



# International Society of Travel Medicine

Established 1991

Promoting healthy travel worldwide



## NewShare

The Newsletter of the International Society of Travel Medicine

### July 2013

#### President's Message

*From David R Shlim MD, ISTM President*



As I write this, Teton County, Wyoming where I live has just been named the fittest county in the United States, based on the physical activity and health of the population. The county is the home of Grand Teton National Park, and Yellowstone National Park, the world's first National Park. The natural beauty and recreational opportunities in this area draw tourists and athletes from all over the world.

This is important because ISTM and Wilderness Medical Society are holding a joint conference in Jackson Hole, Wyoming in Teton County next summer, August 3-7th, 2014, and will offer the *David R Shlim MD Certificate in Travel Health exam* as well. I've been a member of both societies since the beginning of both, and the overlap of interests make this joint meeting a wonderful first step for the members of the two societies to expand their knowledge. As you know, many pre-travel medicine visits focus on adventurous travel in remote destinations, where wilderness medicine knowledge on high altitude, cold, scuba diving, desert travel, envenomation, and rescue is prominent. Conversely, a lot of the places where adventurous travelers want to go involve developing countries, where immunizations and prophylactic medications are required.

Creating and hosting this meeting in my hometown fulfills a long-time dream for me. I hope that many of you will put it on your calendars for next year, and bring your families to enjoy the remarkable wonders of this area.

Next year will also offer several other important conferences around the world. The Asia Pacific Travel Health Society will host their 10th meeting in Ho Chi Minh City, Vietnam 7-10 May 2014 (which will also offer the CTH Exam, the first time that the exam will be offered twice in the same year). The Northern European Conference on Travel Medicine will take place in Bergen, Norway on 5-8 June 2014. The South African Society of Travel Medicine is presenting a meeting in Cape Town, on 18-21 September 2014.

As the recent and thoroughly enjoyable CISTM13 meeting in Maastricht just demonstrated, getting together in person with fellow travel medicine professionals is rewarding both intellectually and personally. Our international meetings are famous for their sense of camaraderie with new people, and reuniting with old friends. The people that we meet can become useful contacts in other countries, or and give a face and a voice to some of the listserv postings that we all share.

And speaking of the listserv, watch for changes in the next month or two, as we roll out a new forum, MyISTM, with far more robust features for streamlining what we choose to read about, and searching past archives. Other great new features of our re-vamped website capabilities will also be announced shortly. For those of you who may have not been able to come to Maastricht, or want to see some of the talks that you missed, take a look at the [www.istm.org](http://www.istm.org) website that has recently made many of these presentations available.

I hope you will all stay actively involved in travel medicine, maintain your support of the ISTM, and seek out opportunities to meet up with like-minded professionals at at least one of the international meetings in 2014. And, I look forward to welcoming you to the beauty, splendor and camaraderie of Jackson Hole in August of 2014.

Warmly,  
*David R Shlim MD*

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#### From the Editor



*Christopher Van Tilburg*

Just returning from a medical support trip to Haiti, I have a moment to reflect on utilizing knowledge gained at CISTM13 in Maastricht. I was particularly flummoxed in pre-trip preparations with the varied modes of water purifications. We took down personal bottles with inline filters, ultraviolet light purifiers, large filters for the whole group, and, what seemed to be the simplest: chlorine dioxide tablets, which are compact, light, and easy to use (a little powdered drink mix helps hide the chlorine taste). All of them worked, but the tablets are my favorite because they are so small and compact.

If you missed CISTM13—the fabulous talks on risk, malaria, mass gatherings, and research, the great networking, and the beautiful riverside bike trails—no worry. In 2014, you will have opportunities for several regional conferences, listed below, including two which host the Certificate in Travel Medicine Exam.

In other changes, we are upgrading our communications with ISTM and are about to migrate the list serve to an online forum called MyISTM. Don't worry—you will still be able to read posts by links coming to your email. But you will also be able to search past posts, view various discussions online, and get a weekly synopsis, more information will follow.

We've created a PDF of NewsShare so you can download and read when you are off line, such as when on transAtlantic flights, waiting in Kilimanjaro International Airport, or at your research outpost in Peru.

Christopher Van Tilburg, MD  
Editor, ISTM NewsShare

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## Secretary-Treasurer's Report



### Secretary-Treasurer Transition

Following the recent ISTM General Assembly held in May during CISTM13 in Maastricht, the Secretary-Treasurer transition is now complete and I wish to formally acknowledge the significant contributions that David Freedman has made to the ISTM, especially in his role as Secretary-Treasurer from 2005 to 2013. I was fortunate to shadow David in the role of Secretary-Treasurer in the months leading up to CISTM13 and work with Diane Nickolson, ISTM Executive Director, in helping me to bring me up to speed with the scope and requirements of the position. We have a great team in the ISTM Secretariat that supports not only the Secretary-Treasurer, President and other Officers of the ISTM, but also the entire membership, particularly through assisting ISTM programs and the great work of the ISTM Member volunteer committees and groups.

### ISTM Membership

I am delighted to report that we now have just over 3100 Members of the ISTM! This is the highest number of Members we have ever had! ISTM Membership has enjoyed continued growth over the years, and has increased by more than 13% already this year. We have had 782 new Members join this year, 340 of which were a part of the new CISTM complimentary Membership program. More than 100 Memberships have been in the two new Membership categories that became active this year – Retiree and Associate Memberships. The new Associate Membership category is for those who reside in resource-poor countries. It is still too early to determine whether these are mostly new Members or renewals, but it is pleasing to see people benefitting from these new membership categories.

The ISTM has Members in 88 countries now - the newest country on the list to date this year is Oman. With the CISTM in Europe we have seen a very dramatic increase – 161% – of European Members. They comprise more than 25% of current Members, up from 16% last year. Oceania has been the only region with a consistent steady growth over the recent years, and currently comprises over 9% of Members in ISTM. On an individual country basis, Canadian Memberships have shown remarkable growth, with their highest number ever with 429 Members. Other countries that show continued steady growth in Members include Australia and Japan. Special thanks to Kathy Smith for compiling this Membership data.

Peter Leggat, MD  
ISTM Secretary-Treasurer

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## News from the Secretariat

The ISTM Secretariat has been busier than typical for this time of the year. In June, July and August we are mostly focused on the financial reports and processes associated with the end of our fiscal year, and on follow-up activities related to the CISTM or RCISTM just held. This year we have also had a restructuring in the Secretariat to accommodate for a transition of the GeoSentinel Surveillance Project. With David Freedman leaving the project as Principal Investigator, as of 1 July the ISTM Secretariat has taken the project support functions in house.



With this transition of duties, we have created a full-time position for Sarah Thomas, the part-time intern who has been working with us over the past year on the CISTM. Additionally, we are delighted to have brought Elena Axelrod from the CDC into the Secretariat offices. We are managing to fit everyone in our current office space, though it is a bit tight. I'm especially thankful for the flexibility and understanding of all of our staff throughout this process.

*Diane Nickolson*

The Secretariat Staff roles have changed a bit as a result of the restructuring.

**Kathy Smith, Project and Meeting Administrator.** Please join me in congratulating Kathy on this promotion. In this role Kathy will continue to support ISTM Committees and Groups, manage and coordinate meetings and events, and will also manage the communications and publications for the GeoSentinel project.



*Kathy Smith*



**Elena Axelrod, Data and Finance Manager,** will continue to be the key data support contact for the GeoSentinel Project, and will also take on financial support functions for society. This includes accounts payables and receivables, maintaining the financial records in the society's bookkeeping program, and working with the external bookkeeper on financial reports and reconciliation.

**Daveen Capers, Member Services Coordinator,** will continue to serve as the primary support person of the society, answering questions, responding to requests, processing memberships, registrations, product orders, as well as supporting the promotional and marketing activities of the society.



*Daveen Capers*



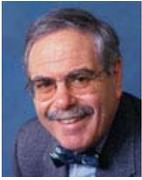
**Sarah Thomas, Project Coordinator,** will have as her primary focus the communications, publications and administrative support of the GeoSentinel project. Sarah will also be supporting the society's social media activities, including the maintenance and administration of the TravelMed Listserve.

I'm thrilled to present our Secretariat Team and their revised roles. I have every confidence that we will continue to provide our members, and all of the projects of the ISTM with high-level support, responsiveness and service.

*Sarah Thomas*

Kind Regards,  
Diane

## Examination and Certification Committee



The Exam Committee has surveyed the membership this year, updated the Body of Knowledge and updated the CTH examination. We administered the examination to 211 examinees at CISTM13 in Maastricht. The exam results were distributed in early July and the candidates have been notified. In 2014, we will offer CTH twice, for the first time. Save the dates for both Asia-Pacific Travel Health Association meeting on 7 May in Ho Chi Minh City, Vietnam, and at Regional ISTM meeting with the Wilderness Medicine Association on 3 August in Jackson Hole, Wyoming, USA.

*Kenneth R. Dardick*

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## Upcoming Conferences, 2014

Save the date for 2014 regional conferences, including two opportunities to sit for ISTM Certificate in Travel Health™ exam.



6<sup>th</sup> Regional Conference of the ISTM (RCISTM6), 3-7 August 2014, Jackson Hole, Wyoming, USA, in conjunction with Wilderness Medical Society. The CTH<sup>®</sup> Exam will be held just prior to the meeting. Visit [ISTM.org](http://ISTM.org) for the latest information.

10<sup>th</sup> Asia Pacific Travel Health Conference, 7-10 May 2014, Ho Chi Min City, Vietnam, including CTH<sup>®</sup> Exam. For more information, go to [APTHS.org](http://APTHS.org).

South African Society of Travel Medicine Conference, 18-21 September 2014, Durban, South Africa. Check out [SASTM.org.za](http://SASTM.org.za) for updates.

5<sup>th</sup> Northern European Conference on Travel Medicine (NECTM), 5-8 June 2014, Bergen, Norway. Information on the conference can be found at [NECTM.com](http://NECTM.com).

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## News from the Nursing Professional Group (NPG)

### NPG Steering Council Elections

This year NPG is holding elections to add four new members to an expanded NPG Steering Council. Please consider nominating yourself or a professional colleague as we continue to build the international specialty of travel health nursing. Any nurse who has been a member of ISTM and NPG for a minimum of one year is eligible. Applications from every part of the world are welcome, but particularly Europe and North America. All NPG members should have received two email notices announcing this important election. Full details about the nomination process, timeline for the election, the mission and goals of NPG, and the role of Steering Council members, as well as nominations forms can be obtained on the NPG page of the ISTM website [here](#). The call for nominations is open until 03 August 2013.

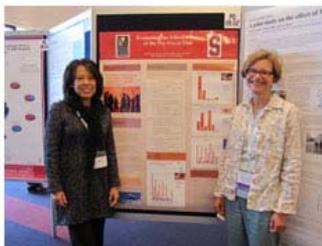


*Gail Rosselot*

### NPG Assembly in Maastricht

ISTM nurses from around the world met in assembly at the CISTM13 in Maastricht on Tuesday, May 21 to share ideas and concerns for NPG action for 2013-2015. Some of the issues that were widely supported as priorities by attendees included:

- The development of travel health nursing guidelines and competencies
- Automatic enrollment of all ISTM nurses in NPG with an "opt-out" option if desired by a member
- The dissemination of an NPG membership directory to promote professional networking
- Expanded collection and analysis of candidate data to improve nursing performance on the CTH exam
- Creation of an NPG Award for Excellence / Practice Innovations in Travel Health Nursing
- Development of a CE module on creating poster presentations
- Further exploration of the idea of an NPG Mentoring Project



In addition to proposing action items for the next biennial agenda, NPG members expressed their approval for recent changes to the NPG charter and election process (expanding Council to 9 members, minimum of three world regions represented, more than one member permitted per region, and elections in the September following a CISTM). The group also applauded the implementation of the new ISTM policy to offer nursing CE credits for every CISTM. Gail Rosselot, NPG Chair, expressed a special thank you to outgoing ISTM President Fiona Genasi for her role and support in this important effort.

### Dutch Reception in Maastricht

As the photos below attest, nurses attending CISTM13 enjoyed several occasions for networking. On Sunday, May 19, just hours before the Opening Ceremony, NPG hosted the traditional Nurses' Reception. Nurses once again participated in the very successful "speed networking" activity first introduced at the Budapest meeting. On Tuesday, May 21 the Dutch Travel Health Nurses Association sponsored a lively reception off-site with traditional foods of the Netherlands and an exciting travel medicine contest.



*"Dutch Treat" winner Sue Ann McDevitt with former NPG Chair, Jane Chiodini.*

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### Pharmacy Professional Group



*Jeff Goad*

The PPG is currently conducting a Call for Nominations in preparation for its council election to take place later this year. With this election, 1/3 of the Council will be elected to serve a 4-year term. A maximum of 4 candidates will be selected to run for the open 2 positions.

You have until **15 August 2013** to complete a self-nomination form to be considered for inclusion on the ballot for the upcoming election. Consider running and become a leader of the PPG. For the Nominating Form, or more information about the nomination process and election, please go to the PPG member page at [www.ISTM.org](http://www.ISTM.org).

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## Destination Communities Support Interest Group (DCSIG)

The recent CISTM13 in Maastricht had a successful pre-conference course 'Responsible Travel: A Travel Health Concern?' The topic of eco-tourism was addressed in a poster presentation (Michael Muehlenbein and Garth Brink). Sheila Hall introduced the concept and concerns relating to 'voluntourism', and Irmgard Bauer spoke about the exploitation of destination communities and sex tourism, generating a lively discussion! The DCSIG Website has a new section called 'Interest & Expertise – Membership Networking, where members list their expertise to foster cooperation and networking (for more info contact Sheila Hall [admin@TRECTravelhealth.co.uk](mailto:admin@TRECTravelhealth.co.uk)).



Sheila Hall

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## Pediatric Interest Group



Philip R. Fischer, M.D.

The ISTM's Pediatric Interest Group had great times in Maastricht. There were several sessions focused on young travelers, and the interest group planned future activities. There are approximately 300 members of the Pediatric Interest Group, and we are working together to provide enhanced education about the care of traveling children and adolescents. You can look forward to online and published papers to help guide the care of young travelers as we focus in particular on "Safe Travel" and practical situations that aren't clearly covered by current guidelines and labeling. And, the Pediatric Interest Group is gearing up to elect a new slate of leaders. Feel free to contact Phil Fischer ([fischer.phil@mayo.edu](mailto:fischer.phil@mayo.edu)) with any input you might have.

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## In the news: New US sunscreen regulations

In a welcome move for travelers, the United States Food and Drug Administration (USFDA) established clearer rules for sunscreen. Numerous factors influence sunscreen efficacy including the amount you apply, personal skin type, geographic latitude and altitude, atmosphere cloud cover and exposure to water and sweat. Nonetheless, USFDA requires any sunscreen under SPF 15 to include a warning that it is not protective against cancer. Although they did not limit SPF's escalating number, there's not much evidence that more than 50 is necessary.

The FDA mandates the words "Broad Spectrum" to indicate that its sunscreen blocks both UVA and UVB rays. In Europe, sunscreen *must* protect against both. "Waterproof" has been replaced with "water resistant" and must state either 40 or 80 minutes, Educate travelers to apply sunscreen liberally and often: most people don't put on enough (1 gm/square cm of skin) or frequently enough (every two hours, more if in water). Barriers—hats, sunglasses, clothing—are superior to sunscreen as has long been promoted by Australia's campaign "Slip, slap, slop."

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## Travel Talk from the ListServe

The Query: Is malaria prophylaxis necessary for a six-day Mt. Kilimanjaro trek in June, for a traveler staying in Moshi before and after trek?

The Talk: There were clearly two camps: 1) Always use prophylaxis. Even though the risk of infection may be low, disease from *P. falciparum* is so serious it is worth the cost and potential adverse effects of the drugs. The most commonly recommended was Malarone. 2) Don't use prophylaxis because a) low risk b) side effects such as nausea & vomiting which can be confused with symptoms of altitude illness and c) infection can be avoidable if repellents and bed nets are used.



Nancy Pietroski, PharmD

Malaria RDTs (rapid diagnostic tests) and SBET (standby emergency treatment) were recommended. Some thought that RDTs are reliable but there was more strong opinion that they are not, and lay people cannot be trained to use them correctly. Also, there are many reasons for fever besides malaria and travelers may be misdiagnosing themselves and taking medication unnecessarily. Another argument against RDTs and SBET is that the incubation period of *P. falciparum* is usually 10-14 days and the traveler may be home before symptoms manifest. If SBET is to be used by a traveler, the suggestion was to carry medications from home because of the proliferation of counterfeit antimalarial drugs, especially in Asia and Africa. Excellent references were provided on RDTs: Maltha J et al. Self-Diagnosis of Malaria by Travelers and Expatriates: Assessment of Malaria Rapid Diagnostic Tests Available on the Internet (doi: 10.1371/journal.pone.0053102. Epub 2013 Jan 2) and SBET: Schlagenhauf P, Petersen E. Standby Emergency Treatment of Malaria in Travelers. ([www.medscape.com/viewarticle/766527](http://www.medscape.com/viewarticle/766527)).

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## Expert Advice on Child Travelers

**Debra Stoner, MD**, caught up with longtime ISTM member **Dr. Karl Neumann** former editor of ISTM NewsShare and current editor of kidstravedoc.com. 1) *What's the number one mistake a parents makes when traveling with children?* Forcing fluids to prevent dehydration during air travel is an oft-repeated myth and counterproductive. At cruising altitudes of jets the atmospheric pressure expands air in the stomach/intestine by about 20%. The act of sucking and the addition of milk add bulk, further expanding these organs and making infants uncomfortable. Feed infants as you do at home. 2) *Is there any particular advice for preventing malaria in children?* When prescribing medication to prevent malaria make sure parents know what to do if children refuse/vomit the medications. Divide pills into smaller segments or pulverize. Strawberry jam or chocolate syrup disguise bitter tastes. Dosing on a full stomach minimizes vomiting. 3) *What travel-associated health problems are more common in children than adults?* Children are more likely to get motion sickness. Take remedial action by avoiding curving roads, distract young children with singing or word puzzles and stop for a stretch. Don't let children prone to motion sickness read, draw, or color in a vehicle. Offer frequent small drinks of cold water, juice or soda. Raise car seats so younger children can see out the windows. Over-the-counter antihistamines such as dimenhydrinate (Dramamine) and diphenhydramine (Benadryl) help reduce incidence/severity of symptoms.

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## ISTM Charity Donation Scheme



The Destination Communities Support Interest Group (DCSIG) has been striving over the years to raise awareness of global health issues and the problems faced by many indigenous populations in areas where tourism is developing rapidly. We were therefore pleased to be invited to assist with the ISTM charity donation initiative, introduced in 2012 by Fiona Genasi, during her time as President of the Society. This scheme was launched to support charitable organisations working to improve the lives and wellbeing of local communities across the globe.

*Sheila Hall*

Members of ISTM were invited to nominate charities for an award in 2013. The DCSIG then shortlisted the nominations to a final group of five. Conference delegates donated USD1800 to the fund whilst registering for the conference via the ISTM web site. The ISTM Executive Board agreed to match all donations to a maximum of USD15 000, the sum to be split among the five charities.

### Which charities were chosen?

Of the 29 organisations that were nominated, the following 5 were chosen:

1. Chad Relief Foundation, US based, serving Chad
2. Mae Tao Clinic, US based, serving Burma
3. Neary Khmer, Cambodia based, serving Cambodia
4. Vine Trust, Scotland based, serving Peru and Tanzania
5. Australian Himalayan Foundation, Australian based, serving Nepal

Please contact us with your thoughts about this initiative and if you feel that it deserves a continuing place within the travel health community.

Sheila Hall

[sckhall@TRECtravelhealth.co.uk](mailto:sckhall@TRECtravelhealth.co.uk)

Chair of Destination Community Support Interest Group

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## CISTM13 in Pictures

More pictures can be found [here](#) on the ISTM website.



