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Emma Hitt is a freelance editor and writer for Medscape.

Disclosure: Emma Hitt, PhD, has disclosed no relevant financial relationships.

Dr. Hitt does not intend to discuss off-label uses of drugs, mechanical devices, biologics, or diagnostics not approved by the FDA for use in the United States.

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## From Medscape Medical News Training Needed for US Doctors Providing International Travel Advice

Emma Hitt, PhD



November 8, 2010 (Atlanta, Georgia) — Primary care physicians and specialists in the United States often provide incorrect advice or inappropriate treatment to patients traveling abroad, according to new survey findings presented here at the American Society of Tropical Medicine and Hygiene 59th Annual Meeting.

Laura Kogelman, MD, from Tufts Medical Center in Boston, Massachusetts, presented the findings of an Internet survey assessing knowledge, attitudes, and practices about travel medicine.

"The most surprising and interesting finding was that the number of travelers seen [by a doctor] seemed to have the most effect on knowledge and practice," she told *Medscape Medical News*.

According to the survey, the familiarity of medical practitioners with the relevant literature, treatments, and vaccines available increased with the number of travelers seen each year. Practitioners who saw fewer than 50 travelers per year were more likely to prescribe inappropriate treatments and be unaware of the most recent recommendations regarding international travel.

Dr. Kogelman and colleagues emailed the survey to 14,932 primary care physicians and travel medicine specialists randomly selected from various physician databases. Of the surveys, 6% were returned complete or partially complete, from a combination of MDs (51%), nurse practitioners (25%), physician assistants (9.6%), and other healthcare professionals. Specialties included internal medicine (30%), family practice (32%), primary care (18%), pediatrics (9%), and other (28%). Of the participants, 80% reported provided pretravel medical care.

Nearly half saw fewer than 50 travelers per year (47%), and only 12% saw more than 500 travelers each year. Of those who saw fewer than 50 travelers per year, 11% prescribed an inappropriate antimalarial drug (chloroquine) for travel to sub-Saharan Africa, whereas only 36% were likely to correctly prescribe the same drug to those traveling to countries where it remains a first-line treatment (e.g., Central America). For practitioners who saw more than 500 travelers per year, only 5.2% prescribed an inappropriate antimalarial treatment and 81% prescribed correctly.

Respondents who saw fewer travelers were also less aware of problems with antibiotic resistance, such as *Campylobacter* antibiotic resistance in Southeast Asia. Of those who saw fewer than 30 travelers per year, 32%

incorrectly identified azithromycin as the antibiotic to which resistance had developed, and 10% believed that antibiotic resistance posed no problem. Furthermore, only 47% knew about fluoroquinolone resistance, compared with 75% of those who saw more than 500 travelers a year.

According to the researchers, these results indicate a need for greater training for those providing pretravel consultation to patients, particularly those who treat a limited number of travelers each year. In addition, 87% of those surveyed expressed interest in attending a travel medicine course.

Dr. Kogelman noted that travel medicine is becoming increasingly complex as more individuals are traveling to more remote destinations. "It is a challenge for increasingly busy physicians to continue to provide accurate and up-to-date recommendations. There is a need and desire for travel medicine education," she said. "The next question is how to develop and implement accessible travel medicine education to a wide range of people from multiple disciplines."

"These findings confirm what travel medicine specialists have long suspected," noted independent commentator Susan McLellan, MD, from Tulane University in New Orleans, Louisiana. Dr. McLellan suggested that practitioners who wish to offer pretravel consults should consider taking the exam offered by the International Society for Travel Medicine or refer travelers to travel medicine specialists.

*The authors and commentator have disclosed no relevant financial relationships.*

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