

Vol. 13, No. 1

Spring 2003

# WARNING: A SHOT IN THE ARM COULD SAVE YOUR VACATION

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

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

Aviation has certainly made our world seem smaller. Within a few hours from South Florida, a traveler can be in the Caribbean, Latin America -- even Europe. But for those without proper immunization and vaccinations, the excitement of international travel can be quickly dashed by illness.

While some vaccinations are required before you can enter a country, many are left to the travelers' discretion. Most travelers take for granted that they won't get sick.

Some -- like local patients we'll call John and Linda -- end up paying a high price.

A year ago, the pair traveled to South America on an eco-adventure, with stops in the Amazon basin, Brazil and Colombia. That all changed after Linda got sick with Hepatitis A from eating, of all places, in their five-star luxury hotel in Rio de Janeiro. this serious mosquito-borne virus that can be severely debilitating and possibly deadly. Note: Most countries requiring yellow fever vaccination will accept a medical waiver for persons with a contraindication to the yellow fever vacci-

She didn't realize it at the time. It was after they headed to Recife, a popular seaside resort in northern Brazil, that Linda complained of classic flu-like symptoms, which lasted for a few days. When her symptoms progressed and the whites of her eyes began to turn yellow, she went to the local hospital, where she was diagnosed with Hepatitis A. The rest of their vacation was spent at the hospital. Total recovery time: about six months -- common in Hepatitis A cases -- and a staggering number of days out of work.

The good news is that Hepatitis A and many other diseases common to international destinations can be prevented with a vaccine or oral medication. Among them are Montezuma's revenge (serious bouts of uncontrollable diarrhea), typhoid fever, Hepatitis B, Japanese encephalitis, meningitis, rabies, influenza, tetanus, diphtheria and malaria. Injections or



medication generally are required before you leave on your trip.

The federal Centers for Disease Control (877-FYI-TRIP; www.cdc.gov) publishes vaccination guidelines and requirements for travelers. In my opinion, those guidelines don't always go far enough, and I sometimes recommend additional measures.

Here's a general rundown:

South America: Travelers heading to Brazil before going on to other South American countries affected with yellow fever are required to get the yellow fever vaccine. It protects against this serious mosquito-borne virus that can be severely debilitating and possibly deadly.

Note: Most countries requiring yellow fever vaccination will accept a medical waiver for persons with a contraindication to the yellow fever vaccination. That might include infants less than four months old, pregnant women, people with hypersensitivity to eggs, or those with an immuno-suppressed condition.

Other disease protection measures recommended for South America are the Hepatitis A & B and tetanus/diphtheria vaccines.

Central America: Vaccination protocol for travel to Central America is similar to that of its southern neighbor, with the following additions.

- Typhoid fever vaccine. This common, serious illness is transmitted through contaminated water.
- Rabies vaccine. This virus transmitted by animals is also encountered throughout the region.

Asia: What you'll need depends on exactly where you're going. Generally, I suggest  $\triangleright 2$ 

## TAKING OFF FOR MEDICAL TREATMENT ABROAD: CHEAP BUT RISKY

By: Peter Savage & Fran Lessans, RN. BSN, MS Passport Health

Act now while the U.S. dollar is strong. Get your expensive dental work done in Budapest, your face-lift in Costa Rica or your nose job in Rio de Janeiro, Brazil, and save a bundle! Several articles have appeared recently advertising such savings: "The money saved vs. the cost of American dental services financed a two week vacation in Budapest." "A face lift in the U.S. can cost anywhere from \$10,000 to \$20,000. In Costa Rica, a face lift costs approximately \$3,500." "In Rio, liposuction costs as little as \$900 while a breast augmentation can be had for \$2,300 or less." The articles conclude that a major medical procedure overseas is a bargain you should not pass up.

While there are good, well-qualified dentists and plastic surgeons outside the U.S., there are a number of reasons why you might think twice before looking for bargain basement medical care overseas.

The first concern is to know the accreditation and training of a medical provider at a foreign destination. The patient who flew to Budapest for dental work never inquired about credentials but was eager to discuss the cleanliness of the office and the friendliness of the staff. The facelift in Costa Rica was performed by a doctor who did his residency in reconstructive surgery at Columbia University in New York and returns to Florida periodically for continuing education. But researching such information in a foreign language over long distance may be more complicated than calling the doctor's office and asking a few questions. Without a reliable reference from a responsible source, you may be buying a disaster. Medical equipment and supplies in foreign countries may be inferior in quality as compared to the products available in the United States. An American dentist recently replaced a mouth full of foreign fillings that were only two years old due to inferior  $\triangleright 2$ 

845 East Fort Avenue • Baltimore, Maryland 21230 410-727-0556 • Fax: 410-727-0696 • Toll-Free: 1-888-499-PASS (7277) www.passporthealthusa.com

Call our main number for an appointment at any of our locations which include: Baltimore, Bel Air, Catonsville, Columbia, Severna Park/Millersville & Lutherville

## **WARNING** continued from page 1

precautions against Hepatitis A & B, typhoid fever, tetanus/diphtheria, malaria and Japanese encephalitis.

Of these, Japanese encephalitis may be the least familiar. But this common mosquito-borne viral encephalitis can be deadly. Most infections are without symptoms, but among people who develop a clinical illness, the mortality rate can be as high as 30 percent. A three-dose vaccine can help protect the traveler for three years.

Africa: Again, what you need depends on exactly where you're going.

For those heading on safari or another adventurous trip, the standard menu of precautions includes vaccines for Hepatitis A & B, tetanus/diphtheria, typhoid fever and yellow fever, and prophylactic medication for malaria.

Africa also has a unique "meningitis belt" that extends from western Africa in Gambia and Guinea and moves easterly through Mali, Nigeria, Chad, Sudan, to western Ethiopia and Kenya. In other words, if you're planning to trek up Mount Kilimanjaro or go four-wheeling though the African bush, get vaccinations for meningitis, yellow fever, Hepatitis A and B, and oral prophylaxis for malaria.

Elsewhere: Don't be fooled into thinking that only travelers going to Latin America, Asia and Africa are susceptible to contracting infectious diseases. Hepatitis A is a worldwide infectious disease spread by food and water, and even those staying in exclusive resorts or on cruise ships can contract it.

Tips for staying healthy on the road

- Get vaccinated before your trip.
- Wash hands often with soap and water.
- Drink only bottled or boiled water, or carbonated drinks in cans or bottles. Avoid ice cubes.
- Eat only thoroughly cooked food or fruits and vegetables you have peeled yourself.
- Don't eat food purchased from street vendors.
- Don't eat dairy products unless you know they have been pasteurized.

Protect yourself from insects by remaining in well-screened areas, using repellents (applied sparingly at 4-hour intervals) and permethrin-impregnated mosquito nets, and wearing long-sleeved shirts and long pants from dusk through dawn.

# DISASTER PREPARATION FOR INTERNATIONAL TRAVEL

By: Peter Savage, Vice President Passport Health Author of the <u>Safe Travel Book</u>, Lexington Books

Disasters during a trip come in all sizes and impacts (often on Sunday afternoons), but advance planning and threat analysis can minimize the risk and consequences. In planning ahead, health and security should receive equal attention - you are more likely to get food poisoning than expect an earthquake in Mexico City, but plan for both AND avoid the risk of kidnapping by knowing what cab to take (and not to take-step 2 below).

#### STEP ONE

Purchase emergency medical assistance, insurance and evacuation policy. This gives you 24/7 hour emergency contact in any language, covers medical expenses and gets you out of there in a crisis. Reputable sources: call 1-888-499-7277 and ask for Health Pass Plus

#### STEP TWO

Know what the risks may be for health, disease, street crime, money changing, communication (international and local), taking a cab or driving a car. Sources:

www.passporthealthusa.com (health)

www.cdc.gov (health)

www.travelstate.gov (security)

www.ijet.com (\$25 travel intelligence up to the minute with cell phone alert rental at \$47) and/or, call the Regional Security Officer at the U.S. Embassy at your destination-get the overseas number from the State Dept. Country Desk for your destination 202-647-4000

### STEP THREE

Make sure that someone at home and/or in your office knows your itinerary and KNOWS THAT THEY ARE EXPECTED TO RESPOND IF YOU FACE A CRISIS ON YOUR TRIP. Your home/office file should include:

- A copy of your passport with visa pages
- Copy of airline ticket (or faxed confirmation)

- Itinerary with dates and phone numbers
- Copy of note with any special health conditions/medicines
- Copy of the International Certificate of Vaccination (yellow card)
- Notation of blood type and Rh factor
- Contact numbers for assistance, insurance, evacuation
- Credit card details (if lost or stolen)
- Power of attorney for traveler's bank account if emergency funds must be wired

#### STEP FOUR

Apart from your passport, keep a copy of your passport and also note the U.S. embassy/consulate telephone no., your blood type and Rh factor.

- As a back up, carry up to \$500 in U.S. currency carried in a waist security pouch.
- Take two credit cards and carry only one on your person in case of theft.
- Take an extra set of reading glasses
- Carry a small key ring pen light flashlight(Many items mentioned are available at
- www.magellans.com or 1-800-962-4943)
  Diarrhea kit for severe cases: 1-888-499-
- Diarrhea kit for severe cases: 1-888-499-7277, Passport Health.
- Perhaps add, depending on destination:
- Water purification, available at Passport Health
- Emergency escape smoke hood (to escape hotel, airplane fire) at Fume Free, <u>www.quickmask.com</u>
- A cell or satellite phone (Mobil at 212-532-2645 or <u>www.ijet,com</u>)

### STEP FIVE

Relax with the knowledge that you have covered all the bases for your trip.  $\blacksquare$ 

## CHEAP BUT RISKY continued from page 1

quality of the filling material. Outdated or "no longer in use" materials and equipment are often sent to underdeveloped countries at discounted prices.

Your concern about credentials and training should not be confined to the doctor alone. Questions need to be asked about the entire support staff and system. The doctor may be a star-Pitanguy in Rio de Janeiro is a world famous plastic surgeon with many qualified trainees-but what about the anesthesiologist, nurses and other medical staff? Are the safety procedures for sterilization of surgical implements, dental picks, and needles at the highest standards or is the equipment antiquated like in many third world countries? The Costa Rican face-lift involves a three-day postoperative stay in a private hospital in San Jose. How do you evaluate the risk of care at such a hospital before hand? Do they reuse needles and other equipment?

Medical complications during surgery are not to be taken lightly. You are in a foreign environment where access to your dentist or doctor is complicated, where your records are written-if available-in a foreign language. Is the dentist's office or surgical clinic prepared to handle an unforeseen development? If there are problems is there an appropriate back-up system in place and is safe blood available? A deficiency in any one of these areas leaves you defenseless at best.

## **Reader Comments**

Rosalie Falter traveled to Thailand and was skeptical about receiving pre-travel immunizations. Rosalie's reaction upon return: "I was shocked to see polio cases in Thailand in two children's homes I visited while there. I was glad I had a booster shot before my trip."

"Thanks so much for all your help! Tanya and Connie are outstanding examples of 'customer care' professionals. Your organization exudes professionalism, attention to detail and 'going the extra mile' for your customers. You have made our trip preparation a pleasure!" Terri and Rob Norris

Mike Norris recently returned from Nepal. "When trekking through Nepal, tie excess shoelaces around ankles, as leeches tend to attach themselves from vegetation to hanging laces and wreck havoc with ankles and feet".

Louis Brown recently returned from a family reunion in Mexico. "Thanks to Passport Health I returned without any problems. I received the recommended Hepatitis A vaccine prior to travel. My brother went without protection and came down with Hepatitis A. He was very sick, missed 5 weeks from work and now has to be on medication for a year. My brother's ordeal was preventable with a simple vaccine. Thanks for your care Passport Health!"

Wally Josephson traveled to Brazil. His luggage was lost with his medications and security items for 4 days. "Fortunately I remembered

the advice given to me at Passport Health and I was fine. I had a supply of medication in my carry on bag."

Emma Sergi suggests buying museum tickets before you leave home. "Summer lines can be long and hot. I found www.ticketweb.com helpful for advance purchases."

Claude Grant trusted his tour guide to keep an eye on his nap sack, which carried his camera and related expensive equipment left on the seat of the touring van in Malawi. "The guide/driver left the van unlocked while he used the facilities; the pack was stolen. Neither the guide/driver nor the company owners apologized for the van's being unattended. The police took a report but were useless."

Kara Hamilton & Matt Novotny traveled for three months throughout Africa. "Bring a water purification system or bottled water into Malawi, as bottled water is not available. However, souvenirs are much cheaper in Malawi. Be sure to continue taking malaria prophylaxis even if you suspect minor side effects. A British traveler stopped taking his malaria medicine and had to be medivaced due to severe cerebral malaria."

Joann Feeley and her husband recently returned from Kenya. "Take the Passport Health mosquito kit which contains DEET and Permethrin and use it as recommended. Mosquitoes usually love me, but I used the

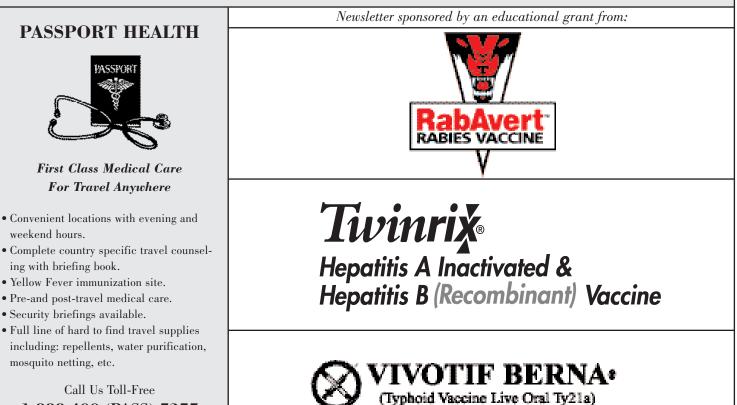
repellents as directed and wasn't bitten at all, while many on my tour were tortured by mosquitoes."

Paula Staufer was in Ghana for six months. Paula suggests taking advantage of the specialized medications and supplies available at Passport Health. "Everything came in very handy."

Andy Foery recently returned from India and Indochina. "If you are not staying in a 5 star hotel take your own top sheet, as top sheets are not provided. Take 2 charge cards for large purchases, as merchants will not process big ticket items on one charge card.'

Alfred Walsh lived in Thailand for 18 months. He learned to enjoy eating insects, a culinary delight. "Boiled silkworms taste a lot like corn. Fried grasshoppers, grubs and cicadas taste like crunchy potatoes. Baked snake with sauce tastes like chicken."

Leonard & Elizabeth Homer recently returned from a South African safari. They suggest splitting time between a contained camp and open camp. "You are guaranteed seeing beautiful animals in the contained camp but may see more exotic animals on the open range. Also, don't go out at night alone. A woman went night swimming and was attacked by a lion. The animals were using the pool as their watering hole and she was invading their space."



1-888-499-(PASS) 7277

Or Check Out Our Web Site www.passporthealthusa.com

BERNA ... We're known for making typhoid immunization **PAINLESS** 



PRESORT STD US POSTAGE PAID Baltimore, MD Permit No. 6925

**Return Service Requested** 

**A.** Yes. There are more than 300 fish species and numerous shellfish species that may cause toxic poisonings. Puffer fish, sunfish, porcupine fish, and blue-ringed octopus have the most powerful toxin with a case fatality rate from 50 to 60%. Toxic fish and shellfish poisonings tend to occur in warmer tropical areas and in coastal regions. Marine animals that are extremely toxic in one geographic area may be completely harmless in another area. No antitoxins are available for any of the toxic seafood poisons and cooking, freezing, salting or gastric acid will not inactivate toxins. Prevention of toxic seafood poisoning in travelers consists mainly of monitoring for the occurrence of red or brown tides, avoiding spoiled and potentially toxic fish and shellfish, and adhering to local restrictions and advisories. Advisories may not be available in underdeveloped or remote areas of the world, and travelers to these areas should seek advice from local health care authorities or avoid eating the catch.

**Q.** I will be traveling for four weeks and know that travelers' diarrhea is a problem. I am planning on taking plenty of Imodium and drinking plenty of beer. Do I need anything else?

**A.** Yes. Alcohol may exert a very limited protective effect against traveler's diarrhea. However, beer consumed in increasing amounts, is associated with increasing rates of traveler's diarrhea, possibly because gastric acid is diluted by large amounts of fluids. Antimotility agents alone are not satisfactory as such an approach is contraindicated in patients with dysentery. Prophylactic advice to avoid traveler's diarrhea should include information about conscientious food and beverage intake, but it is unrealistic to believe that the majority of travelers would adhere to such recommendations throughout travel. If the traveler does not need a speedy treatment, traveler's diarrhea is selflimiting (2-5 days). However, many travelers do not want to jeopardize their complicated itineraries with tight time schedules, prolonged bus rides, multiple flights, and so forth. Prophylactic medication in the travel kit should include an antibiotic, antimotility agent and oral rehydration salts. Self-medication against traveler's diarrhea with antimicrobials and antimotility agents should always be limited to 48 hours; thereafter, consultation of a health professional is imperative.

**Q.** I know that the water supply is not safe in India so I am taking along a water purification system but do I need to take my purification system on the plane?

**A.** Passengers may want to think twice before using an airplane's tap water. While airlines insist it's safe to drink, some studies from Japan to the Netherlands have turned up some unfriendly bacteria in the tank water, including E. coli and the germ that causes Legionnaire's disease.

**Q.** I am traveling to Australia and know that malaria is not an issue. Do I need to worry about any mosquito-borne diseases?

**A.** Ross River virus is a threat to travelers to Australia, Papua New Guinea and the Solomon Islands. This infection causes a flu-like illness, along with pains in the muscles and joints that may persist for some time. Anti-mosquito measures-long sleeves, screened or air conditioned rooms and the use of insect repellents is the only means of prevention.

**Q.** I am traveling to Asia this summer with my family and know I need some shots. Can't my primary care physician order what I need?

**A.** Your primary care physician cannot possibly keep abreast of the rapidly changing field of worldwide infectious diseases and epidemics, cannot stock all the immunizations that may be needed and cannot devote the time needed to properly prepare a traveler. Your health and safety depends on a comprehensive pre-travel consultation that includes four basic actions: 1) evaluation of your health and immunization history, 2) careful analysis of the itinerary, 3) evaluation of vaccines to administer and observation after the immunizations have been given, and 4) education for disease prevention and health maintenance. A comprehensive service should take from 45 minutes to an hour depending on destination and prior travel history.

**Q.** My buddies and I are going fishing in Brazil. We like to eat what we catch. Are there any fish species we should stay away from?