Wellness Tips for Travel

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THE THREE P’s

BE PROACTIVE
- Take steps to anticipate any issues that could arise during your trip
- Learn about your destination

BE PREPARED
- Pack smart
- Plan ahead for illness or injury

BE PROTECTED
- Be careful about food and water
- Use sunscreen and insect repellant as directed
- Try not to take risks with your health and safety (e.g. wear a seatbelt)
- Respect your host country and its people by following local laws and customs
- Pay attention to your health when you come home.

RISKS FROM FOOD AND WATER

While abroad, it can be very easy to contract illnesses though exposure to bacteria or contaminated food/water. Be aware of:

- Food and water (drinking and recreational) are common sources for introducing pathogens into the body.
- Types of infections:
  - Escherichia coli, Shigellosis, Bacillary dysentery, Giardiasis, Cryptosporidiosis, Noroviruses, Hepatitis A, Typhoid fever, Salmonella, cholera, rotavirus, protozoas, worms
Important Wellness Practices

HAND HYGEINE

Any surface that someone else’s dirty hands touched is dirty
- Soap and water—rub hands 15 seconds
- Alcohol gel (>60% alcohol)—more effective disinfectant—rub hands until dry
- If visibly dirty, essential to use soap and water—between fingers, under nails, back of hands, from palm to wrist
- Use towel to turn off faucet.
- Gloves not a replacement for hand hygiene—do hand hygiene before and after using gloves
- Carry pocket-size Purell with you for use after the latrine
- Carry baby wipes to cleanse hands which are visibly dirty

FOOD PRECAUTIONS

<table>
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<tr>
<th>Do</th>
<th>Don’t</th>
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<tbody>
<tr>
<td>• Always wash your hands after using the toilet and before eating</td>
<td>• Eat any food from street vendors or market stalls</td>
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<tr>
<td>• Always wash your hands after direct contact with preschool children, animals, or any feces (this includes touching your shoes)</td>
<td>• Eat leafy or uncooked veggies or salads. Some organisms in soil and water are not destroyed by normal cleaning methods</td>
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<tr>
<td>• Remember all raw food is subject to contamination</td>
<td>• Eat undercooked, raw, or cold meat, seafood, and fish</td>
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<td>• Eat foods that are well-cooked and served steaming hot (AVOID food allowed to stand for several hours at ambient temperatures)</td>
<td>• Eat or drink non-pasteurized dairy products such as cheese, yogurt, or milk. Be particularly wary of ice cream and other frozen confections that may have been made or stored in contaminated containers</td>
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<tr>
<td>• Eat breads, tortillas, crackers, and other baked goods</td>
<td>• Eat cold sauces such as mayonnaise, salad dressing, chutney, or salsa which are usually raw and made by hand</td>
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<tr>
<td>• Eat fruits, nuts, and veggies with thick skins, peels, or shells you</td>
<td>• Eat buffet foods such as lasagna, casseroles, and quiches unless you</td>
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remove yourself. Ideally wash the outside first and don’t contaminate the inside as you peel it

- Eat canned foods
- Only eat off of dry plates and glasses (wipe any wet spots)

Know they are fresh from the oven (not reheated) and have been kept steaming hot.

- Eat at buffets where there are no food covers or fly controls
- Eat cream desserts, custards, or sauces that may not have been adequately refrigerated

### BEVERAGE PRECAUTIONS

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<tr>
<td>• Use sealed bottled water or chemically treated, filtered, or boiled water for drinking and brushing teeth</td>
<td>• Drink tap water</td>
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<tr>
<td>• Drink beverages made only with boiled water whenever possible (e.g. hot coffee and tea). Water boiled for one minute is safe to drink</td>
<td>• Rinse toothbrush in tap water</td>
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<tr>
<td>• Beware of unsealed containers that may have been refilled.</td>
<td>• Use ice unless made from boiled, bottled, or purified water. Freezing doesn’t kill the organisms that cause diarrhea.</td>
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<td>• Purchase carbonated water if available—that way you will know that the bottle was not refilled with local water and recapped</td>
<td>• Drink from wet cans or bottles—the water on them may be contaminated. Dry wet cans/ bottles before opening them and clean all surfaces that will come in contact with the mouth. It is safer to drink directly from the can or bottle than from a questionable glass. Consider a sanitary straw if available.</td>
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<tr>
<td>• Carry safe water with you if you are going out for the day</td>
<td>• Drink fruit juice unless it comes directly from a sealed container; otherwise it may have been diluted with tap water.</td>
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</table>
**Should you get sick....**

*Traveler’s diarrhea is the most common travel-related illness. It is important to stay hydrated should you experience traveler’s diarrhea. Here is some information about the symptoms and treatment so you can stay as healthy as possible during your travels.*

**SIGNS and SYMPTOMS of TRAVELER’S DIARRHEA**

- Loose/watery stools, abdominal cramps, bloating, nausea, urgency, fever
- Duration usually less than 7 days (median 3-4 days)
- Self-limited (there are no curative treatments)
- Main treatment is to rest and rehydrate

**TREATMENT of TRAVELER’S DIARRHEA: FLUID REPLACEMENT**

- Most important aspect of treatment
- Drink as much liquid as you are losing from liquid diarrhea
- Small sips better than large volumes in terms of minimizing nausea
- Water, carbonated or flat beverages, soup broth (try to mix sweet and salty)
- WHO Oral Rehydration Salts with safe water (plan at least 2 Liters)
- Recipe—½ teasp salt, ½ teasp baking soda, 4 Tblsp of sugar to 1 Liter water

**SEVERITY OF ILLNESS:**

—**WHEN SHOULD YOU SEEK FURTHER MEDICAL ATTENTION?**

*Mild diarrhea (some extra bowel movements and abdominal cramps)*

- Use antimotility agent such as Imodium to reduce cramps and slow the volume of diarrhea. 2 tabs then 1 tab after each loose stool, up to 8 tabs a day
- Do not attempt to totally stop the diarrhea as it is a defense to rid the body of organisms

*Moderate diarrhea (loose stools, cramps, fever, and a sensation of being ill)*

- Ciprofloxacin 500 mg twice daily for 3 days will shorten duration from 3-5 days to 1-2 days. Can substitute azithromycin 1000 mg po once or 500 mg/ day for 3 days or levofloxacin 500 mg/ day for 3 days. Antimotility agent (Imodium) should be used.

*Severe diarrhea (bloody stool, profound fluid loss, low blood pressure, very sick)*

- Replace fluids, start Ciprofloxacin, and seek medical attention
- Avoid antimotility agents as they can occasionally worsen or prolong symptoms in people with severe diarrhea
**Other Important Health Concerns**

*Be sure that you are aware of the following health considerations and have considered the risk level in your region of travel, as well as the preventative steps you should take.*

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**FOODBORNE DISEASES**

**Hepatitis A**—spectrum from asymptomatic mild flu-like illness to severe liver disease  
*Prevention*—vaccine

**Typhoid**—transmitted via feces. Causes signs in 1-3 weeks with high fever (102-104°F), nausea, stomach pains, headache, loss of appetite, diarrhea  
*Prevention*—vaccine

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**INSECT BITES**

**Prevention of Insect Bites** (flies, fleas, ticks, and mosquitoes)

- Use clothing to help minimize the areas where insects can bite you. When possible wear tops with long sleeves, long pants and socks and shoes.
- The fabric should be thick enough to prevent mosquitoes and other insects from biting through the clothes.
- Light colored clothing (light green, white, tan, and khaki) is preferred as dark or bright colors tend to attract mosquitoes.
- Avoid perfume or sweetly scented soaps, powders, hairsprays as these may attract insects to you. Anything that leaves you/your clothes scented may attract insects.
- Apply sunscreen first and allow to soak in for 30 minutes and then repellent. Repellant should be washed off at the end of the day before going to bed.
- DEET (30%) should be applied to exposed, intact skin. It is effective for several hours. Do not apply to rashes, scratches, or other injuries.
- Insect repellent is only effective on areas where it has been applied, so be sure to cover all exposed areas of skin.
- A thin layer of repellent is sufficient. Over saturating the area doesn’t increase effectiveness.
- Apply permethrin-containing insect repellent to clothing, shoes, tents, mosquito nets for greater protection. Permethrin is not applied directly to the skin. This remains effective for up to 5 washings.
- The mosquitoes that transmit malaria are most active during twilight periods (dawn and dusk) or in the evening.
- The mosquitoes that are daytime-biters transmit dengue.
- Bed nets should be tucked under mattresses.
- Use a zippered plastic mattress cover or sealed plastic bag on camp mattress.
• Many insects fly low to the ground or crawl on it. When possible wear shoes with high socks to prevent bites. Avoid sitting directly on the ground. Don’t leave clothing sitting on the ground. (check before putting it on)

MOSQUITO-BORNE DISEASES—DENGUE
-Most important mosquito-borne disease in Central and South America
-Incubation 2-14 days (average 4-7 days)
-Flu like symptoms or rashes, bony pain, fever, headaches, hemorrhagic signs
-Mostly in urban areas. Aedes aegypti mosquito primarily a daytime feeder living near human habitations
-No specific treatment! Prevent by decreasing exposure to mosquitoes

MALARIA
-Most prevalent disease in the world
-Main symptoms—fever, chills, sweats, headache, muscle aches
-Prevention with chemoprophylaxis (Check to see what therapies mosquitoes are sensitive to in your region)

ENVIRONMENTAL HEALTH RISKS
Sunburn
• Higher risk for countries near the equator and areas at higher elevation
• Apply sunscreen at least 30 min before exposure and every 2 hours (SPF 15).
• Insect repellants are applied on top of sunscreen
• Prevention by limiting exposure. Avoid sun from 11am to 3 pm and use protective clothing
• If large areas of sunburn, may develop headache, fever, nausea, and fatigue

Heat Exhaustion
• Milder form after exposure to high temp and inadequate/ unbalanced fluid replacement (symptoms--headache, fatigue, nausea, rapid pulse, sweating)

Heat Stroke
• Body loses ability to control temperature.
• Temp can rise to over 106º in 10-15 minutes
• Can cause death/disability if treatment is not provided
• High body temp, red, hot, dry skin; rapid strong pulse; headache, dizziness

PREVENTION OF HEAT STROKE
• Increase fluid intake
• Avoid alcohol and drinking only liquids with large amounts of sugar
• Add a little salt to drinking water
• Depending on conditions consider limiting activities to morning and evening
• Wear hat and use sunscreen, even on cloudy days
TREATMENT OF HEAT STROKE
- Rest and drink cool, nonalcoholic beverages
- Try to lower body temperature (cool shower, bathe, or swim)
- For severe symptoms, seek medical attention

ZOONOSIS: RABIES
- Uncommon but potentially fatal if untreated
- Transmitted via broken skin and bites of infected animals (dogs)
- All bites/ licks should be considered possible exposures
- If an unvaccinated person is bitten, clean the wound with soap, disinfect, and get to clinic for vaccination within 48 hours

ZOONOSIS: LEPTOSPIROSIS
- Outbreaks during rainy season. Contact with livestock, wild animals, poor sanitation. Exposure by water or soil contaminated by urine from infected animals (swimming)
- Non-specific symptoms 7-12 days after exposure: fever 100-105°F, headache, muscle pain, stomach pain, chills, nausea, vomiting, back pain, joint pain, extreme exhaustion
- Most cases not serious but 10% are serious (specific treatment available)

References:
- UptoDate on Traveler’s Diarrhea, Immunizations for Travel
- DHMC travel clinic materials