



An Ounce of Prevention Could Save Your Life — Do the Right Thing!

Although we are immunized for many diseases, there are now a number of emerging and re-emerging diseases such as malaria, dengue fever, cholera, chikungunia and avian flu for which we have no immunizations. Travelers and residents need to be aware of these threats and exercise personal protective measures to avoid exposure/contact.

<u>Malaria</u>: A mosquito-borne disease caused by a early-evening/night-biting mosquito. People with malaria often experience fever, chills, and flu-like illness. Left untreated, they may develop severe complications and die. Each year 350-500 million cases of malaria occur worldwide, and over one million people die, most of them young children in sub-Saharan Africa. In general, malaria is a curable disease if diagnosed and treated promptly and correctly. Antimalarial drugs taken for prophylaxis by travelers can delay the appearance of malaria symptoms by weeks or months. Returned travelers should always remind their health-care providers of any travel in malaria-risk areas during the past 12 months.

<u>Dengue fever</u>: A disease found in many tropical and subtropical areas of the world. Infection is usually passed on by a domestic, <u>day-biting</u> mosquito. More than 2.5 billion persons now live in areas where dengue infections can be locally acquired. Jakarta had the highest number of dengue fever cases. Another area usually not thought of when taking precaution, is the Bahamas. This disease is also known as "bone-break fever" due to the severe muscle tremors and shaking encountered with high fevers and chills. It is seldom fatal, but can be quite dramatic and debilitating.

<u>Cholera</u>: Cholera is an acute, diarrheal illness caused by infection of the intestine with the bacterium *Vibrio cholerae*. The infection is often mild, but sometimes it can be severe and can be fatal. A person may get cholera by drinking water or eating food contaminated with the cholera bacterium. The disease can spread rapidly in areas with inadequate treatment of sewage and drinking water. The cholera bacterium may also live in the environment in brackish rivers and coastal waters. Shellfish eaten raw have been a source of cholera. The disease is not spread directly from one person to another; therefore, casual contact with an infected person is not a risk for becoming ill. The risk for cholera is very low for U.S. travelers visiting areas with epidemic cholera. When simple precautions are observed, contracting the disease is unlikely. A simple rule of thumb is "*Boil it, cook it, peel it, or forget it.*"

Chikungunia: Chikungunya fever is a viral disease acquired by humans through the bite of infected mosquitoes. Chikungunya virus (CHIKV) was first identified in Tanzania in 1953, and has since been found in west, central and southern Africa and many areas of Asia. Chikungunya virus has caused many human epidemics in those areas since that time. CHIKV infection can cause a sever illness, that most often includes symptoms such as fever, headache, fatigue, nausea, vomiting, muscle pain, rash, and joint pain. There is no vaccine or specific antiviral treatment for chikungunya fever available. The best way to avoid CHIKV infection is to prevent mosquito bites. The 1st outbreak of chikungunya virus (CHIKV) in Europe recently occurred in the province of Ravenna in north-eastern Italy.

<u>Rabies</u>: Rabies is a bacterial disease transmitted by infected animals – often wild mammals such as skunks and raccoons and domestic animals such as dogs. Its occurrence has increased dramatically recently in both China and India with numerous human deaths. There is an immunization, but it is rarely given unless one is likely to be exposed (travel to endemic area or working with animals such as a veterinarian) and there is a treatment, but it must be administered early and it is quite unpleasant. The best advice is to not approach or handle unknown animals as the outward signs of rabies (erratic behavior, frothing at the mouth, etc.) are not always present in infected animals.

Avian Flu: The virus has caused serious disease among wild birds and poultry on multiple continents. Human infections with the viruses are still rare, but have occurred in countries in Asia, Africa, Eastern Europe, and the Middle East between 2003–2007. Most cases of infection in humans are thought to have occurred from direct contact with infected poultry. The CDC recommends that citizens living abroad be aware of the Bird Flu situation in their local area and any resulting preventive health recommendations made by the local country's Ministry of Health and local government. If the virus has been isolated in the country where you reside, monitor the local announcements as well as the updates provided at the CDC Avian Influenza, WHO and OIE websites. Avoid areas where fowl are being raised or processed (farms, markets, restaurants) and avoid any dead wild birds encountered. Thorough cooking of fowl destroys the virus. So, check the food being served to you – a good idea to avoid other possible food-borne contaminants.

Remember, although you should have all your standard immunizations, there are serious diseases for which we have no immunizations and, perhaps, only partially effective treatment. The best medicine is prevention—awareness, avoidance and personal preventive measures such as clothing and insect repellants. If you think you might have contracted any of these diseases, early diagnosis and treatment is essential. See you health care provider early.

Below is the link to the CDC that can provide more information about diseases that should be considered when traveling around the globe. This sight has the most up to date and accurate information about outbreaks, what you should do to prepare for travel and what areas you should avoid:

http://www.cdc.gov General Site for the CDC

http://wwwn.cdc.gov/travel/default.aspx Specific CDC site for travelers to access and check travel destinations.

http://www.who.int/en World Health Organization that has a site with recent disease outbreaks throughout world.

As always, we are interested in your feedback and any ideas for health care issues you would like our office to address in the future. Contact us at TPHI@med.navy.mil.

Sincerely, CAPT James Marron Medical Director, TRICARE Area Office-Pacific DSN 315-643-2054 / Comm 011-81-611-743-2054