

The web of travel health information: is it safe?

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The internet has supplied a partial answer for general practitioners looking for accurate information on travel health. However, advice needs to be tailored to the individual traveller and an appropriate plan should be agreed with each patient.

The differentiation of travel medicine as a specialty in the early 1980s brought with it a recognised need for access to authoritative up-to-date information. General practitioners were encouraged to simply telephone their local infectious disease unit for 'dial-up' information, and a registrar would pronounce what vaccines to give for the nominated destination. While some practitioners still attempt to follow this mythical cookbook approach to a very complex area, it is now well recognised that more than a phone call is required to meet both medicolegal requirements and the intending traveller's needs. One of the many challenges of travel medicine is to supply information specific to the destination, taking into account current disease outbreaks, season and type of accommodation, and adapt this to the individual traveller's needs.

Assessing the traveller's overall health and fitness prior to travel is a preferable and safer path for general practitioners. This wholistic approach to travel medicine is very much the domain of the general practitioner and may include simple things such as examining the auditory canal for wax through to a detailed medical examination and medication review.

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The problem of ever-changing information

While the general practitioner is an expert with knowledge in his or her own area, this is not always the case with travel medicine and infectious disease prevention. It is easy to fall behind in current knowledge, with over 20 new vaccines having become available over the last decade, each with its own product indications, precautions, contraindications and interactions. For example, despite the wide availability of active hepatitis A vaccination, reduction in disease has not been demonstrated in travellers. The risk of disease has been shown to be five times lower in those attending a travel clinic,¹ confirming local information that many travellers either are not vaccinated by their general practitioner or do not attend one in the first place.

Malaria resistance patterns have altered dramatically, and information changes so rapidly that as soon as printed material is produced it is out of date. Recent deaths have occurred from the well meant but incorrect use of antimalarial prophylaxis, and Australia continues to import approximately 800 cases of malaria annually.² Conversely, side effects from inappropriately prescribed antimalarial prophylactic medication are common and can spoil a holiday or business trip.

Look-up tables available within clinical software packages can be insufficient in



many cases to deal with this ever-changing information. While a particular disease may be present in a listed country, many tourist areas are not at risk – and without

Some useful travel health sites

Centers for Disease Control
www.cdc.gov/travel/index.htm

World Health Organization
www.who.int/ith/

Travel Health Online
www.tripprep.com/

International SOS
www.internationalsos.com/

International Society of Travel Medicine
www.istm.org/

McGill University Center for Tropical Diseases
www.medicine.mcgill.ca/tropmed/cantropmed/

Australian Department of Foreign Affairs and Trade
www.dfat.gov.au/travel/index.html

Communicable Diseases Network Australia
www.health.gov.au/pubhlth/cdi/cdihtml.htm

this knowledge a doctor may prescribe vaccinations and medications unnecessarily, with consequent increased cost and risk of side effects.

This can all be confusing, especially given the time constraints in a busy general practice, so where can general practitioners acquire information sufficient to safely advise their patients? The internet has supplied a partial answer to sourcing accurate information.

Some internet sources of travel health information

Both general practitioners and their patients are able to access websites of reputable international organisations such as the US-based Centers for Disease Control (CDC) and the Europe-based World Health Organization (WHO). Both sites provide authoritative and relatively up-to-date information primarily focusing on diseases and vaccinations, outbreaks, lists of travel clinics and access to government-derived information (see the box on page 93 for the URLs of these sites and others mentioned in this article). Information from these sites is used as the international gold standard by infectious disease units and travel clinics worldwide despite a number of conflicts with local recommendations. To avoid confusion, it is important that international travellers receive the same information regardless of the country they are in – this can occur only if information guidelines are accessed from the same international sources. It is worthwhile pointing out that travellers have often looked up the same sites, so woe is the practitioner who is unprepared for this. Practitioners using these sites also need to be aware of the discrepancies between them. For example, WHO is still recommending chloroquine and proguanil for areas where CDC recommends mefloquine or atovaquone–proguanil as antimalarial prophylaxis.

Shoreland Inc.'s Travel Health Online is orientated at travellers rather than

medical practitioners. This site provides general destination advice, maintains a current list of international travel clinics, and provides information on a wide range of travel-related diseases and vaccines. It needs to be remembered that much of this information is targeted at United States citizens, although Australian embassies are listed.

Companies such as International SOS provide a range of 24-hour emergency and health services to leisure and corporate organisations. The International Society of Travel Medicine provides current news as well as links to organisations and international travel clinics. The McGill University Center for Tropical Diseases posts a series of interesting photo vignettes on its site.

These are but a few of literally thousands of sites from international government and private sources, and the number of Australian sites is increasing in both quantity and quality. Over the last year or so, the Australian Department of Foreign Affairs and Trade (DFAT) has stepped up the standard of its site quite significantly in order to meet public need. Current advice is available on this site, and it is particularly

recommended for the first time traveller and those going to less developed countries. Contact details for foreign embassies and consulates are supplied as well as Australian consulates overseas. Communicable Diseases Network Australia regularly publishes updated epidemiological information for Australia, which is of relevance for the general population as well as inbound visitors.

Information needs to be tailored to the traveller

Each site has multiple links to other travel health sites and it is not uncommon to go round in circles. The WHO lists over 25 of its own websites on infectious diseases alone.³ Often there is just too much information for the average practitioner to sort through, and it is important to be aware that websites provide information for the duration and purpose of visit, type of travel, accommodation, food hygiene and behaviour of the traveller. Within the constraints of daily consultations, the general practitioner has to consider the effect of each of these variables and agree on a plan with each individual traveller.

As a word of warning for medical practitioners, it is worth pointing out that not all sites are reputable from both medical and legal points of view. Beware of sites published by self-interest groups. Finally, smart as computers are, they haven't learned how to actually give vaccinations – yet. MT

References

1. De Serres G, Duval B, Shadmani R, et al. Ineffectiveness of the current strategy to prevent hepatitis A in travelers. *J Travel Med* 2002; 9: 10-16.
2. Communicable Diseases Network Australia. National notifiable diseases surveillance system (www.health.gov.au/pubhlth/cdi/nndss/year020.htm).
3. WHO. *Wkly Epidemiol Rec* 2002 February 22; 77(8): 68 (www.who.int/wer/77_1_26.html); www.who.int/wer/pdf/2002/wer7708.pdf).