, and vomiting. It is fatal in as many as 15% of cases. These days, due to world-wide public health efforts, the occurrence is rare, but regional outbreaks still occur, and it is still endemic in some areas where the vaccine is required.

MENINGOCOCCAL:

1. *Meningococcal vaccine* is now routine for all teenagers in the USA and is usually given one time at 12 years of age. The vaccine can be given, however, to anyone ages 2 through 59 years old. Immunity is good within 2 weeks and lasts at least 5 years. Reactions are minimal, and the vaccine can be given along with other vaccines.

2. *Meningococcal disease* is endemic across sub-Saharan Africa.

3. *Meningococcal disease* is contracted through close contact with infected individuals. Symptoms include severe headache, fever, vomiting, and life-threatening septicemia and meningitis. It can be treated with IV antibiotics in a hospital, but even then it has a high mortality rate.

POLIO:

1. Most adults in the USA were *vaccinated* against polio as children, and most children have been or are currently in the process of receiving a full series of polio vaccines. Adults who last received a polio vaccine more than 10 years ago may be susceptible to the disease.

2. *Wild polio virus* only exist today in only a few small areas in the world in India and northeastern Africa. Anyone traveling to these areas should have their polio status reviewed by an ITC.

3. *Polio disease* is usually contracted by contact with infected individuals where the virus is accidentally ingested orally. It is a very serious and sometimes deadly infection of the gastrointestinal and neurologic systems of humans. The virus will live only briefly away from the infected individual, and there is no known animal vector. This explains why we have been able to nearly eradicate this disease from the globe.

ROUTINE VACCINATIONS:

International travelers should be just as concerned about the status of their routine vaccinations as they are about the special vaccines recommended for international travel. Tetanus, diphtheria, pertussis (whooping cough), measles, mumps, rubella, and hepatitis B immunizations should all be updated before travel whenever possible. Seasonal influenza immunizations should also be current.

NOT RECOMMENDED:

At this clinic we do not recommend Japanese encephalitis, rabies or BCG vaccines or Immune Serum Globulin except under very unusual circumstances.
MALARIA

Malaria is one of the most devastating diseases that inflict humans. It is possibly responsible for more death and disease among adults than any other single cause. Yet here in the USA the average person knows little about it and certainly never gives it much thought, except when considering travel to areas of the world where it is endemic.

Malaria is contracted through the bite of a specific mosquito that is carrying the malaria organism. That "bug" is actually a parasite that reproduces in the blood stream of the infected individual. Symptoms include fever, chills, severe headache and body aches. Infection can be treated with the same medicines used to prevent the disease, however, once contracted the bug may never be totally cleared from your system.

Malaria is best prevented through avoidance of mosquito bites, particularly in the evenings and night times. Mosquito nets and high concentration DEET (at least 50%) mosquito repellant are effective. Most resorts and even lower rated hotels have mosquito nets for all their beds. DEET can be purchased from stores like REI in 2 oz. pump spray bottles.

The second line of defense is the use of prophylactic medications. Where resistance is not a problem, as is the case in most of Central America, chloroquine is the drug of choice. Everywhere else, the three options are Malarone, Lariam and doxycycline. The last is a type of tetracycline antibiotic and is the cheapest by far, costing pennies a day. The others can cost as much as $10 per dose. All four medicines need to be started before possible exposure to malaria, continued while in malaria areas, and continued up to 4 weeks after return to the USA.

An ITC can help you decide which measures are most appropriate for your circumstances, and, if necessary, which medication would be the best choice for you personally.

ADDITIONAL CONSIDERATIONS

SLEEP AIDS:
Sometimes a medication to help induce sleep on long plane trips or to aid in adjustment to new time zones can be very helpful. You may wish to discuss this option with your ITC.

TRAVELER’S DIARRHEA:
Traveler's diarrhea occurs when you ingest food contaminated with local bacteria to which you are not resistant. The onset is usually within 12-24 hours of ingestion. Symptoms usually include nausea, vomiting and diarrhea. More serious infections may include headache and fever. Untreated, symptoms usually begin to subside within 24 hours, but sometimes they will linger much longer.

If you are staying at a clean resort and do not plan to eat out at any "high risk" establishments, such as street vendors, you are probably safe. It should be noted, however, that people taking a PPI medicine like Zantac or Prevacid are definitely at higher risk of contracting this disease.

The condition can be treated with oral antibiotics, if you can get them to stay down. Your ITC may recommend that you take the medicine with you, just in case, along with an anti-nausea medicine like Zofran. The antibiotics usually prescribed are Zithromax, Cipro, or Septra. The last is available in a stable liquid form for young children.

This clinic does not recommend Pepto-Bismol or probiotics since they are of no proven value. We also do not recommend Imodium because it is contradicted in certain types of infectious diarrhea.

MOTION SICKNESS:
The scopolamine patch is the most effective and sustained treatment for motion sickness. It is safe for adolescents and adults. Younger children should try over the counter meclizine. Zofran can also be used for acute nausea.

OTHER:
Don't forget acetaminophen, ibuprofen, chewable antacids, laxatives, antihistamines, and sun screen SPF 30 or above. Most travelers will not need water purifying devices since bottled water is available almost everywhere.

*We would love to post a few of your favorite pictures on our web site!*