



# Travel Health Advice



## Common disease risks and vaccination advice

This is a guide only. Advice will vary depending on destination, duration of travel, types of accommodation and what types of activities you take part in. You should discuss your requirements with one of our nurses. If possible, make your first appointment up to 8 weeks prior to departure. Even if you are leaving at very short notice, always contact one of our nurses for advice.

### Yellow Fever

This disease is spread by infected mosquitoes normally from sunrise to sunset and is endemic in parts of Sub-Saharan Africa and South America. During outbreaks it has up to a 50% mortality rate and therefore the World Health Organisation (W.H.O) recommends vaccination against Yellow Fever if travelling to affected regions. In addition, some countries require a certificate proving vaccination before allowing entry. A single vaccine lasts for ten years and is available only at registered Yellow Fever Vaccination centres. Insect bite avoidance using repellents, mosquito nets and covering up in suitable clothing.

### Tetanus

The bacteria that causes Tetanus is present in soil worldwide and disease occurs when the bacteria gets in to a wound or even small cut. The disease leads to uncontrollable muscle spasms and possibly death. Travellers should ensure they have had a Tetanus vaccine within the last 10 years before they travel.

### Polio

Polio is a disease of the central nervous system usually spread through contaminated food and water. Many countries have eradicated Polio through vaccination although it still exists in some African and Asian countries and cases continue to occur worldwide. Boosters are recommended at 10 year intervals if travelling to an endemic country.

### Diphtheria

Diphtheria is a bacterial disease spread mainly by exhaled water droplets and occasionally through infected skin lesions. It can be fatal if left untreated. Travellers are at risk when mixing closely with the local population in most developing countries. If they are likely to be at risk, travellers should ensure they have had a Diphtheria vaccine within the last 10 years.

### Typhoid

Typhoid is spread through faecal contaminated food and water. The disease is common in areas with poor standards in food hygiene and preparation, and where suitable treatment of sewage is lacking. It is possible to contract Typhoid from shellfish, raw fruit or vegetables fertilised by 'night soil' (human waste). A feverish illness will develop 1—3 weeks after infection and without correct diagnosis and treatment, the disease can spread through the gut wall and cause a serious infection throughout the body. It is also possible to become a carrier of this disease when bacteria remain in the gut after symptoms have resolved but you continue to be able to infect others. This disease can be prevented by healthy eating and drinking and pre-travel vaccination. A single vaccine is valid for 3 years.

### Cholera

Cholera epidemics typically happen in areas where there are lots of people with very poor hygiene facilities (particularly slums and refugee camps) and areas affected by floods and rainy seasons. Most travellers should experience minimal risk of exposure to the Cholera, but the risk is far greater for emergency relief and health workers in refugee camps. There is an effective vaccine available for Cholera administered orally in two doses one to six weeks apart.

### Tuberculosis

TB is mainly spread through infected respiratory droplets, but also through unpasteurised milk. The BCG vaccine provides limited protection and is advised for health care workers and those under the age of 16 travelling for more than 3 months to high risk countries.

### Hepatitis A

This disease affects the liver and is usually spread through contaminated food and water or close physical contact with an infected person. It is common in developing countries where sanitary conditions are poor and the safety of drinking water is not adequately controlled. The disease can incubate for 3 – 5 weeks before illness develops. Adults can take many months to fully recover from infection whereas children often have very mild illness, but can easily pass it to others. Hepatitis A is prevented by eating 'safe' food, drinking 'safe' water and pre-travel vaccination. A single vaccine is valid for a minimum of 1 year, with one booster vaccine valid for 20+ years.

### Hepatitis B

Hepatitis B is a disease which affects the liver. It is associated with chronic liver problems leading to increased risk of liver cancer or cirrhosis. Approximately 350 million people are carriers worldwide, and the general infection rate is far higher in Asia, Africa and China than elsewhere where it can exceed 8% of the population. Many Hepatitis B infections cause mild symptoms and may not be recognised. However, infected individuals may develop in to being life long carriers. Hepatitis B is generally spread through unprotected sex and blood (via blood transfusion, dirty needles, piercing and tattoos etc), but may also be transmitted through body fluids. It is 100 times more infective than HIV. All travellers should consider a course of Hepatitis B vaccines especially if travelling long term, or those working with children and humanitarian aid workers. It is a 3 dose course, given over a 3 week to 6 month period.

### Rabies

Rabies is endemic throughout most of the world and causes approximately 60,000 human deaths per year. The virus is carried in the saliva of infected mammals (which may appear normal) and is usually spread by a bite, but licks on open wounds and scratches have been enough to transmit the virus to humans.

In the event of a possible exposure the area should be washed thoroughly with soap and water, irrigated with iodine based antiseptic or a high percent alcohol, and medical attention sought as soon as possible, ideally within 24 hours. The virus affects the nervous system and once symptoms develop death is inevitable, even with good medical care. A pre-exposure course of 3 vaccines is available and should be administered over a 3-4 week period.

### Meningitis

Sub-Saharan Africa has frequent epidemics of Meningitis particularly in the zone stretching from Senegal to Ethiopia during the dry season. Outbreaks have also been known during religious pilgrimages to Saudi Arabia. Meningitis is an inflammation of the surface of the brain. Transmission occurs from direct person to person contact and through inhaling infected droplets. A vaccine for strains A, C, W135 and Y are available and should be considered, especially for extended trips or if mixing very closely with the local population during risk season. A certificate of vaccination may be required if visiting Saudi Arabia. Please note not only Meningitis C is given in schools. A single vaccine lasts 3-5 years, this is dependant on Visa requirements.

### Japanese Encephalitis

This disease is spread through the bite of an infected mosquito normally between sunset and sunrise. It is most common in rural farming areas of Asia. Most infections have few symptoms and may not be recognised but severe cases can lead to inflammation of the brain and other symptoms which can be fatal. Risks to travellers are generally very low, but vaccination should be considered by people intending to spend a significant length of time in rural areas, particularly during the transmission season (monsoon). The vaccine is a course of 2 injections given 28 days apart for adults and 3 injections over a month for children.

### Malaria

Malaria is a common and life threatening disease in the tropics and affects many international travellers each year. It is caused by a parasite introduced by the bite of an infected mosquito that feeds normally from sunset to sunrise. Symptoms will develop 8 days or more after the infected bite. Severe illness or death can occur within a few hours of the first symptom. Early symptoms include high temperature with shivering, headache, muscle ache and weakness, vomiting and diarrhoea. Malaria is a far more serious disease for young children and pregnant women. Prompt medical treatment can be life saving. Anti-malarial tablets are recommended for at risk areas and the choice of drug will depend on your destination, medical history and budget. Avoiding insect bites using repellents, covering up with treated clothes and sleeping under a mosquito net are also essential to protect against Malaria and several other common tropical diseases spread by insect bite.

### Water and Food

In countries with poor sanitation, do not drink tap water or use it to brush your teeth unless it has been treated. Filtered, bottled, boiled or chemically treated water should be used. Some developing countries use animal waste as fertiliser. Certain foods, especially those growing close to the ground, are particularly prone to contamination and should be avoided. As a rule, only eat freshly prepared food that is thoroughly cooked and served very hot.

**Most of these vaccinations are available free of charge through the NHS. However, a small number do incur a charge. For further information regarding your requirements and whether or not you will be charged a fee please discuss this with one of our nurses who will provide you with the relevant advice.**