Information

You can be vaccinated against:

**Diphtheria**  
**Hepatitis A**  
**Hepatitis B**  
**Cholera**

**Meningitis** - gives 3-5 years' cover  
**Polio** - a full course lasts 10 years  
**Rabies** - 2 injections one month apart  
**Tetanus** - a full course lasts 10 years  
**Typhoid** - a single dose gives 3 years cover  
**Yellow Fever** - a single dose gives 10 years cover

Note that we longer provide Yellow Fever or Japanese Encephalitis vaccines at this surgery.

**Malaria Prevention**

2000 imported cases into the UK with 10 deaths per year. Take your anti-malarial medication for 7 days before entering the malarious area and for 28 days after leaving the area.

No prophylaxis is completely safe.

Avoid being bitten. Sleep in a screened room. Use equipment (purchased from chemist) to kill mosquitoes entering the room. Wear long sleeves and trousers at night. Use repellents on exposed areas of skin.

Take prophylaxis for 1 week prior to departure (2 and a half weeks in the case of mefloquine) while abroad and for 1 month on return.

For further information: [http://www-micro.msb.le.ac.uk/224/malaria.html](http://www-micro.msb.le.ac.uk/224/malaria.html)

No protection is 100% safe. Consider malaria in the case of a fever or 'flu-like illness within one year of overseas travel in an infected area (especially in the first three months).
Prophylaxis with anti-malarial medication is dependent on the area you are travelling to. Telephone: Malaria reference library (24 hour help line) 09065 508 908 (calls cost £1 per minute)

**Hepatitis A**

Hepatitis A is caused by the hepatitis A virus.

Transmission occurs if the faeces of an infected person is transferred orally to another individual through poor hygiene. This can occur if the person preparing food has not washed his/her hands after using the toilet. Particular care should be taken with uncooked food such as salads which may have been washed in contaminated water, or ice cream. Similarly, shell fish, living in water contaminated by sewage can transmit the disease. Do not drink the local tap water or use it to clean your teeth unless to know it is safe.

The disease takes 6-12 weeks to develop. Signs of the disease are: jaundice, fatigue, abdominal pain, loss of appetite and diarrhoea. These symptoms may last several weeks.

15% of people infected go on to have relapsing symptoms for 6-9 months.

**Hepatitis B**

Hepatitis B is caused by the hepatitis B virus.

Transmission occurs by a body fluid of an person carrying the virus being passed to a susceptible individual. Such transmission can occur through unsafe sex, intravenous drug users sharing a needle or an infected blood transfusion or blood product.

The use of condoms gives a measure of protection but should not be considered to be 100% effective.

The disease may take 4 months to develop and presents similarly to hepatitis A. The infection is lifelong and can cause cirrhosis, liver cancer, liver failure and death in a proportion of those infected.

Some people can we found as "asymptomatic carriers" of the virus without having presented with the illness but can pass it on to others.

**Diarrhoea**

Diarrhoea is an intestinal disorder characterised by abnormal fluidity and frequency of bowel movements caused by increased motility of the colon. The stools are watery and are passed at least three times a day.

Severe diarrhoea is dangerous because it causes rapid depletion of sodium and water, both of which are necessary for life.

Children are particularly susceptible to dehydration because of their large skin surface area relative to their size. Treatment should be given with oral rehydrating fluid (best bought before travelling). If the child has persistent
or convulsions.

Emergency treatment is by cooling the individual by wrapping them in wet towels or clothes. Immersion in a stream or the sea will help if appropriate.

The patient should be taken to hospital as soon as possible.

Heat exhaustion (because of excessive fluid loss) may lead to fatigue, weakness, anxiety and sweats. The individual may cold, pale, clammy and may faint.

Treatment should consist of placing the individual flat with their head slightly lower down. When they begin to recover small amounts or rehydrating fluid should be given.

Human Immunodeficiency Virus (HIV)

The acquired immunodeficiency virus has its effect by killing and damaging cells of the body's immune system. This then prevents the ability to fight infections and certain cancers.

HIV is transmitted in the same way as hepatitis B, that is through contamination of body fluids by unsafe sex, the sharing of needles by intravenous drug users or through contaminated blood transfusions or blood products. Preventative advice given for hepatitis B, applies to with this infection.

Remember that although a condom gives a measure of protection, it cannot be considered 100% reliable.

Yellow Fever

Yellow fever vaccination is a mandatory requirement for entry into a number of countries.

Similarly, bloody diarrhoea in any person will need medical attention, with anyone not responding to oral fluids or with diarrhoea occurring with vomiting and/or fever.

Deep Vein Thrombosis

Deep vein thrombosis (DVT) occurs when blood "pools" in the calves or pelvis. This may occur on long haul aeroplane travel where the individual is sitting for a long period of time in one position. The risk is the formation of a blood clot, then becoming detached and passing to the lungs, causing respiratory collapse.

To try and prevent a DVT, alcohol should be avoided and plenty of water drunk on the journey. Avoid sitting in one position for too long. Loose clothes should be worn and effort should be make to exercise the feet by moving them around or walking about in the plane. An aspirin taken 2 hours before the flight may prevent a blood clot forming. **Asthmatics, people with a history of gastric or duodenal ulcers or those who may be allergic, should not take aspirin.**

Typhoid Fever

Typhoid fever is caused by the bacterium, salmonella typhi which may be found in the faeces or blood of those having this illness but also in asymptomatic "carriers".

The disease is got by eating food or drink contaminated with the bacteria or if sewage containing the bacteria gets into the drinking water supply.

The symptoms of the disease are fever, headache, abdominal pains and a rash of flat, rose coloured spots.
Yellow fever is a viral illness transmitted through the bite of a mosquito. Symptoms occur 3-6 days after being bitten and consist of fever, muscle pains, backache and headache. After a further 3-4 days, 15% of those affected enter "the toxic phase" with jaundice, abdominal pain, vomiting and bleeding from the gums and mouth. A half of all people in the toxic phase die from renal failure. There is no specific treatment other than supportive care.

Visit this [web site](https://www.netdoctor.co.uk/travel/diseases/typhoid.htm) for further details on the subject and on vaccination.

Note that we longer provide Yellow Fever or Japanese Encephalitis vaccines at this surgery.

Other useful web sites:

**Typhoid**

[http://www.netdoctor.co.uk/travel/diseases/typhoid.htm](http://www.netdoctor.co.uk/travel/diseases/typhoid.htm)

**Japanese encephalitis**


**Rabies**


**Extra Tips:**

Never bathe in surface water, river or lakes unless you know they are free from Schistosomiasis (Bilharzia). In snake infected areas tuck your trousers tightly around your ankles and always shake your shoes before putting them on!

If you are going on a trek in the wild and off the beaten track, tell the local embassy where you are going and when you intend returning.

If you are going on an exotic holiday visit [http://www.masta.org](http://www.masta.org) a website which provides a database and information on health hazards in 250 countries, plus advice on immunisation and travel products.

**Altitude Sickness**

Cold is a factor generally experienced at altitude. Take precautions.
Altitude-induced illnesses include Acute Benign Mountain Sickness, the symptoms of which include headache, nausea, dizziness, loss of appetite, vomiting and insomnia, which can progress to Acute High Altitude Pulmonary & Cerebral Oedema, a life threatening disorder. Often occurs with rapid ascent to high altitude.

Avoidance of these conditions is best achieved by maximising the opportunity to acclimatise & this should be in the itinerary. Any onset of symptoms should prompt consideration of descent, or at least the decision to go no higher. Continued symptoms should trigger shift to a lower altitude.

Prophylaxis: for susceptible travellers, or if natural acclimatisation not possible, give Acetazolamide. Effective in preventing altitude illness, but may not prevent against cerebral or pulmonary oedema. Parasthesia in fingers & toes is a common side effect in the first 2 days of treatment. Sulphonamide allergy & impaired renal function are contraindications to it's use.

Click for more details.

Medical Contraindications for air travel

<table>
<thead>
<tr>
<th>Condition</th>
<th>Requirement</th>
</tr>
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<tbody>
<tr>
<td>Anaemia</td>
<td>If haemoglobin is less than 7.5g/dl</td>
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<tr>
<td>Cardiac failure</td>
<td>If uncontrolled</td>
</tr>
<tr>
<td>Cerebral Infarction (Stroke)</td>
<td>Until convalescence is completed</td>
</tr>
<tr>
<td>Contagion (and communicable diseases)</td>
<td>Until non-infectious Pre-book in-flight oxygen. but should not fly if short of breath at rest or after walking 50 metres</td>
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<tr>
<td>COPD</td>
<td>(acute) Until stabilised medically with resolution of the clot</td>
</tr>
<tr>
<td>Deep vein thrombosis</td>
<td>Up to 48 hours after application of plaster cast</td>
</tr>
<tr>
<td>Fractures</td>
<td>If recent and gastrointestinal</td>
</tr>
<tr>
<td>Haemorrhage</td>
<td>Wait 3 weeks after MI if back to normal routine</td>
</tr>
<tr>
<td>Heart Attack-uncomplicated</td>
<td>Wait until stable for at least 6 weeks</td>
</tr>
<tr>
<td>Heart attack-complicated</td>
<td>Wired Fracture. Unless with escort with wire cutters</td>
</tr>
<tr>
<td>Jaw</td>
<td>Normally 5-14 days. Retinal detachment may be 6 weeks</td>
</tr>
<tr>
<td>Operations</td>
<td>Until condition resolved</td>
</tr>
<tr>
<td>Middle ear infection (ear ache)</td>
<td>2-3 weeks after successful drainage and check x-ray</td>
</tr>
<tr>
<td>Pneumothorax (collapsed lung)</td>
<td>After 36 weeks (32 weeks for multiple pregnancies) Check with your airline company.</td>
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<tr>
<td>Pregnancy</td>
<td>Unpredictable, aggressive or disruptive behaviour</td>
</tr>
<tr>
<td>Respiratory disease</td>
<td>Marked breathlessness at rest</td>
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Sickle Cell (crisis)  Until 10 days later
Sinusitis (severe) Until the problem has resolved
Any condition That may be made worse by flying
Unstable conditions That have a risk of deterioration prejudicial to the person

For further information contact The Aviation Health Institute (AHI) Telephone 01865 739681 or web site

Medicines:

If you take regular prescription medicines, ensure that you have an adequate supply to cover the length of your trip. You might not be able to obtain the exact drug abroad and the quality may be questionable.

Insurance:

Ensure you have adequate travel insurance. In Europe form E111, obtainable from the Post Office, will enable you to receive medical treatment in countries of the European Union.

Private Travel Clinics

Sometimes we suggest our travellers visit private travel clinics for specialist vaccines or because it may be quicker for you to be seen if travelling at very short notice and we have no available appointments. Below are a list of available clinics.

**Chelmsford Medical Centre**, 85-89 New London Road, Chelmsford - 01245-253777

**Springfield Hospital**, Lawn Lane, Chelmsford - 01245-234134
Same day appointments; open to 9pm three days a week; no consultation charge.

**The Hospital for Tropical Diseases Travel Clinic**, Mortimer Market, Capper Street, off Tottenham Court Road, London WC1E 6AU
Appointments: 0207 388 9600  Fax: 0207 383 4817  [http://www.thehtd.org](http://www.thehtd.org)

**The Royal Free Travel Health Centre**, Pond Street, London NW3 2QG
Appointments: 0207 830 2885 Fax: 0207 830 2741

**Fleet Street Travel Clinic**, 29 Fleet Street, London EC4Y 1AA
Appointments: 0207 353 5678 Fax: 0207 353 5500

**Trailfinders Travel Clinic**, 194 Kensington High Street, London - Tel: 0207 938 3999

**British Airways Travel Clinics in London:**

- 156 Regent Street - opening hours Mon-Fri 0930-1715; Sat 1000-1600; No appointment needed
- 101 Cheapside - opening hours Mon-Fri 0900-1715; Tel 0207 606 2977 for appointment
- Victoria, 115 Buckingham Palace Road - opening hours Mon-Fri 0815-1600; Tel 0207 233 6661 for appointment