

Application of emporiatrics in minimizing travelers' health risks

Saurabh R. Shrivastava,
Prateek S. Shrivastava,
Jegadeesh Ramasamy

Department of Community Medicine, Shri Sathya Sai Medical College and Research Institute, Kancheepuram, India

Dear Editor,

Emporiatrics or travel medicine deals with the prevention and management of health problems of international travelers.¹ The number of people undertaking international travels is on the rise every year and with that, travel-related risks to their health are increasing.² Travel on a global scale exposes many people to a range of health risks varying from exposure to different disease agents to changes in the physical/biological environment, all of which can lead to ill-health.^{2,3} However, many of these risks can be minimized by appropriate travel planning and precautionary measures.^{2,3} The need of maintaining the health of travelers has been realized in different studies.^{4,5}

The mitigation measures should start right from the assessment of the determinants of the health risks to which travelers are exposed: *e.g.*, health status before undertaking travel (*viz.* underlying chronic disease/low immunity); place of travel (*viz.* facility of accommodation/hygiene-sanitation/provision of medical services); purpose and duration of travel and travelers' behavior.⁶ Preventive strategies can be planned based on the risks to which travelers can be exposed. The travel must be planned well in advance and safeguard measures should be taken before, during and after travel.

Actions which the traveler must take prior to the commencement of the journey should be learning about the destination (ascertaining health risks prevalent in the area, climate, availability of health care facilities, etc.); medical consultation for necessary immunizations or for an ongoing health concern;⁷ obtaining special travelers health insurance for destinations where health risks are significant and

medical care is expensive/not readily available; and carrying a medical/first-aid kit.

During travel to the concerned destination, travelers should ensure an adequate sleep before leaving, wear loose and comfortable clothes, and have light meals and plenty of water. During their stay-period, they should be careful about food and water safety, practice safe sex, minimize injuries by wearing closed-toe shoes to prevent cuts/wounds/insect or snake bites/or infection from parasites, practice swimming only in pools filled with clean-disinfected water, abide by local traffic regulations to avoid road traffic accidents, and regularly use an insect repellent to prevent insect bites.^{2,3}

The active measures should not be confined to the period of travel. Rather, all travelers, after return, must undergo medical examination if they have spent more than three months in a developing country, they suffer from a chronic disease or the existing disease condition has worsened, they consider that they have been exposed to a serious infection during the travel, and they experience illnesses like fever, persistent diarrhea, jaundice, skin or genital infections, in the weeks following their return.²

In low-resource countries where there are constraints on availability of resources (*viz.* healthcare services), there is an immense need for advocacy by the policy makers and facilitation of travel medicine as a separate specialty by the Government. Clinicians and private medical practitioners should be made acquainted with the travel medicine/diseases which may occur in patients with a history of foreign travel so that they should be aware of the risks when treating them.⁸

To conclude, in order to avoid any deviation from healthy status, every traveler has to be proactive. Emporiatrics will have an important role in future years not only in identifying new risks but also in establishing new methods of therapy and prophylaxis for the travelers' benefit.

References

1. Burchard GD. Travel medicine-the next 10 years. *Eur J Med Res* 1999;4:399-402.

Correspondence: Saurabh R. Shrivastava, Department of Community Medicine, Shri Sathya Sai Medical College and Research Institute, Thirupurur-Guduvancherry main road, 603108 Kancheepuram, India.
Tel/Fax: +91.988.422.7224.
E-mail: drshrishri2008@gmail.com

Key words: emporiatrics, vaccine, risk, travel medicine.

Received for publication: 19 March 2013.

Revision received: 26 March 2013.

Accepted for publication: 31 March 2013.

This work is licensed under a Creative Commons Attribution 3.0 License (by-nc 3.0).

©Copyright S.R. Shrivastava et al., 2013

Licensee PAGEPress, Italy

Healthcare in Low-resource Settings 2013; 1:e14

doi:10.4081/hs.2013.e14

2. World Health Organization. International travel and health. Geneva: WHO ed.; 2010.
3. Park K. Principles of epidemiology and epidemiologic methods. In: Park K, ed. Text book of preventive and social medicine. 21st ed. Jabalpur: Banarsidas Bhanot Publ.; 2011. p 116.
4. Schlaudecker JD, Moushey EN, Schlaudecker EP. Keeping older patients healthy and safe as they travel. *J Fam Practice* 2013;62:16-23.
5. Jensenius M, Han PV, Schlagenhauf P, et al. Acute and potentially life-threatening tropical diseases in western travelers. A geo-sentinel multicenter study, 1996-2011. *Am J Trop Med Hyg* 2013;88:397-404.
6. Zimmermann R, Hattendorf J, Blum J, et al. Risk perception of travelers to tropical and subtropical countries visiting a swiss travel health center. *J Travel Med* 2013; 20:3-10.
7. Hainsworth T. Travel vaccines: a guide to appropriate use. *Nurs Times* 2002;98:40-2.
8. Heywood AE, Watkins RE, Iamsirithaworn S, et al. A cross-sectional study of pre-travel health-seeking practices among travelers departing Sydney and Bangkok airports. *BMC Public Health* 2012;12:321.