

Diarrhoea in Travellers

Background

Avoiding diarrhoea depends on three things: constitution, good luck and being careful. You can do little about the first two but quite a bit about the third.

Nearly half of all trips made by travellers from developed to developing countries result in an episode of diarrhoea. Some of these can be prevented and most can be treated effectively at an early stage. So knowing about diarrhoea may do more for your health and well being than almost anything else.

Precautions you can take

Diarrhoea is most commonly caught in the following ways. This is a list of actions you can take to reduce your risk:

- Contaminated water or milk - Boil it for 1 minute at a vigorous rolling boil and if over 2000 metres for 3 minutes. If water is cloudy, filter it first or let it stand. Remember milk will not necessarily be pasteurised.
- Salads and fruits - Avoid them unless you have prepared them yourself, washed, sterilized and peeled any fruit and cooked any vegetables.
- Avoid buffet display foods.
- Eggs - Cook until the yolk is firm.
- Shellfish - Avoid altogether because it is hard to be sure if they have been cooked to a high enough temperature for long enough. Many hope for the best and get away with it: a large minority bitterly regret trying.
- Contaminated food such as rice, meat and fish - Make sure that all the food you eat is served piping hot. Meat should be grey or brown, never red, fish should be firm. Rice should never be reheated unless thoroughly re-cooked.
- Ice and ice cream - Never trust ice and do not allow it to be put in your drink, however tempting. Eat ice cream only from known high quality manufacturers where it is known to be safe.
- Cheese - This always carries a health risk and should be avoided.
- Food that has been allowed to cool down, especially if left uncovered. Avoid it.
- Table sauces, often contaminated by being diluted with unclean water. Better not to use.
- Children under 6 months should be exclusively breastfed. If this is not possible use commercial formula made up with boiled water. Childrens' hands should be regularly washed with soap and water, and their fingernails kept short. Refer to [Managing Diarrhoea and Vomiting in Children.doc](#)

In summary: you will reduce your risk of diarrhoea if you only eat food that is thoroughly cooked and served hot. And if you drink only boiled water, tea, coffee, beer and carbonated drinks, or bottled water with sealed metal tops from known reputable firms.

Surviving hospitality

The biggest challenge is being invited out for meals. Survival tips include: selecting only those foods you think are safe, however tempting the others look; eating small amounts or playing with any unsafe food placed on your plate. You can also plead being a vegetarian, having an upset stomach, fasting for religious reasons, or gently refuse accompanied by a charming smile, or convincing apology.

Other useful tips

- Wash your hands very frequently with soap and water or use an alcohol wipe. This has been shown to reduce your risk of catching diarrhoea. Do this frequently during the day, always after going to the toilet, changing a nappy, playing with animals and children, and before eating or preparing food. Frequent handshaking is another way of catching germs. Either greet your friends, bishop or the president's family in another culturally acceptable way or wash/wipe your hands with alcohol gel after a round of introductions.
- Don't swim in polluted seas, rivers, lakes or ponds. Swimming pools should be chlorinated. When swimming, try to avoid getting water into your mouth or swallowing it.
- Use clean, preferably boiled water for cleaning your teeth.

How to Treat Diarrhoea

Remember malaria can mimic many diseases including infectious diarrhoea. Always consider the possibility of malaria if you have fever with diarrhoea or blood in the stools or your symptoms are not responding.

Action you should take:

Mild attack: you have symptoms that do not significantly interfere with normal travel and you feel well but you are experiencing frequency of bowel action 3 times per day. Keep up fluids as follows:

- By adding water to sachets of Oral Rehydration Salts according to instructions
- By drinking your favourite carbonated drink, soup, tea or other appropriate fluid
- By adding 8 level teaspoonfuls of sugar and half a level teaspoonful of salt to 1 litre of boiled water, or by using a "TALC" Rehydration spoon.
- Take a light diet
- Change your itinerary if possible so you can stay near adequate facilities

Most mild attacks will resolve without further treatment. If you are inconvenienced by the diarrhoea (ie if there is a long road trip ahead or the diarrhoea is interfering with essential work during a short trip), only then should you consider taking ciprofloxacin. See under 'Moderate Attack' for details of the dose schedule.

Moderate attack: Your symptoms threaten normal activity and travel i.e. having a bowel action 3-6 times per day. You are not severely unwell or bedbound and have no or only mild fever and no dysentery (blood in the stool). Treat as in a mild attack. If symptoms persist for greater than 48 hours or if you are inconvenienced by the diarrhoea (eg there is a long road journey to take or you are there for a short term trip and there is essential work to do) consider taking 2 ciprofloxacin 250mg capsules together. If symptoms still persist despite the initial dose of ciprofloxacin then take a further 2 capsules together for 2 further days. (i.e. a total of 6x 250mg) Those under 16 years of age should **not** use ciprofloxacin.

If inconvenienced by diarrhoea and you are not passing blood with your motion you can use a drug to slow down your gut motility. Loperamide relieves symptoms of diarrhoea so can be useful when you have long journeys to make or have to attend business meetings.

Severe attack: You are unable to carry out normal activities, feel unwell and feverish and there is no blood in your stools. You may be passing 6 stools a day or more. Seek medical attention if you are able to access a medical clinic of good quality (see [Accessing Healthcare Overseas.doc](#)). If access to good medical attention is delayed or not possible, then treat as in moderate attack, using the full course ciprofloxacin for 3 days. Obtain a stool test if your symptoms and general health are not rapidly improving. Always consider the possibility of malaria if your symptoms are not responding.

Dysentery is a form of diarrhoea which causes blood in the stools usually with fever. You are also likely to feel unwell, often seriously so. Treat as in severe attack but **do not take loperamide** or any blocking agent. **You must see a doctor.** Again, malaria needs to be considered as a possibility.

General advice following any diarrhoeal illness:

As you recover eat a light diet and bland foods, such as soup, rice, toast, bananas, potatoes. It's better to eat small amounts, regularly and to chew well. Avoid any milk or dairy products for several days after the diarrhoea has settled down.

If your symptoms are not responding to treatment other causes must be investigated. i.e. Giardia and never forget the potential for malaria when in a country where this disease is present.

InterHealth can provide you with a Diarrhoea treatment kit which includes loperamide, ciprofloxacin and a rehydration measuring spoon. Please note that ciprofloxacin should not be used in pregnancy, breastfeeding or those under 16 years of age. Loperamide is best avoided in pregnancy and in children under 12 years of age, and should not be used if you have a fever or blood in your stools.

Further Information and Guidance

More information can be found in: 'The Traveller's Good Health Guide', Ted Lankester; 3rd Edition 2006.

InterHealth's Travel health Advice Centre (THAC) is available to travelwellplan subscribers. Please visit <http://www.interhealth.org.uk/our-services-travelwell-plan-travel-health-advice-centre.html> to find out more.

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