

TRAVELLERS DIARRHOEA

Diarrhoea is the most common illness affecting travellers, especially in developing countries. Up to 50% of travellers will suffer from a diarrhoeal illness while overseas. Infection is a result of swallowing food or water contaminated with an organism such as bacteria, viruses or parasites. Knowledge of preventative measures and treatment is the most effective way of limiting the effects of traveller's diarrhoea.

GUIDELINES TO EATING AND DRINKING SAFELY

REMEMBER THE RULE: "BOIL IT, COOK IT, PEEL IT OR FORGET IT"

◆ Eating

- ✓ Avoid unpasteurised dairy products
- ✓ Avoid raw or undercooked meat and seafood
- ✓ Avoid reheated or cold foods
- ✓ Avoid uncooked vegetables eg salads
- ✓ Avoid ice cubes in drinks
- ✓ Eat fruit and vegetables that can be peeled or cut open eg banana, citrus fruits
- ✓ Fruit and vegetables can be soaked in a mild antiseptic solution
- ✓ Fresh well cooked foods and tinned foods are safe
- ✓ If possible check the way food is prepared eg cleanliness, flies, etc
- ✓ Ensure good personal hygiene, wash your hands before meals or use antiseptic gel or wipes
- ✓ Ensure cutlery and crockery are clean
- ✓ Avoid hand contact with mouth, eg biting of fingernails



◆ Drinking

Unless you are sure of the quality of the water, assume it is contaminated. There are several ways in which you can purify water if bottled water is unavailable or impractical:

1. Boiling. This is the most effective form of water purification. Bringing water to the boil will kill all bacteria, but to ensure that parasitic cysts, eggs and larvae are killed boiling continuously for 5 minutes is recommended. Altitude requires longer boiling time – in general allow 1 minute extra for every 300 metres above sea level.
2. Iodine tablets and solution. Add iodine solution or tablets to water as per the manufacturer's recommendations. **Do not** use iodine if you have an allergy to iodine or suffer from a thyroid condition. Avoid frequent use during pregnancy. Long term use is not recommended.
3. Chlorine tablets and solution. These are less effective than iodine but may be more appropriate where iodine is contraindicated, and can be used long term.
4. Water purification devices. There are a large variety of purification devices on the market. It is recommended that the filter has an absolute pore size of 0.2micg or less. An iodine core will increase effectiveness.





Bottled or canned carbonated drinks are a good source of uncontaminated fluid and are available worldwide. Check that the seal has not been tampered with.

TREATING TRAVELLERS' DIARRHOEA

Most episodes of travellers diarrhoea are short lived and resolve without any specific treatment except simple fluid replacement. Dehydration, especially in children, can be a concern.

<p>DEHYDRATION</p> <p>MILD</p> <ul style="list-style-type: none"> • dry lips & mouth • dark urine • mild thirst <p>MODERATE</p> <ul style="list-style-type: none"> • very dry lips and mouth • rapid & weak pulse • darker urine • thirst <p>SEVERE</p> <ul style="list-style-type: none"> • extremely dry lips and mouth • drowsy, lethargic, disorientated, irritable • no urine • rapid weak pulse, rapid breathing and pale skin 	<p>MAINTAINING HYDRATION</p> <ul style="list-style-type: none"> • drink small amounts of clean water frequently • use rehydration salts such as Gastrolyte • alternatively, add 6 teaspoons of sugar and 1 teaspoon of salt to 1 litre of water or • dilute 1 part orange juice or soft drink to 4 parts clean water • undiluted fruit juice and soft drinks are too high in sugar and make dehydration worse
	<p>DIET</p> <ul style="list-style-type: none"> • food is needed for energy and healing • several small meals are better than a few large ones • light carbohydrate foods are usually well tolerated eg rice, bananas, potatoes, dry biscuits • avoid dairy, fatty foods, spicy foods and alcohol

SYMPTOMS	TREATMENT
<p>MILD</p> <p>1-3 watery stools in 24 hours</p> <p>Mild symptoms and able to carry out usual activities</p>	<p>Plenty of water</p> <p>Rehydration salts</p> <p>Anti-motility drug if needed (eg loperamide, diphenoxylate, codeine)</p>
<p>MODERATE to SEVERE</p> <p>3 or more watery stools in 24 hours, vomiting, abdominal cramps, fever, lethargy</p>	<p>Plenty of water</p> <p>Rehydration salts</p> <p>Anti-motility drug if needed</p> <p>Antibiotics eg Norfloxacin, Ciprofloxacin, Azithromycin</p>
<p>DYSENTERIC</p> <p>As above, plus blood in stools, and temperature above 38C</p>	<p>Plenty of water</p> <p>Rehydration salts</p> <p>Avoid taking anti-motility drug</p> <p>Antibiotic treatment eg Norfloxacin, Ciprofloxacin, Azithromycin</p>
<p>GIARDIA and some other parasites</p> <p>“Explosive” diarrhoea with nausea, bloating, burping and flatulence. Gas typically smells of rotten eggs or sulphur gas</p>	<p>Plenty of water</p> <p>Rehydration salts</p> <p>Antimotility drug if needed</p> <p>Antibiotic treatment eg tinidazole or metronidazole</p>

Antibiotics

Emergency antibiotics should be carried to treat diarrhoea when simple measures do not work.

Please discuss this with your doctor prior to departure so suitable medications can be prescribed.

Antimotility drugs ('stoppers')

Loperamide (Gastrostop, Imodium), Diphenoxylate (Lomotil) and Codeine stop your bowels from moving but unfortunately do not kill infections. Using these agents may prolong the illness. Antimotility drugs are dangerous for young children and pregnant women, and should not be used if diarrhoea is associated with a high fever or with blood or pus in the stool. They are useful when toilet access is difficult or inconvenient.

Vaccination

An oral vaccine is available that reduces the risk of enterotoxigenic E.coli, the most common cause of travellers' diarrhoea. It also reduces the risk of cholera. Although relatively expensive, it is worthwhile if your risk of diarrhoea is high.

TMCP carry a range of prescription kits containing all these medications for the treatment of diarrhoea and related problems.