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or write to:

Fran Lessans, R.N., B.S.N., M.S.

Passport Health

845 East Fort Avenue

Baltimore, Maryland 21230

Q. I am going to Peru and have tried the medications available for high altitude during a prior trip to Bolivia and it was not very effective. Do you know of some other medications that may now be available?

A. As of this printing there isn't anything newly approved, however there is currently a research study underway in Edinburgh, Scotland testing Viagra for altitude sickness and perhaps asthma. At high altitudes, blood vessels in the lungs contract, which can lead to potentially fatal pulmonary edema, making it difficult to breathe. Like male impotence, altitude sickness results when blood vessels become too constricted. Using Viagra to make blood vessels in the lungs dilate may aid the transfer of oxygen from the lungs to the bloodstream. The research project is using 100 volunteer medical students at high altitudes in Bolivia to determine if the blue pills used for erectile dysfunction will help in altitude sickness.

Q. I have recently accepted a new position that requires travel from New York to London on a monthly basis. I am 35 years old; do I need to be worried about coach-class syndrome at my age?

A. Yes, Coach-class syndrome or deep-vein thrombosis (DVT) has become a high profile issue over the last few years and has hit all ages. In fact many airlines are now handing out pamphlets suggesting in-seat ankle exercises to minimize the risk. Immobility, cramped seating and dehydration contribute to DVT. We suggest compression stockings, avoid alcohol, drink plenty of water and get up regularly to walk about the cabin.

Q. I am planning to spend the summer in the European Mediterranean area and Portugal. I heard that there is a disease there called Leishmaniasis. Can you tell me what it is and is there a vaccine available?

A. Leishmaniasis, transmitted by sand flies, is a protozoal disease endemic in 88 countries in Asia, Africa, the Americas, and southern Europe. The geographic distribution of Leishmaniasis has widened, and the disease is reported in areas in which Leishmaniasis was previously not endemic. While Leishmaniasis has always been endemic in the Mediterranean countries, the maximum northern latitude for sand fly survival is speculated to move further North because of global warming. Since there is no vaccine available, measures to reduce the exposure to sand flies, such as long sleeved clothing, repellents, and mosquito nets as well

as collars impregnated with repellents for accompanying dogs.

Q. My husband and I are both on Medicare; Will Medicare cover us while we are traveling abroad?

A. Medicare doesn't cover care outside the United States. Your Medigap plan or Medicare supplemental policy might cover emergency services rendered outside the country, but this would depend on your particular contract. It is best to take travel insurance. A reasonably priced comprehensive plan is available on our web site www.passporthealthusa.com click on Travel Health Insurance.

Q. I am traveling to Russia and a Tetanus diphtheria shot has been recommended. I had a Tetanus shot about 4 years ago when I cut my foot on a piece of glass. Isn't it still good for my upcoming trip?

A. Your Tetanus shot is still good however diphtheria is common in 87 countries and even circulates in some parts of the United States and Canada. Because a large number of people were not immunized, an outbreak of diphtheria in the former Soviet Union in 1990 quickly became an epidemic resulting in more than 157,000 cases with 5,000 deaths. Diphtheria is spread from person-to-person and the most common form is also the most dangerous. It infects the throat and tonsils. Bacteria growing in infected areas produce a poison that can cause heart failure and paralysis.



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THE ONE ITEM TO PACK (ALWAYS): COMMON SENSE

By: Larry G. Baratta, M.D., Ph.D.

President/CEO, Passport Health of Hollywood and Boca Raton Florida

The most general question people ask us in our travel-medicine clinic is: What is the best way to protect myself while traveling? Our response is: Use common sense.

Simply put, common sense is your best defense and will be your best traveling companion when you put it to use. First and foremost, health and safety go hand in hand. Travel safety starts with ensuring the preservation and maintenance of the traveler's health. Therefore, vaccinations and medicines might be required and are highly recommended for travel worldwide.

Don't forget to take insect repellent that contains an effective chemical called DEET if traveling to a warm, potentially mosquito-infested climate. As with well-trained Scouts, the other motto to remember -- and use -- is: Be Prepared.

BEFORE YOU GO

And that means remembering the following:

- Check with the U.S. State Department website, www.travel.state.gov/travel_warnings.html, for travel warnings.
- Make sure that all medications are properly labeled. It's also a good idea to bring a copy of the prescriptions and, should you be using narcotic substances, a letter from your doctor identifying such medications. This could prove helpful should a security or customs official ask you about them.
- The most common concern is traveler's diarrhea. One of the facts of life is that we all have to eat and drink, no matter where we are in the world, and this presents ample opportunity to contract this dreaded nightmare. Upward of 50 percent of travelers are stricken with this illness. The bacteria are

known as E. coli, and a special form has been known to reside in undercooked beef, leading to many deaths in the United States. The onset of traveler's diarrhea usually occurs within the first week on the road. Commonly associated symptoms are nausea, vomiting, abdominal cramping, bloating, fever, urgency and malaise. Most cases resolve in a few days without treatment. However, a few days out of a two-week trip is substantial.

- The best way to prevent this illness is by avoiding foods or beverages purchased from street vendors or other places where unhygienic conditions may be present. Also, avoid eating raw or undercooked meat and seafood and raw fruits and vegetables -- unless you've peeled them yourself. Tap water, ice, unpasteurized milk and dairy products are associated with increased risk of traveler's diarrhea. Safe liquids include bottled beverages, hot tea and coffee, beer, wine and sealed bottled water. You would also be well advised to take an antibiotic, anti-motility agent and oral-rehydration solution with you.
- Some destinations have specific vaccinations the traveler should get before leaving. The vaccines that every traveler should get by default are the ones for hepatitis A and B and Tetanus/diphtheria. Hepatitis A is acquired through contaminated food or water. One would be smart to take this protection, since recovery from hepatitis A takes months. The hepatitis B vaccine is recommended in case a traveler needs a transfusion. The blood supplies of underdeveloped countries are not necessarily well screened. And the course of this disease is even more severe than that of hepatitis A, although both may be fatal. ■

TRAVELER'S GUIDE TO SAFE DENTAL CARE

By: OSAP Organization for Safety and Asepsis Procedures

Congratulations! You've decided to finally visit that corner of the world you've always dreamed of seeing. The flights are booked, the hotel reservations made....

Most likely, dental care is not on any traveler's Top 10 list of "Things to Do," but what should you do if you get a toothache, or crack a filling? Most of us are aware of the high U.S. standards for infection control and safety in health care. But in many parts of the world, gloves, sterile instruments, disposable needles, and safe water are not routine elements of dental practice. Furthermore, the standards for educating and licensing dental professionals vary widely. In case of a dental emergency, knowing what to look for when seeking dental care in a foreign country can help a traveler avoid unnecessary risks.

Take steps to ensure a healthy trip free of dental emergencies.



- No one wants to have a trip ruined by a toothache. To minimize the risk of a dental emergency, visit your dentist for a check-up before your trip. Schedule your appointment to allow enough time to complete any necessary or outstanding dental work before your departure date.
- Before you leave on your trip, tend to decayed teeth, broken fillings, and other dental problems. Inform your dentist of your travel plans and ask about any other potential dental problems.
 - Have your teeth cleaned by the dentist or hygienist. This is particularly important if you have periodontal (gum) disease.
 - If you will be away for an extended time, consider having partially exposed lower wisdom teeth removed. The fleshy covering over the tooth creates a food trap that can cause pericoronitis, a potentially serious infection that can spread to parts of the head and neck.

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TRAVELER'S GUIDE TO SAFE DENTAL CARE *continued from page 1*

By: OSAP Organization for Safety and Asepsis Procedures

- All root canal treatment should be completed before travel to avoid potential infections and pain due to pressure changes during air travel. If the work cannot be completed, ask your dentist to insert a temporary paste filling to reduce the risk of problems.

Most insurance policies don't provide coverage for care delivered overseas, so it makes sense to take care of any potential problems before leaving home.

Vaccinations

In the United States, most dentists have been vaccinated against hepatitis B virus, a serious blood borne infection affecting the liver. In the developing world, however, hepatitis B infection rates remain high.



- Consider hepatitis B vaccination if you will be traveling to areas where many people are infected.
- Consult Passport Health for hepatitis B and other immunization recommendations before traveling outside U.S. borders.

Finding a Dentist

Even with the most thorough examination, no dentist can guarantee a dental emergency will not arise. So what should a traveler do if a dental problem occurs far from home?



- If staying in a hotel, the concierge or senior management staff may be able to suggest a dentist. American Embassy or military personnel-or even other American expatriates living in the area-also may be good sources for a recommendation.
- If you do not speak the local language, a dentist proficient in English is preferred to allow effective communication of the dental problem and treatment as well as questions about infection control practices.

Assessing infection control practices in the dental office

Once you have found a dental office, examine its level of compliance with basic infection control and safety standards. "Infection control" seeks to prevent the transmission of disease-causing organisms by:

- reducing their numbers (for example, through cleaning, disinfection, and sterilization of instruments or surfaces);
- preventing exposure by using barriers like gloves, masks, gowns, and protective eyewear, or by covering surfaces to keep them from becoming contaminated; or
- improving a person's ability to resist disease-causing agents through the use of vaccines and antibiotics.

The most successful approaches use a combination of all three.



Practicing universal precautions means that the dentist and staff wear a new pair of rubber or vinyl gloves for each patient and wear face masks and protective eyewear for all procedures that generate spatter or splash. It also means that all instruments used on patients are either disposed of or are properly cleaned, then disinfected or sterilized after use.

In the developed world, most dental offices apply the principles of universal precautions, which are based on the assumption that any patient could

be infected with a blood borne virus such as the human immunodeficiency virus (HIV) or hepatitis B and C viruses. As such, the highest standards of protection are always applied.

Basic hygiene remains important. Experts in medicine and dental infec-

tion control agree: Hand washing is the single most important element in preventing the spread of infection. Dentists and staff should always wash their hands immediately before donning gloves as well as immediately after removing them.



Gloves protect both patients and healthcare workers from disease transmission. The dentist and all assistants involved in treatment should use new gloves for each patient. Gloves should never be washed and reused. It degrades the material and compromises its ability to provide an effective barrier.

Injection needles are no longer reused in most parts of the industrialized world because they pose a high risk of spreading blood borne viruses. Unfortunately, because disposable needles are more expensive, re-usable needles may still be in use in many developing countries.

Heat sterilizing instruments in an autoclave or dry-heat sterilizer kills all potential disease-causing agents that might remain after patient treatment. All heat-stable instruments that are exposed to a patient's blood should be processed in this manner, including the dental drill. Any instruments that cannot tolerate high temperatures should be thoroughly cleaned and soaked in disinfectant chemicals.



All instruments used for surgery, including tooth extraction, must be heat sterilized and should be stored in a sterile wrap or container until it is used.



Items that are used only outside the mouth, or that never contact blood, can be cleaned and then wiped or soaked in less powerful disinfectant chemicals.

High-speed dental drills and other devices used in dental treatment need water to work properly. In many parts of the world, safe drinking water is not always a fact of life. Water that is unsafe to drink is also unfit for dental treatment, especially surgery. In areas that lack potable water, dentists can use bottled water delivered using a bulb syringe. Boiled water is considered acceptable, although bottled sterile water is preferred for surgery.

Choosing Medications

Protection against potentially harmful drugs is nonexistent in some countries.

- Do not buy medications "over the counter" unless you're familiar with the product.

Checklist for Obtaining Safe Dental Care

Before you leave:

- Visit your dentist for a check-up to reduce the chances you will have a dental emergency.
- Consult Passport Health for appropriate vaccinations.

When seeking treatment for a dental emergency during your trip:

- Consult hotel staff or the American Embassy or consulate for assistance in finding a dentist.
- If possible, consider recommendations from Americans living in the area or from other trusted sources. If the answers to any of the asterisked (*) items are "No," you should have reservations about the office's infection control standards. If the answer to a two-star item (**) is "No," consider making a swift but gracious exit.

When making the appointment, ask:

- Do you use new gloves for each patient?*
- Do you use an autoclave (steam sterilizer) or dry heat oven to sterilize your instruments between patients?***

DENTAL CARE

continued from page 2

- Do you sterilize your hand pieces (drills)?* (If not, do you disinfect them?)*
- Do you use new needles for each patient?*
- Is sterile (or boiled) water used for surgical procedures? ** (In areas where drinking water is unsafe, the water also may cause illness if used for dental treatment.)

Upon arriving at the office, observe the following:

- Is the office clean and neat?
- Do staff wash their hands, with soap, between patients?*
- Do they wear gloves for all procedures?*
- Do they clean and disinfect or use disposable covers on surfaces touched during treatment?
- While it is important to be sensitive to cultural differences when making inquiries about the safety of dental care, remember that it is your health and well being that are at stake.

If you would like to learn more about OSAP and its mission, contact them at 800-298-OSAP or locate them on the World Wide Web at www.osap.org, where expanded information on dental infection control is available to patients seeking dental treatment in the United States or abroad.

Bon voyage and safe smiles!

READER COMMENTS

If you are considering having custom made clothes in Asia, have them made in Thailand, as Hong Kong was quite a bit more. Joan Flinger

Dave Alley recently returned from Taringeri, Tanzania, East Africa. "I am grateful for all the help and information I received at Passport Health. I got food poisoning, took the antibiotics and CeraLyte and recovered quickly. I think the CeraLyte helped me recover from jet lag, since part of the jet lag doldrums is dehydration. The chicken broth flavor was especially tasty and went down easily."

Al, Dave, Joe and Steve recently returned from Safari in East Africa. "The knowledgeable staff at Passport Health saved the day. We were hunting, skinned a leopard and all of us developed dark skin lesions accompanied by influenza-like symptoms within a week of leaving. After several frustrating calls to several doctors, we called Passport Health, a consult and referral immediately diagnosed and treated African Tick-Bite Fever (ATBF) caused by Rickettsia Africae transmitted by infected Amblyomma ticks and endemic throughout sub-Saharan Africa. Passport Health saved four lives."

"Am I glad I visited you before I came here! I've been eating things I've only seen in zoos before! Chongqing is amazing. Thanks for your help Passport Health." Dave Korroch

Jessica L. Mendoza has returned from a trip to Peru. "Travelers checks were a problem. Many banks wouldn't cash them at all and some cashed only small amounts. Banks explained that visa traveler's checks are used for money laundering. If you want to see Machu Picchu go soon as plans are underway as several commercial ventures including a tram and hotel construction may hamper sightseeing. Don't try to navigate Huyana Picchu, as it is very dangerous. A tourist fell to her death last year."

Paul S. Verhaegen lived in Africa and learned of several homeopathic remedies for scorpion and snakebites that worked. "For a mild scorpion bite use a car battery and jumper cables to shock the area stung. The shock neutralizes the poison. For a snake or scorpion bite use the shinbone of a cow boiled in milk, then blackened on hot coals and again boiled in milk. If held over the open wound, the poison will be drawn out and the pain eliminated." The above anecdotes are offered by the traveler and are not proven through scientific methods or advocated through Passport Health.

Debbie Wilkins traveled to New Guinea. "There are plenty of fruit trees everywhere but don't pick the fruit. The trees are on someone's property and picking fruit is a crime. It's fun visiting tribal folks and they are friendly to tourists. They are known for their tempers and often kill one another. Sentences are often commuted with livestock. The amount of livestock depends on the social position of the one killed."

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