

Hospital for Tropical Diseases: Travel Health FAQs, Practical Tips and Tricky cases

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Practical tips

A number of useful resources for the consultation:

1. Check you have access to up to date information:
 - NaTHNaC
 - Travax (subscription)

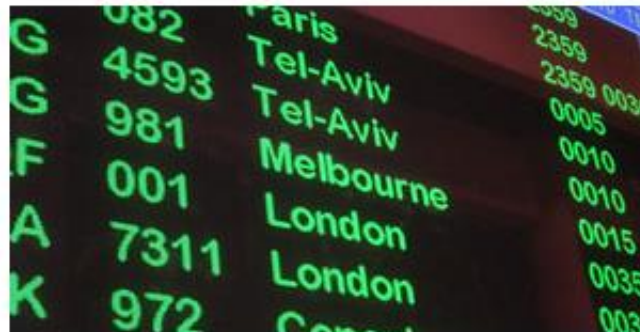
Protecting the Health of British Travellers

The National Travel Health Network and Centre (NaTHNaC) promotes standards in travel medicine, providing travel health information for health professionals and the public.

NaTHNaC is commissioned by Public Health England.



Health Professionals enter



Travellers enter

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Health Professionals

Topical Updates



Polio: WHO Declares Public Health Event of International Concern



Ebola Virus Disease



Ongoing outbreaks



Hajj and Umrah 2014



Natural disasters

Recent Clinical Updates

Regular reports on outbreaks of disease, vaccine supply issues, and recommended changes in advice and practice. The most recent Clinical Updates are listed below.

4 September 2014
Ebola virus disease: West Africa - update

1 September 2014
Locally acquired dengue fever: Japan (Tokyo)

1 September 2014
Locally acquired dengue fever in France

29 August 2014
Ebola virus disease: Democratic Republic of Congo

- Be notified when a new Clinical Update is posted
- View all Clinical Updates
- Search for outbreaks on the Outbreak Surveillance Database

News and Announcements

18 July 2014
British Behaviour Abroad
On 17 July 2014, the Foreign and Commonwealth Office (FCO) published their annual British Behaviour Abroad report. More information here.

8 July 2014
PHE publishes Chikungunya, England, Wales and Northern Ireland Report for 2013

Connect with NaTHNaC



Country Information



Travel health information for each country of the world

Outbreak Surveillance



Search for recent disease outbreaks

Advice Line for Health Professionals



Country Information

Locate Country

» World Map

- North & Central America
- South America & Antarctica
- Europe
- North Africa & Middle East
- Africa
- Asia & Oceania

» Alphabetical list of countries

A | B | C | D | E | F | G | H |
I | J | K | L | M | N | O | P |
Q | R | S | T | U | V | W | X |
Y | Z

Guidance

Making the most of this resource 

Rationale for risk assessment and risk management

Outbreak Surveillance




Search for recent disease outbreaks

World Map



Country

Please select a country 

Go

The maps provided on these web pages are designed for navigation only and should not be considered an authority on the delimitation of boundaries, the spelling of place names or the geographical locations of countries and state entities. For the purpose of these web pages the term "country" covers countries, territories and areas. Areas within a country may be shown separately where it is felt necessary in order to provide travel health information.

Country Information

Locate Country

» World Map

- North & Central America
- South America & Antarctica
- Europe
- North Africa & Middle East
- Africa
- Asia & Oceania

» Alphabetical list of countries

A | B | C | D | E | F | G | H |
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Y | Z

Guidance

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Cambodia

Welcome to the NaTHNaC Country Information page.

The information on this page should be used as part of a comprehensive pre-travel health consultation. Ideally this should be scheduled at least six weeks prior to travel. All travellers should have adequate travel health insurance.

Contents

On this page:

- Recent Clinical Updates
- General Health Risks
- Vaccine Preventable Risks
- Non-Vaccine Preventable Risks

Country Specific Links:

- NaTHNaC Outbreak Surveillance
- Foreign and Commonwealth Office (including information on security, safety and natural disasters)

[View Disclaimer](#)



Recent Clinical Updates

[Clinical Updates](#) | [General Risks](#) | [Vaccine Preventable Risks](#) | [Non-Vaccine Preventable Risks](#)
[Back to Top](#)

Clinical Updates provide information which may result in a change in travel health advice or practice.

Recent Clinical Updates for this country are listed below:

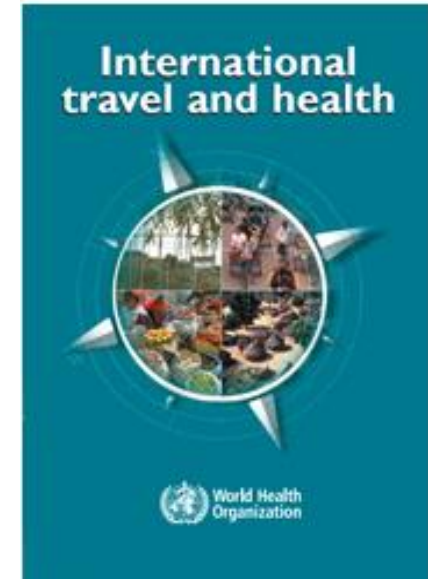
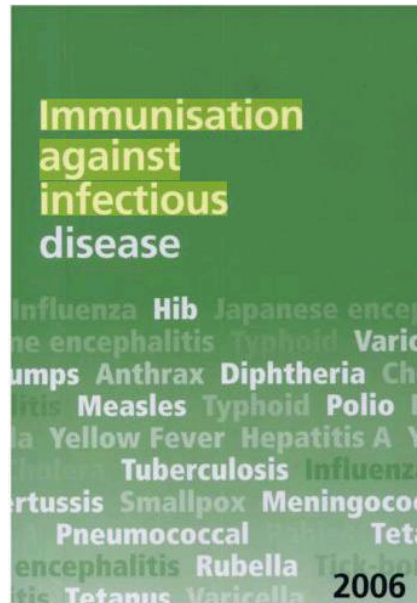


Public Health
England

Guidelines for malaria prevention in travellers from the UK 2014

- Recently updated
- Very helpful information on special risk groups such as pregnant women, children, asplenic travellers.

Useful resources



Online versions for up to date info – see handout

Risk assessment and risk management forms

TRAVEL HEALTH NURSING

Appendix 2: Sample travel risk assessment and travel risk management forms

Travel risk assessment (form A) – to be completed by traveller prior to appointment.

Name:	Date of birth		
Address:	<input type="checkbox"/> Male <input type="checkbox"/> Female		
	Telephone number:		
Email:	Mobile number:		
Please supply information about your trip in the sections below			
Date of departure:		Total length of trip:	
Country to be visited	Exact location or region	City or rural	Length of stay
1.			
2.			
3.			
Have you taken out travel insurance for this trip?			
Do you plan to travel abroad again in the future?			
Type of travel and purpose of trip – please tick all that apply			
<input type="checkbox"/> Holiday	<input type="checkbox"/> Staying in hotel	<input type="checkbox"/> Backpacking	Additional information
<input type="checkbox"/> Business trip	<input type="checkbox"/> Cruise ship trip	<input type="checkbox"/> Camping/hostels	
<input type="checkbox"/> Expatriate	<input type="checkbox"/> Safari	<input type="checkbox"/> Adventure	
<input type="checkbox"/> Volunteer work	<input type="checkbox"/> Pilgrimage	<input type="checkbox"/> Diving	
<input type="checkbox"/> Healthcare worker	<input type="checkbox"/> Medical tourism	<input type="checkbox"/> Visiting friends/family	
Please supply details of occupational/medical history:			

FAQs and tricky cases

- Young children
- Elderly travellers
- Travellers visiting friends and relatives (VFR)
- Pregnant / Breastfeeding women
- Hajj pilgrims
- Multi destinations
- Last minute travellers - is it ever too late ??

Infants

- It is 4.30pm on a Friday, you have been asked to fit in an extra patient:
- An 8 week old baby is going to Kumasi, Ghana tomorrow for 3 weeks (VFR)

What can we do to help protect the child?

- Malaria options?

Table 6: Table of paediatric dose of atovaquone/proguanil

Weight in kg	Proportion of adult dose	Number of paediatric tablets
5 to 7.9	0.125	½ paediatric
8 to 9.9	0.188	¾ paediatric
10 to 19.9	0.25	1 paediatric
20 to 29.9	0.50	2 paediatric
30 to 39.9	0.75	3 paediatric
40 or over	1.00	4 paediatric or 1 adult

Table 4: Doses of prophylactic antimalarials for children

Weight in kilograms	Drug and tablet size			
	Chloroquine 155mg	Proguanil 100mg	Mefloquine 250mg	Doxycycline 100mg
Under 6.0	0.125 dose ¼ tablet	0.125 dose ¼ tablet	See footnote*	Not recommended
6.0 to 9.9	0.25 dose ½ tablet	0.25 dose ½ tablet	0.25 dose ¼ tablet	Not recommended
10.0 to 15.9	0.375 dose ¾ tablet	0.375 dose ¾ tablet	0.25 dose** ¼ tablet	Not recommended
16.0 to 24.9	0.5 dose One tablet	0.5 dose One tablet	0.5 dose ½ tablet	Not recommended
25.0 to 44.9	0.75 dose 1-1/2 tablets	0.75 dose 1-1/2 tablets	0.75 dose ¾ tablet	Adult dose from age 12 years One tablet†
45 kg and over	Adult dose Two tablets	Adult dose Two tablets	Adult dose One tablet	Adult dose One tablet

From UK Malaria
guidelines

Remember ABCD
malaria prevention
guide

Travel vaccines for an 8 week old
going tomorrow?

What other travel health advice can we give for this infant?

Pregnant travellers

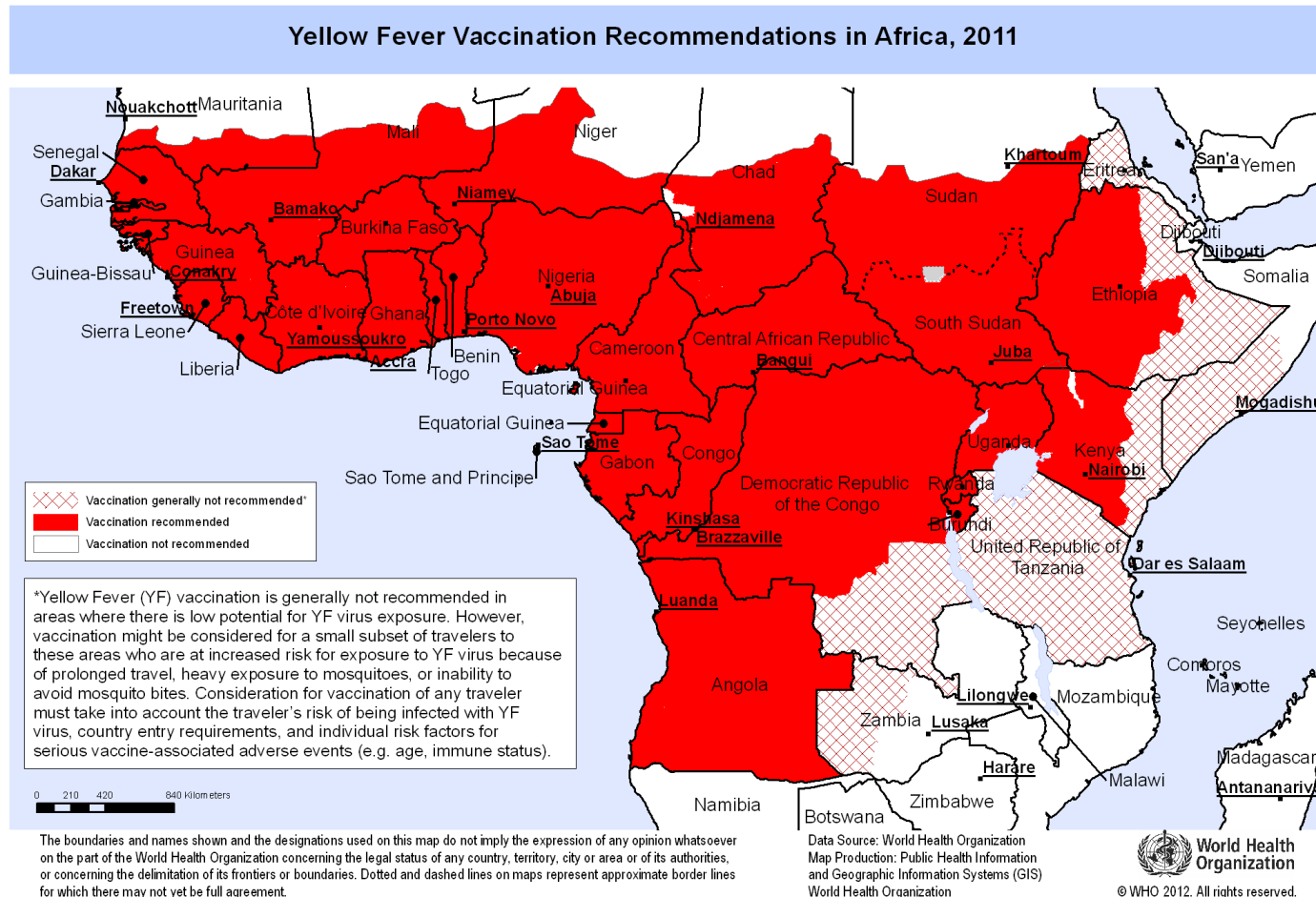
A 29 year old pregnant lady (11 weeks) has booked a trip to visit friends and family in Gambia in 4 weeks time. She plans to stay for 4 weeks.

She has lived in London for 10 years

- What would your malaria advice be?

- A) Explain the risks and recommend that the trip is put on hold.
- B) Atovaquone/Proguanil
- C) Doxycycline
- D) Mefloquine
- E) Chloroquine and proguanil with a folic acid supplement 5mgs daily

Could she have the yellow fever vaccine? No records of previous vaccination



Ghana: a yellow fever vaccination certificate is required for travellers over 9 months of age arriving from countries with risk of yellow fever transmission and for travellers having transited more than 12 hours through the airport of a country with risk of yellow fever transmission.

Scenarios - Pregnancy

- Other advice?

Tips: See health information sheet on pregnancy and travel on the NaTHNaC website

Breastfeeding travellers

- Family going to Pattoki near Lahore, Pakistan for 2 months, in 2 weeks.
- Mother is breastfeeding a 6 month old baby
- Current UK malaria guidelines indicate this is a malaria risk area and Proguanil and Chloroquine (P+C) are recommended.
- Can she use P+C?

Breastfeeding travellers

Medical records show no records of travel vaccines:

- Can this lady have inactivated vaccines?
- Can she have live vaccines?

Hajj

- 75 year old man is attending for a meningitis ACWY vaccine for the Hajj



Ministry of Health KSA, 8 Aug 2014:

- In response to international outbreaks of disease, the MoH recommends that elderly people, pregnant women, children, and those with chronic diseases postpone the performance of the Hajj and Umrah rituals for this year for their own safety.

Other advice for the Hajj?

See health information sheet on Hajj and Umrah 2014 on the NaTHNaC website

Other advice for the Hajj?

- Along with standard vaccines consider seasonal flu and hepatitis B
- Accidents / injuries / animal bites
- Heat/cold
- Insurance
- Food/water and insect bites

Multi destinations

A traveller is going to:

- Rural areas in Sumatra, Indonesia – 2 weeks (recommended antimalarials P+C)
- Thailand beaches 1 week (none)
- Vietnam risk areas 2 weeks (doxy, atovaquone/progunail)

What would you recommend?

Vaccine planning

- Lady had BCG vaccine last week in her left arm, she needs a range of vaccines for travel to the Amazon in Brazil in 4 weeks.
- What do we need to think about when planning the vaccines?



Public Health
England

Revised recommendations for the administration of more than one live vaccine

Introduction

For many years, Immunisation against Infectious Disease (the Green Book) has contained a recommendation that when two live vaccines are required in the same individual, then the vaccines should either be given on the same day, or separated by an interval of at least four weeks. This was based on early studies with measles and smallpox vaccines,¹ and supported by the theory that interferon production stimulated by the replication of first vaccine prevented replication of the second agent, thus leading to a poor response to the second vaccine.

Following the recent introduction into the routine schedule of two live vaccines not given by a parenteral route (live attenuated nasal influenza vaccine and oral rotavirus vaccine) the evidence to support this general recommendation was reviewed. Based upon the available evidence and on the different immune mechanisms used by the various vaccines, in February 2014 the JCVI² agreed that the guidance to either administer the vaccines on the same day or at four week interval period was not

Last minute traveller

- Journalist going to remote areas in Nigeria in 3 days for 1 month, he has not had vaccines recently but is in date for yellow fever
- He would like hep A, typhoid, diphtheria, tetanus, polio, rabies booster, hep B booster, cholera, meningitis ACWY
- Can we give all of these today?