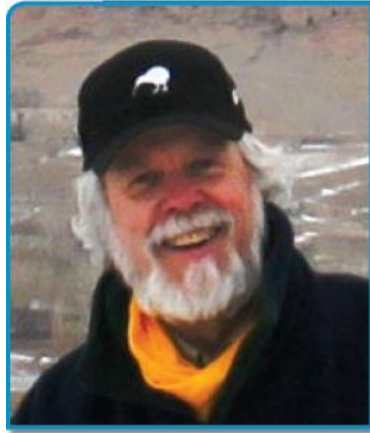




Dr Marc Shaw

Worldwise Travellers Health Centres
Auckland

Preparation of the Last Minute Traveller - Concurrent Workshop Repeated

Saturday, 22 June 2013

Start 8:30am

Start 9:35am

Duration: 55mins

Duration: 55mins

Sovereign

Sovereign



  **Rotorua GP CME 2013**

General Practice Conference & Medical Exhibition

20-23 June 2013 | Energy Events Centre | Rotorua

PREPARATION OF THE LAST MINUTE TRAVELLER

Marc Shaw *DrPH, FRGS, FRNZCGP, FACTM, FFTM (ACTM), MFTM RCPS (Glas), DipTravMed*

Professor, James Cook University, Townsville, Australia

Medical Director, WORLDWISE Travellers Health and Vaccination Centres

WORLDWISE OnLINE (worldwise.co.nz)

'Academic Travel Health Information for Professionals'



‘A wise traveller never despises his own country’

William Hazlitt



Marc Shaw, WORLDWISE Travellers Health Centres, NZ – ‘The Last Minute Traveller’

There are many stories of travellers travelling without appropriate advice

Travellers failing to get vaccinated

Rada Rouse

FEWER than 5% of travellers surveyed as they prepared to fly from Sydney to Asia were vaccinated before the trip, a conference will be told this week.

Anita Heywood, a PhD scholar and research assistant at the National Centre for Immunisation Research and Surveillance, Sydney, conducted a survey that found just 5% of travellers were vaccinated against hepatitis A and B and even fewer against tetanus, typhoid and influenza.

"Nearly one-third of professionals... before they travelled, but rates of vaccination were low," Ms Heywood said. She was due to tell the Asia Pacific International Conference on Travel Medicine in Melbourne this week.

Her research revealed awareness among of potential threat destinations, such as

Nearly 16-85 years were interviewed at Sydney International Airport. They comprised 40% Australian and 60% Asian or other nationalities, including a high proportion of Chinese and Vietnamese students. Commenting, Dr Deborah Mills, medical director of the Travel Doctor clinics in Brisbane, said the rate of vaccination was surprisingly low, but it was known that people going home to Asia were often poorly protected. However, those returning to Asia to visit friends and relatives were at seven times higher risk of infection when travelling because they grossly under-estimated their risk.

The Role of the Travel Health Professional is to convert a pre-contemplator into a contemplator

smh.com.au
The Sydney Morning Herald

Traveller

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1. Disabled Australian tourist stranded
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Disabled Australian tourist stranded

ELLIE HARVEY
September 2, 2009

Father of four and grandfather of two George Dobson turned 85 in Sunday and is still trying to adjust mentally to his new life as a quadriplegic. He had no travel insurance and his family in Australia are desperately trying to raise the funds to bring him home.

Mr Dobson, who was in India with friends, was walking along a steep mountain road in a town called Mussoorie on August 18, when he tripped and fell about 15 metres over the edge. The Rockhampton man suffered spinal injuries that left him without



Overseas nightmare ... George Dobson.

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Marc Shaw, WORLDWIDE Travellers Health Centres, NZ – 'The Last Minute Traveller'

CHANGING TIMES ... THEN

5 years ago the Travellers Health ISSUES of the day were:

- 1. Emerging infections
 - Hepatitidies
 - Dengue Fever
 - Haemorrhagic Diseases
- 2. Malarial management
 - Therapies, *now and in the future*
 - Combination therapies
- 3. Vaccines: present/developing
- 4. Traveller: types and mobility
 - Where do travellers go and what do they do
- 5. Pre and post travel management guidelines
 - Responsible and systematic consultation



YEAR 2013 ... NOW

Now, the travel health issues of the day are:

– 1. The Traveller

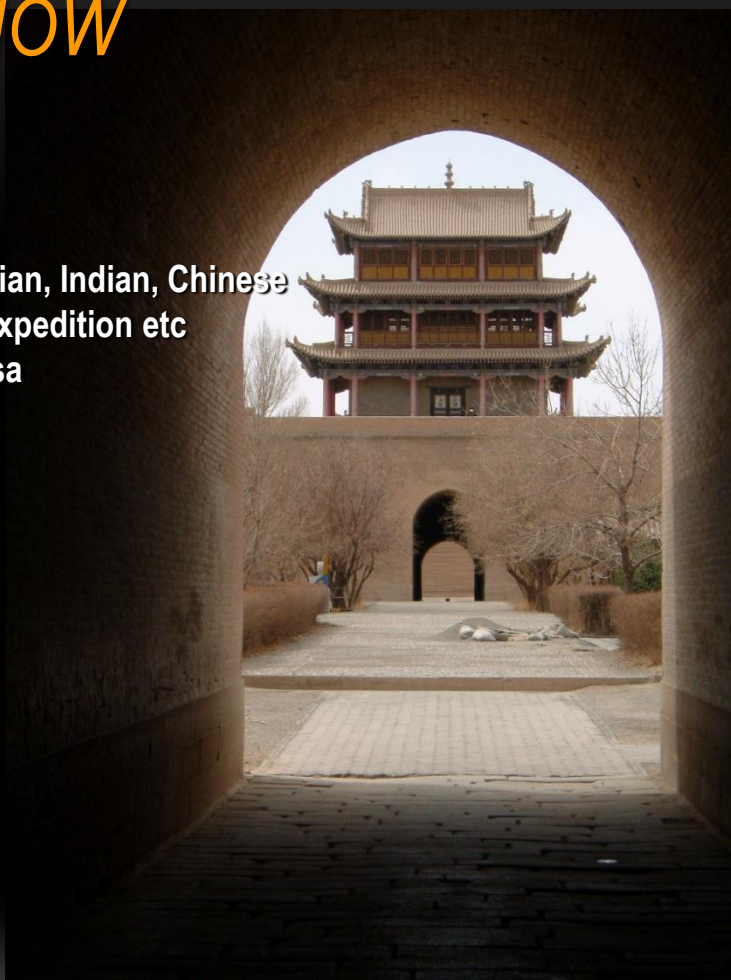
- Demographic change: 'BRIC travellers' Brazilian, Russian, Indian, Chinese
- Appropriateness of advice for type of travel: holiday, expedition etc
- Affect of the traveller on the host nations and vice versa
- The effect of Migrants and their travel to new regions

– 2. Environmental Travel

- Eco-economy
- Remote sports events
- Media awareness of the Globe
- Expeditions and adventure
- Religious travellers

– 3. Safety and Security: the Terrorism risk

- Personal Security
- Country-focused / Social security
- Biosecurity



YEAR 2013 ... NOW

Now, the travel health issues of the day are:

- **4. Development of strategic alliances**
 - Working with Governments
 - Crisis management and emergency responders
 - Humanitarian aid – Queensland, Christchurch, Japan
 - Destination image and reputation promoters
 - Health tourism marketers – medical travel
 - Working with corporate and travel comps.
 - Global 'linkups'
- **5. Disease Surveillance:**
 - Is either Globally and Regionally focused
 - Surveys by Tracking Disease
 - WHO, CDC
 - Satellite imagery
 - Inter-Government Public Health Response
 - dealing w. Outbreaks
 - 2013 Saudi (Corona), 2002 Singapore (SARS)



T.R.A.V.E.L. – AN APPROPRIATE ACRONYM

- **T** **TRANSMISSION** of Infections and Dis-ease
- **R** **REMEDIES** **Prescriptions** x 2 *CACHES*
 Med. Kits + **first aid** advice.
 G.P. letter re meds & med. conditions
 Medic Alert **Bracelet**
 Antimalarial Medication + SEs
 Treatments: *self-treatment*
- **A** **ACCIDENTS** **Accidents/Injury** Prevention
 AIR TRAVEL **Jet Lag**
 ADVENTURE Scuba Diving
 Trekking Backpacking
 Overland Remote

 ANIMALS Bites



T.R.A.V.E.L. – AN APPROPRIATE ACRONYM

- V VIOLENCE
VACCINATIONS *and adverse reactions*

- E EATING / DRINKING Ingestion
EXAMINATION Pre- and Post- travel
ENVIRONMENT Expedition Medicine
Altitude
EMERGENCIES Insurance/evacuation
EMERGING *infectious diseases*
Insect Avoidance

- L LIFESTYLE 'Sex Drugs Rock and Roll'



- Holiday Workout Plan



LAST MINUTE TRAVELLER (LMT)

- European study on Knowledge, Attitude, Practice [KAP] in passengers travelling to developing countries 2003. Revealed:
 - Reluctance amongst travellers to seek/adhere to advice
 - Lack of awareness to protect themselves against disease
 - Inadequate timing of seeking advice
 - Poor compliance with recommendations
- LMT are a rapidly expanding group
 - Thus, need to be targetted for travel health advice



LAST MINUTE TRAVELLER (LMT)

- 5 Point Check for LMT
 - Why are they travelling?
 - What advice do they need for their travel?
 - What can they have to maximally protect them?
 - How much time does the travel-health-provider have to give the advice?
 - What additional advice can be given?

IS THE INTENDING TRAVELLER OPEN TO THE ADVICE!





...ONE SECOND BEFORE...!



Marc Shaw, WORLDWIDE Travellers Health Centres, NZ – 'The Last Minute Traveller'

1. WHY ARE THEY TRAVELLING

- What 'sort' of folk travel at the last minute?

IS THE INTENDING TRAVELLER OPEN TO THE ADVICE! !



Marc Shaw, WORLDWISE Travellers Health Centres, NZ – 'The Last Minute Traveller'

BEFORE THE TRIP...

- **Pre-travel advice** is based on 3 main strategies:
 - **Altering behaviour**
 - Providing **prophylaxis** by drugs and vaccines
 - Providing **medication** for self-therapy



THE PRE-TRAVEL ASSESSMENT

- Mortality and morbidity are incr. in those travelling, esp. when their destination is in developing countries
- **Travel health risks vary according to –**
 - **WHERE** – Industrialised vs developing countries
 - City or resort or ... off the tourist trail
 - **WHEN** – season of travel
 - **HOW LONG** – Duration of stay abroad
 - **PURPOSE** – tourism vs business vs rural work vs VFR
 - **HOW** – Hygiene standard expected
 - Special activities – high altitude, diving, trekking etc
 - **HOST CHARACTERISTICS** – Healthy vs pre-existing cond, immune vs non-immune, age of traveller



THE PRE-TRAVEL ASSESSMENT

- **Personal Health**
 - Immunisations, allergies
 - Pregnancy, women's health ... O/C, hygiene
 - Children and infants ... immunisations, medications
 - Chronic disease ... diabetes, chest disease, HIV
 - Lifestyle qualities of living
 - Dental Check-up
 - Personal problems of travel ... psychology of travel
 - Holiday comfort
 - Travel Health Insurance
 - note any evacuation clause
 - note any exclusion clause



GENDER SEX AND TRAVEL ASSOCIATED DISEASE

Women and men travellers tend to get different illnesses

- World travel can make anyone sick but men and women tend to suffer different illnesses with:
 - women -** more prone to stomach problems and
less likely to develop fevers
less likely to get sexually transmitted diseases
- A study of almost 59,000 international travellers by GeoSentinel found women were more likely than men to come down with:
 - bouts of diarrhoea or other gastrointestinal problems,
 - colds
 - urinary tract infections *and* CID 2010; 50:826 - 832
 - adverse reactions to medications, such as those taken to prevent malaria.



GENDER SEX AND TRAVEL ASSOCIATED DISEASE

- **Men had higher risks of:**
 - fever, including from infections transmitted by mosquitoes, ticks or other such "vectors," such as malaria, dengue and rickettsia
 - Acute mountain sickness
 - Frostbite
 - sexually transmitted diseases
 - **Practically advice needs to centre upon:**
 - female travellers to bring anti-diarrhoeal medication.
 - men needing to pay particular attention to preventive measures, like frequently reapplying insect repellent.
- CID 2010; 50:826 - 832
- *The findings were based on data from 57 travel-medicine clinics throughout the world, part of a surveillance network designed to track travel-related illns and injuries*



TRAVEL HEALTH ADVICE CLINIC

- Must *focus* on important information for the LMT.
- Looks at *global travel concept as it affects the LMT*
- *Infectious diseases* account for up to 40-50% of travel advice
- Considers *relative risks* of diseases
- *Protects* ag. community diseases

- **Find out from all travellers**

current vaccination status

- 70% of 70 yr olds *NOT* protect. ag TET
- *Resp infections common thus= flu!*





...ONE SECOND BEFORE...!



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2. WHAT ADVICE DO THEY NEED FOR THEIR TRAVEL?

- What is the **primary advice** do they need for their travel?
 - What do they think they need
 - What does the Travel-Health-Professional think that they need

IS THE INTENDING TRAVELLER OPEN TO THE ADVICE! !



VACCINATIONS

- How can we assess the need for appropriate vaccines
- This is where a consideration of Epidemiology comes into pre-travel planning

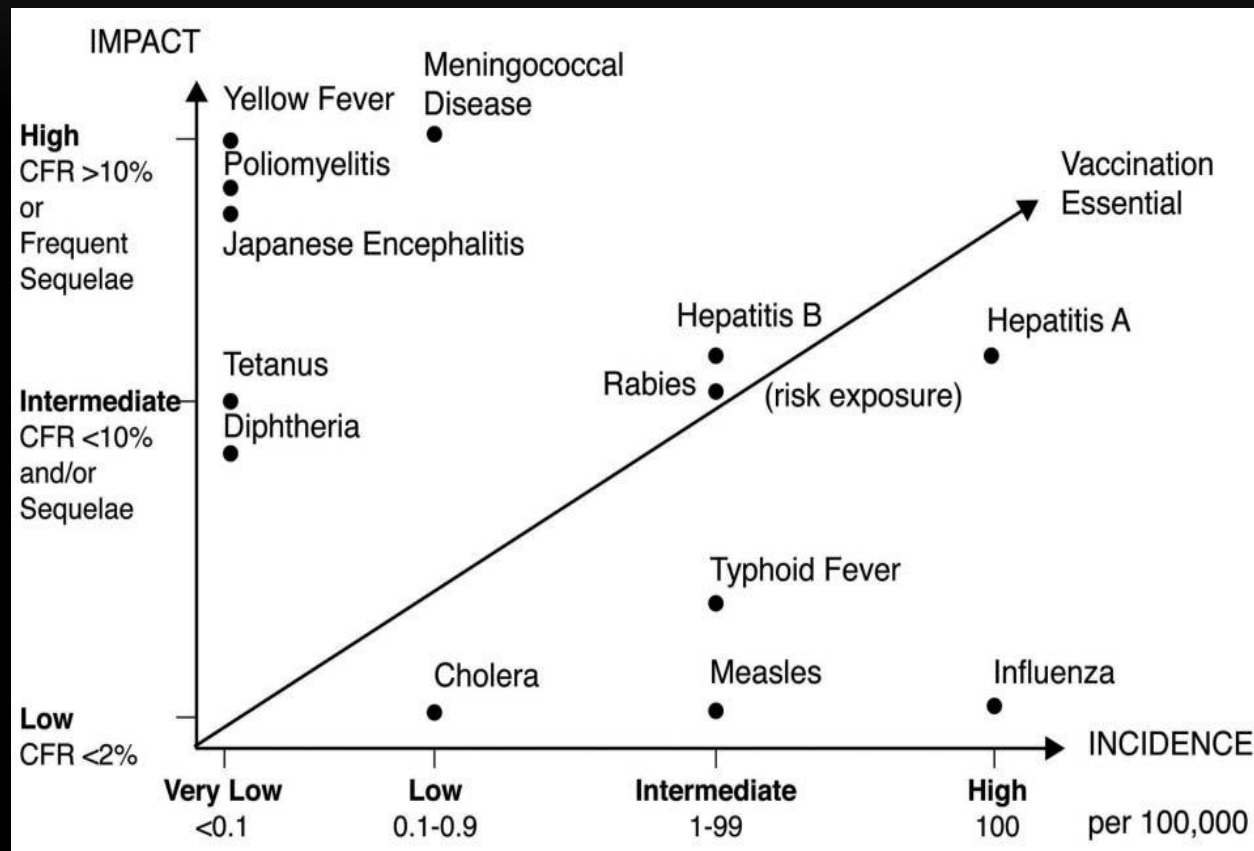


VACCINATIONS

- Immunity usually takes approximately 2 weeks to develop after vaccination
- Assess the traveller's itinerary
- Assess the traveller's planned activities
- Advice on preventative behaviours
 - Sex [Hep B, AIDS – look at preventative discussion]
 - Food and water



IMPACT & INCIDENCE OF VACCINE-PREVENTABLE DISEASES IN TRAVELLERS TO DEVELOPING COUNTRIES



CFR = case-fatality rate

• Steffen and Connor
JTM 2005; 12(1):26-35



3. WHAT TO DO TO MAXIMALLY PROTECT THEM

- What can the LMT have to maximally protect there health?
- Why have they come to you at this time... ?

For vaccinations [or not!] and anti-malarials [or not]

IS THE INTENDING TRAVELLER OPEN TO THE ADVICE! !



VACCINATIONS

- Routine Vaccinations
 - Check status and past history of vaccinations
 - Start, or complete, vaccination series if this is required
 - Administer first / additional doses of :
 - MMR
 - Polio
 - Tet/Dip/Pertussis
 - Seasonal flu vaccine
 - Hep A and Hep B and Typhoid are the three most freq vaccine-prev diseases in travellers



VACCINATIONS

- Recommended Vaccinations:
 - **Single-dose protection** – even when a traveller has limited time before departure, research supports the use of certain single-dose vaccines to initiate protection:
 - Hep A
 - Typhoid (immunity in 70% following vaccination one week before travel)
 - Polio
 - Meningococcal meningitis (conjugate if traveller is 2-55 years)
 - Yellow Fever
 - Meningitis



VACCINATIONS

- Recommended Vaccinations:
 - **Multiple-dose vaccines**
 - Hep B – accelerated schedule 0, 7, 21 and one year
 - Hep A/B – accelerated schedule 0, 7, 21 and one year
 - Japanese encephalitis – no accelerated schedule
 - Rabies – no accelerated schedule
 - A person who starts but does not complete a primary series, and is potentially exposed should receive the same post-exposure prophylaxis as a completely unimmunised person
 - Cholera



MALARIA

- Last-minute anti-malarial medication is possible for the last-minute traveller
- Choice of the anti-malarial depends upon:
 - Itinerary
 - Drug resistance at the destination
 - Medication contra-indications and precautions
 - Cost of meds
 - Patient preference
 - Last minute traveller prefer DOXY or MALARONE



4. HOW MUCH TIME IS AVAILABLE

- How much time does the travel-health-provider have to give the advice?

IS THE INTENDING TRAVELLER OPEN TO THE ADVICE! !





...ONE SECOND BEFORE...!



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TRAVEL HEALTH CONSULTATION

- Travellers need to plan to have medical advice 4-6 weeks before travel
- Last minute travellers:
 - Business men and women
 - Travellers attending an overseas emergency
 - Humanitarian Aid Workers
 - 'poorly organised' traveller!
- Advice needs to concern
 - Vaccinations
 - Health counselling and appropriate Medications
 - Anti-malarials
 - Insurances
 - Overseas health resources



FUCK IT



5. WHAT ADDITIONAL ADVICE

- What additional advice can be given?

- IS THE INTENDING TRAVELLER OPEN TO THE ADVICE! !

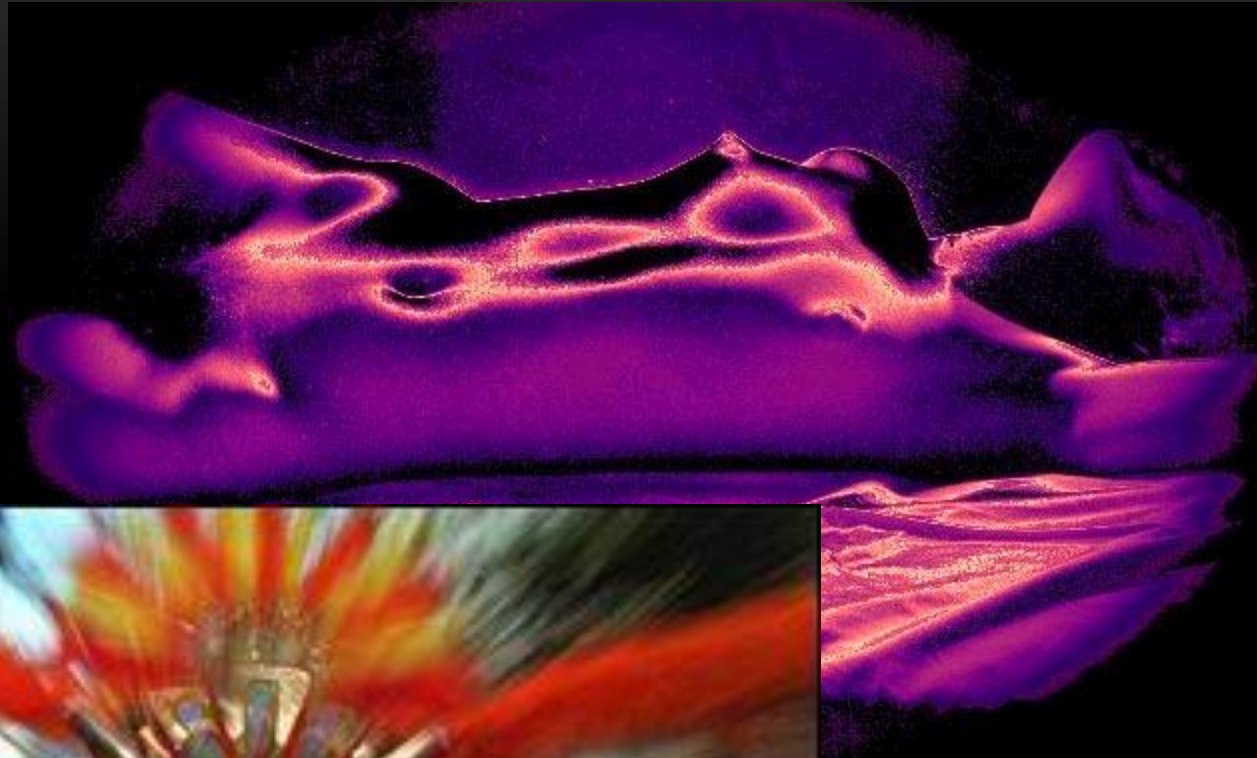


TRAVEL HEALTH CONSULTATION

- Safety and Security issues
- The need for a valid Travel Health Insurance
 - Check evacuation clause
 - ? Any exclusions
- Food and Water Care
- Insect avoidance
- Animal bite avoidance
- Issues related to long flights
- Medical kit
- Lifestyle and Sexually transmitted diseases



LIFESTYLE



Marc Shaw, WORLDWISE Travellers Health Centres, NZ – 'The Last Minute Traveller'



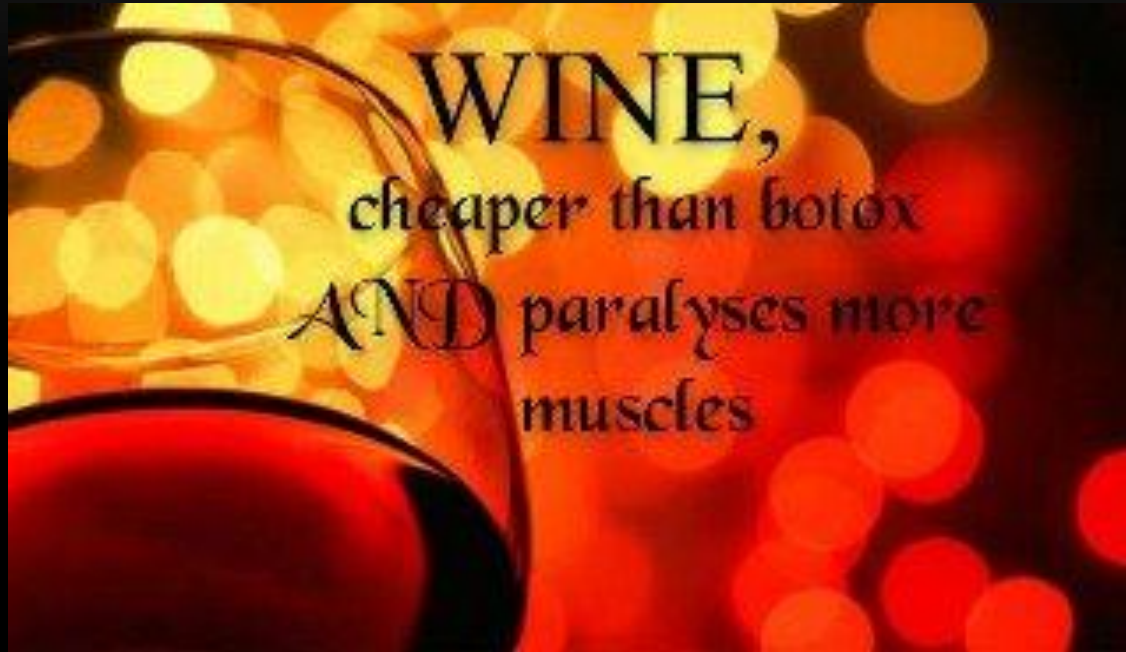
Lifestyle – the issues!

- **Alcohol and Drugs**
- Needs of **corporate travellers**
- **Loneliness and familiars:** *relationships/sex, taboos*
- **Temptations:** *drugs and alcohol, penalties, additives to drugs etc ...*
- **Travel distress...***air, sea, phobias, fatigue, timetables, waiting*
- **Dealing with moral and cultural issues:**
 - poverty, beggars
 - religions
 - women in society
- **Violence and theft:** dealing with ‘bad’ company
- **Illness and *brainwashing***



All travellers need to have humour...Whatever turns your crank!





WINE,
cheaper than botox
AND paralyzes more
muscles



Marc Shaw, WORLDWIDE Travellers Health Centres, NZ – 'The Last Minute Traveller'

AUSTRALIAN FIT2TRAVEL

- National *Fit2Travel* survey, asked 1000 Australians about their travel destinations and vaccination decisions, showed 73% of people were not getting vaccinated before they travelled.
- Only 13% were advised by their doctor that vaccinations were /not required.
- Of those NOT get vaccinated, 52% didn't think any vaccination was required for the country they were visiting, despite many of those surveyed going to Asian countries where vaccines are frequently required.
- DESTINATIONS:
 - Asian destinations were most popular, with 33% of people going to this region.
 - 5% went to New Zealand,
 - 14% visited countries in Europe,
 - 12% went to the United States of America and
 - 12% headed for the United Kingdom
- Travellers leaving from South Australia = most likely to be protected
 - 30% of travellers from this state opting for vaccination.



DISEASE PREVENTION ... ADVISING ON ...

- **S.T.D.s/H.I.V. The need for ‘sexual health and safety’**
 - Estimated - “**Weighing the risk**”. In Thailand there are est. 2 mill. prostitutes, most have had 5000 partners by age 19.
Approx 1/3 of male visitors have sex with prostitutes.
70% of them get S.T.D.s
- **Travellers’ diarrhoea and related conditions**
 - *ETEC /Cholera* viral environmental
 - *Giardiasis* amoebiasis campylobacter
 - *Worm infestations*
 - *Post-Travel diarrhoea and the relationship to IBS*





...ONE SECOND BEFORE...!



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Illnesses of travellers

- Travellers diseases and dis-eases centre around the systems:
 - Gastro-intestinal Tract
 - Respiratory Tract
 - Locomotor
 - Neurological
 - Psychological
 - Soft tissue



ROLE OF THE DOC/ NURSE in advising those who travel:

In the provision of preventative advice for travellers:

... we need to teach

- What to take
- How to use what is taken
- When to treat
- What to self treat with
- When to seek advice



FIRST AID – how can travel health advisers help

What to treat whilst travelling...

- Assistance in diagnosis of simple dis-orders:
 - Skin conditions
 - Respiratory tract infections
 - Bowel infections

How to treat it...

- Self treatment of various diseases
 - guide to recognition and management
 - simple, practical management protocols
- Self treatment of diseases like malaria
 - depending on location + duration of travel



Pharmaceutical Medical Kit - suggestions:

- Medication for: allergies, insect bites, colds and 'flu, and diarrhoea
- Antibiotics for: ear, eye, respiratory, stomach and skin infections
- Fever therapy (aspirin / paracetamol), and water treatments
- Medication for anti-fungal infections
- Medication for motion sickness, nausea and vomiting
- Anti-malaria medicines (where appropriate)
- A sufficient supply of any regular medication



There is a wisdom that needs to be learned with travel



...ONE SECOND BEFORE...!



Marc Shaw, WORLDWISE Travellers Health Centres, NZ – 'The Last Minute Traveller'



‘It is the job of a Travel Health Professional to guide the knowledge that contributes to the wisdom acquired by our travellers’

THANK YOU!

Worldwise Travellers Health NZ
‘NZ’s Travel Health Specialists’

marc.shaw@worldwise.co.nz



Marc Shaw, WORLDWISE Travellers Health Centres, NZ – ‘The Last Minute Traveller’