Travel medicine is taught and practiced currently versus the obvious emerging needs of the evolving nature of travel medicine globally is my presidential vision. This year, for the first time in history, emerging economies such as China, India, Brazil will overtake the traditional continents of North America and Europe. The tide has changed, and there is an urgent need to address the travel medicine issues that arise from this changing pattern! For example, the growth in Chinese tourism is phenomenal. There is now more travel from China to Africa than from the US to Africa. China is sending millions of Chinese tourists to Africa. The recent reports on 11 Chinese workers in Angola who contracted yellow fever and imported yellow fever to China underpin the issue. India with its 1.2 billion people is now the 2nd fastest growing economy worldwide. What do we know about the epidemiology and public health issues that arise from such massive movement of people out of India? Not much.

Lastly, we are celebrating 25 years history of ISTM. May I encourage you to read about the early years of ISTM in this issue? To celebrate the history and rapid growth of ISTM, we are planning BIG 25 year birthday festivities at CISTM Barcelona in May 2017! To this end, make sure that you purchase your dinner tickets for our open-air Gala Dinner the Poble Espanol on 16 May 2017. Tickets will sell out quickly, so keep your eyes open for more information on the ISTM conference website!

Yours,
Annelies Wilder-Smith
President, ISTM

The growth in Chinese tourism is phenomenal. There is now more travel from China to Africa than from the US to Africa.
B ack in 1988 it seemed like the world was moving fast. Some 25 years ago in transportation, the Seikan Tunnel was opened to trains. It was at the time the longest and deepest tunnel in the world, which dove under the Tsugaru Strait, connecting Honshu with Hokkaido, Japan. In telecommunications, the internet was about to explode with the intercontinental link that bridged the Atlantic Ocean between North America and Europe. Some of the first websites were built for what would become the world wide web. (The world's first website, info.cern.ch from Conseil Européen pour la Recherche Nucléaire or European Council for Nuclear Research, went live two years later). In politics, Mikhail Gorbachev introduced economic restructuring in the Soviet Union known as perestroika, which would later lead to the breakup of the Union of Soviet Socialist Republics and the fall of the Berlin Wall a year later. In fact, in athletics, the Summer Olympic Games in Seoul, South Korea, were the last for the Soviet Union and East Germany — two counties which would soon thereafter no longer exist. The Winter Olympics in Calgary, Canada, had a record-setting 57 countries and 1,423 athletes for the winter games including British ski jumper Eddie "The Eagle" Edwards. The 1988 Winter Games in Calgary included 57 countries and 1,423 athletes for the winter games including British ski jumper Eddie "The Eagle" Edwards and the Jamaican bobsled team. And perhaps most poignantly, in medicine, WHO initiated an eradication of polio program with UNICEF and Rotary Foundation, which to date, is on the brink of success, with only Nigeria, Afghanistan and Pakistan left to target. Part of what is so special of 1988 was the first CISTM in Zurich, Switzerland, the Conference on International Travel Medicine was held with the formation of ISTM just a few years later. Now 25 years later, we are still moving forward at seemingly rocket speed with telecommunications, medicine and athletics. Yet one thing hasn't changed: personal connections. In-person gatherings of colleagues and friends are still alive and well. These vital connections provide networking, education, advancement of medicine, and comradeship. We see old friends and make new ones. We hash out ideas and trade stories. We talk to researchers, scientists, clinicians and field workers. In Barcelona in 2017, although we’ve come a long way in science, medicine and technology, we still maintain those vital personal connections. In this issue of Travel Medicine News, you’ll find details about registering for Barcelona CISTM15. But you’ll also find other ways to make connections through interest groups, professional groups, committees, and other goings on in the society. See you in Barcelona! Christopher Van Tilburg Travel Medicine News Editor

SECRETARY-TREASURER’S REPORT

By any measure, the ISTM maintains its standing as the peak professional organization in travel medicine globally.

• We have a membership of over 3500 coming from nearly 100 countries worldwide.
• We have matured as an organization over the past 25 years in so many ways and it is a great time to be an ISTM member.
• We now have a robust certification examination (CTH) and continuing professional development program in travel medicine.
• The ISTM’s flagship publication, the Journal of Travel Medicine (JTM), is the longest standing journal in this field published today by an industry leading publisher, Oxford University Press, and is the go-to publication for our members. JTM is just one of the many benefits of ISTM membership, such as:
  • our ISTM Fellows Program
  • our Member-Benefit Programs
  • our ISTM Member Advantage Program, and
  • our ISTM Global Clinic Directory

There are membership initiatives being launched at regular intervals so check out www.istm.org and MyISTM.ISTM.org for details.

As we have now entered our Silver Jubilee Year celebrating 25 years of the ISTM (1991-2016), can I ask all our members to help make our ISTM even stronger with even greater outreach by introducing a new member to the Society or promoting the work of the ISTM through a donation to the ISTM Foundation when you renew your membership? We will formally celebrate ISTM’s 25th Anniversary at the upcoming 15th Conference of the ISTM (CISTM15), which will be held in Barcelona, Spain, from 14-18 May 2017 (www.istm.org/cism15). It promises to be one of the best ISTM conferences so far and Barcelona is a magnet for travelers being one of the world’s leading tourist destinations. Please check out the special ticketed event, which will be held during CISTM15 at the Poble Espanyol (www.poble- espanyol.com/en). This is a remarkable living architectural museum and cultural exhibit of 117 buildings representing 15 different communities across Spain. Having recently got back from Port Elizabeth, South Africa, I can report that the 7th Regional Conference of the ISTM (www.istm.org/regional) (RCISTM7), held there from 28 September to the 1 October, 2016 in association with the biennial conference of the South African Society of Travel Medicine, had an excellent scientific and social program. We also had the privilege of listening to inspirational South African adventurer and motivational speaker, Jo Rust, the first woman to ride around Africa on a motorcycle [www.jorustadventures.com] or RustP@t3. Prior to RCIST7, I also had the pleasure of attending the XIXth International Congress for Tropical Medicine and Malaria held in my home town of Brisbane, Australia, from 18-22 September 2016. It was pleasing to see a strong travel medicine component in this conference’s program with excellent ISTM member input. Remember to login to MyISTM from time-to-time and keep your information up to date and to check out member only resources.

Peter A. Leggate
ISTM Secretary-Treasurer

“Part of what is so special of 1988 was the first CISTM in Zurich, Switzerland”
Dear ISTM Members,

As the Society continues to grow, expand on our member offerings, and support the new ISTM Foundation the Secretariat has expanded. Our roles have been adjusted a bit with the new staff and positions. I’m delighted to share with everyone that we are close to hiring two new people to assist in the Secretariat, and I anticipate both be in place by the end of 2016.

I am honored to work with the following professionals on the ISTM Secretariat Staff Team.

Michelle Haynes, Member and Customer Service Coordinator
Michelle is our newest staff member, having just come onboard in September of this year. She replaces Kevin, who had an unfortunate accident and was unable to return to work. (He is recuperating and hopefully will be fine.) Michelle comes to us with many years of customer service experience and we are excited to welcome her to the team. She is the first-line support person to all members and customers for membership, registration, programs, MyISTM, and all that we offer.

Jodi Metzgar, Managing Director of Projects
Jodi has been with the ISTM for almost two years. She is the staff manager of the ISTM GeoSentinel project, and provides staff support to all of the Professional and Interest Groups. She also is the primary staff member responsible for the Research Awards, Scientific Program for the CISTMs, the ISTM educational programs and offerings, and works with me to support the ISTM Executive Board.

Elena Axelrod, Data and Finance Manager
Elena’s role has been slowing moving from the GeoSentinel project and more into the ISTM accounting functions for both the Society and the Foundation. She still provides data support to the GeoSentinel sites and staff, but has spent the majority of her time managing our accounts payables and receivables. She also works with our independent accounting and audit firms on financial reconciliations.

Amanda Martin, Marketing Coordinator
Amanda is just finishing her second year of work with the ISTM in a newly created position at that time. In fact, we didn’t even realize how much we needed someone with Amanda’s skills, knowledge and expertise until after she began. Amanda has taken our marketing and promotional activities to a new level, she manages our social media campaigns, all of our external communications with members and customers, our newsletter, magazine, Member Benefit website, and all of our promotional materials and events.

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Nancy Pietroski, GeoSentinel Data Analyst
As GeoSentinel continues to expand we decided to hire a part-time data analyst to help maintain and improve the quality and integrity of the data. We were fortunate to be able to bring Nancy Pietroski on board, who is an ISTM Member, a PharmD, and who has years of experience with infectious disease research.

The ISTM Foundation, Inc., promotes and fosters healthy and safe travel through the education of travelers, those who counsel travelers, and those who care for any who cross international borders. The Foundation also works to identify and raise awareness of social, environmental, cultural and health issues caused by travel and tourism within destination communities and with the responsibility to encourage and conduct research and develop strategies to protect local destination communities from negative impacts of tourism. In addition the Foundation provides research grants for cutting edge research in the field of travel and migration medicine.

The ISTM Foundation was recently established and the ISTM Executive Board appointed the following ISTM Foundation Board to begin its work. President: Bradley Connor, United States of America Secretary-Treasurer: Peter Leggat, Australia Board Members: Phyllis Kozarsky, United States of America Robert Steffen, Switzerland Annelies Wilder-Smith, Singapore

Taking off at a fast pace, the new Foundation has already raised funds with an initial goal of supporting an international Consensus Conference on Travelers’ Diarrhea that was held in early 2016. The Foundation hosted the most knowledgeable experts in TD from around the world to identify and address the most challenging issues of this major travel health problem in light of the growing worldwide problem of antibiotic resistance as well as the parallel concerns about the use of antimicrobial agents for treatment of this condition. The outcomes from the Travellers’ Diarrhea Consensus Conference will be published in the Journal of Travel Medicine, which will help guide not only the entire travel medicine community, but also primary care personnel in providing the best patient care — pre, during and post travel. Considerations for Foundation support include the development of new patient education tools, increased funding for research grants and the GeoSentinel Surveillance Project, as well as providing donations to other organizations which are primarily focused on delivering assistance to those in resource-poor countries.

We encourage all ISTM Members as they consider their year-end tax planning, to contribute to the ISTM Foundation. All contributions to the ISTM Foundation are fully tax deductible according to U.S. law, and may be as well in other countries. The ISTM membership renewal forms will include an option to donate. Even just a few USD added to your membership dues can make a difference. Additionally, should any members have suggestions on corporations or other foundations that might be approached to support the projects of the ISTM Foundation and Society, please alert Diane Nickolson of the ISTM Secretariat. Your help, as always, is appreciated!

Bradley Connor
ISTM Foundation President

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Bradley Connor
ISTM Foundation President
The Biennial Conferences of the ISTM (CISTMs) have been the premiere opportunity for travel medicine specialists and practitioners to gather and learn about the latest developments in the field. Delegates attend the conference to keep up to date on advances in the science and the art of travel medicine — they also attend the exposition to see new and innovative technologies, products and services. In the past decade travel medicine has emerged as a distinct multidisciplinary medical specialty involving all travel related aspects of existing medical specialties such as infectious diseases, tropical medicine, gastroenterology, obstetrics and gynaecology, occupational medicine, orthopedics, and pediatrics. CISTMs share the advances in the science and art of travel medicine while allowing those new to the field an introduction to this exciting medical discipline. The Scientific Planning Committee has confirmed the latest program. To stay up-to-date, please visit www.ISTM.org/CISTM15.

Plenary Sessions

Monday, 15 May

Migration
Migration, Human Mobility and Health: A Global Agenda, David Mosca, Switzerland
Screening Migrants at Europe’s Forefront: Evidence, Feasibility and Acceptability, Teymur Noori, Sweden
What do Migrants Bring to the Host Country, Cecile Kyenge, Congo

Tuesday, 16 May

Global Health
Public Health Emergencies of International Concern, Helen Rees, South Africa
Disease Surveillance and Mapping: From Big Data to Informal Networks, John Brownstein, United States of America
Global Health Security: Preparedness and Response: Can We Do Better and Stay Safe?, David Heymann

Wednesday, 17 May

Antimicrobial Resistance
Global Overview of Antimicrobial Resistance, Jordi Vila, Spain
Role of Travelers in the Spread of Resistant Organisms, Mary Wilson, United States of America
International Responses to Antimicrobial Resistance and Implications for Travelers, Marc Mendelson, South Africa

First Alan Magill Honorary Lecture
Sir Richard Feachem, United States of America

Panel Discussions

Travelers’ Diarrhea
Moderator: Mark Riddle, United States of America
Bradley Connor, United States of America
Anu Kantele, Finland
Prativa Pandey, Nepal

Refugee Crisis in Europe: What is the Situation?
Moderator: Rogelio Lopez-Velez, Spain
Louis Loutan, Switzerland
Alberto Matteelli, Italy
Davide Mosca, Switzerland
Androula Pavli, Greece

Continued from page 6

News From the Secretariat

Diane Nickolson
ISTM Executive Director

The ISTM has designated these companies as ISTM Member Service Providers to give ISTM Members considerable and exclusive discounts on the products and services you use every day. When we were developing the program, the ISTM chose to put the entire savings into the ISTM Member discount and is not generating any society revenue or benefit from this program - the savings these companies offer to ISTM Members is reward enough. You can easily identify participating companies by the special ISTM Member Service Provider Logo they are authorized to use.

For the latest list of providers and their exclusive discounts for ISTM members, go to www.ISTM.org and select the Member Advantage Program link.
ISTM Member Benefit Programs

The ISTM Professional Education Committee is pleased to announce a new ISTM Member Benefit Webinar Program recently approved by the ISTM Executive Board. Member Benefit Webinars are available at no cost for ISTM Members in good standing. If you are unable to participate in the live webinar live, it is also archived and available on the MyISTM website for ISTM Members to view, also at no cost. Just log into your ISTM member account to watch them.

The ISTM has also placed and will continue to place other programs as they become available on the portal, including ISTM satellite programs held at various congresses.

Member Benefit Webinars currently available for ISTM Members include:

- Travellers’ Diarrhea: What do we know? What should we recommend?
  Member Benefit Webinar recorded 9 November 2016
  Bradley Connor, United States of America
  Hans Dieter, Germany

- Neglected Immunizations for Particular Travellers
  ISTM Satellite recorded 29 September 2016
  Cheryl Cohen, South Africa
  Gerard Flaherty, Ireland
  Robert Steffen, Switzerland
  Leo Visser, The Netherlands

- Critical Vaccine Issues for Travel Health Practitioners in the Asia-Pacific Region
  ISTM Satellite recorded 4 March 2016
  Karin Leder, Australia
  Daniel Shouval, Israel
  Robert Steffen, Switzerland
  Jenny Visser, New Zealand

- Robert Steffen on the History of ISTM
  Introduction by Alan Magill, ISTM President 2009-2011
  Recorded May of 2011

International Society of Travel Medicine
Promoting healthy travel worldwide
www.ISTM.org

HISTORY OF THE ISTM:
Part One: Establishing the Society

In 1971 Bert DuPont published a paper in the New England Journal of Medicine where he studied Escherichia coli strains from U.S. soldiers in Vietnam with diarrhea and identified enterotoxigenic E. coli. He moved to Houston in 1973 and began studies on travelers’ diarrhea in Mexico and Guatemala the following year. In the mid-1970s Robert Steffen began studies on travel health risks, first mainly including malaria, vaccine preventable diseases and travelers’ diarrhea.

At a gastroenterology meeting in Sweden in the early 1980s Bert and Robert were both presenting their work on travelers’ diarrhea. They met and immediately a friendship and collaboration developed that persists until today. Soon thereafter Hans O. Lobel from the CDC malaria branch presented a paper on severe cutaneous adverse reactions to Fansidar in a meeting to which Robert contributed epidemiological data. Both collaborated with Jim Haworth from the WHO to organize the first international conference on travel medicine in Zurich 15-16 April 1988. Approximately 500 people attended the conference. The Proceedings of the 1st Conference on Travel Medicine, edited by Robert Steffen, Hans O. Lobel, James Haworth and David J Bradley — who gave a brilliant keynote lecture — was published as the first comprehensive travel medicine publication.

In Zurich Bert and Robert, convinced that travel medicine would rapidly become an important interdisciplinary field, discussed ways to promote it. Meanwhile there were many published studies of disease risks in international travelers. Bert was the driving force underlining that an international society would be important to allow the bringing opinion leaders together on a regular basis to discuss travel health issues and to help promote the field’s development. By personal experience, Bert commented on the growth of infectious diseases in the U.S. around the creation of the Infectious Diseases Society of America in the 1960s and by their publishing two journals.

At the second international travel medicine meeting in Atlanta in 1991 the ISTM was established, by-laws accepted and Bert was elected as first President with Robert elected the First President-Elect. Hans Lobel was elected as Secretary/Treasurer and Counselors were elected at this meeting Michael Binder, John Goldsam, Eduardo Goluzza, Phyllis Kozarsky, the latter having greatly contributed to the success of the meeting.

Bert and Robert were eager to launch a scientific journal. As Travel and Traffic Medicine International was already existing they first met with its British editors who however rejected the idea of collaboration. Bert and Robert were not disappointed because the editors seemed tentative and disorganized; that journal only survived one or two more years. Thus both friends met with Brian Decker and the newly created ISTM approved the Decker Publishing Company in Canada as the first publisher of the Journal of Travel Medicine.

The Society asked Charles D. Ericason to be the first Editor-in-Chief. The first issue was published in 1994. In the first issue, a lead editorial was written by Robert and Bert “Travel Medicine: What’s That?” J Travel Med 1994;1:1-3.

Herbert L. DuPont and Robert Steffen

“At a gastroenterology meeting in Sweden in the early 1980s Bert and Robert were both presenting their work on travelers’ diarrhea. They met and immediately a friendship and collaboration developed that persists until today.”
Soon after the Zurich meeting in 1988, Hans Lobel suggested to Phyllis Kozarsky that they might together try to host another travel medicine conference since the one in Zurich was so successful. Robert Steffen would assist Hans with the scientific program and speaker list. Phyllis, having attended the Zurich conference, was tentative, yet excited about working with the “superstars” in this arena. She was new to the field of travel and tropical medicine, yet was asked for ideas with regard to structure of the conference and speakers as well. Her background was HIV care and clinical trials, and the hierarchy at Emory University was not in favor of helping to sponsor the conference, convinced that Atlanta could never be a host for an international meeting. Neither travel and tropical medicine nor global health were on their radar screen. Phyllis, alone, signed a contract in 1989 to fill all 900 rooms of the Marriott Marquis Hotel in downtown Atlanta from 9-12 May 1991.

Being naïve helped her not feel the magnitude of her action as she began to organize a conference. She gathered colleagues and friends from Emory and CDC, fellows and stray residents to do various chores, and met weekly with these groups to put together the semblance of a meeting—guessing on room size requirements, organizing after hours’ dinners and parties, and figuring out the sequence of events for the week. Susan Stokes, an administrator at CDC, became invaluable in the process, after which she became invaluable to the Society as she eased into the secretariat position. Although Hans, with Robert and Bert, were more involved in program development, Phyllis developed the idea of the “workshop”—the interactive sessions that have been valuable for the education of providers who want to learn how to practice travel medicine, as Hans and Robert have been learning at the time. Phyllis arranged for the Emory CME department to assist, a service they have continued to provide for many of the subsequent conferences, including ISTM-sponsored updates.

Funding was an issue — there was no society and no money. Bert’s and Hans’ relationships were helpful, but Phyllis went to work on local international businesses and the pharmaceutical industry over a two-year period to cover the cost of the meeting, knowing that the bill would only be fully paid if the Marriott rooms filled. During the two-year period, Hans shared with Phyllis the discussions about starting a society of providers and researchers in travel medicine. As 1991 rolled around, the excitement was palpable, but nerves were frayed; fears were rising because by February, the Gulf War had decreased transatlantic flying by 50%.

Despite the challenges, over 850 attendees hailed from 52 countries. The Society was founded and monies collected from the meeting were donated to open the ISTM’s first investment account. As the secretariat was in Atlanta, Phyllis arranged for the Society to be incorporated as a non-profit entity so it could legally begin its business. Phyllis took charge of starting the professional education committee dedicated to the continuation of the Society’s meetings and the enhancement of education in the field for all providers. She also worked with Hans on the first ISTM newsletter, mailed to all “members” who had attended the meeting. Newsletters contained profiles of those elected, summaries of articles published about travel medicine topics from various journals, and other items of interest submitted from members around the world. Soon after the meeting, Robert, Hans, and Phyllis published an article in the Annals of Internal Medicine entitled, “Travel Medicine: New Frontiers,” (Ann Int Med 1991.Oct 1;115:575) highlighting the successes of the meeting and the fact that travel medicine had moved from a cottage industry to a worldwide medical specialty. Phyllis Kozarsky.
One of the ISTMs flagship programs is the GeoSentinel Network. This is a global surveillance network created in order to gather and share data concerning travel- and immigration-related infectious diseases. With the support of ISTM, the United States Centers for Disease Control, the Public Health Agency of Canada and the European Centre for Disease Control (ECDC), GeoSentinel identifies illnesses among travelers, immigrants, and refugees and alerts medical and public health professionals. GeoSentinel Sites, participate in surveillance and monitoring of travelers to detect alarming diagnoses or atypical events and monitor trends. These activities allow for the creation of a unique database on travel-related morbidity and through information sharing globally, informs public health surveillance and monitoring of travelers using advanced molecular diagnostics. The Special Populations Working Group has produced a new form for data collection for migrants that is currently being pilot tested by a number of sites. The Tracking-Communications-Workgroup follows up on alarming diagnoses, creates alerts and eBulletins for distribution to GeoSentinel sites and Affiliate members and creates and sends ProMed postings. Currently alerts are dominated by the spread of Zika virus to new areas and the reporting of non-vector borne Zika virus. This group also initiates rapid analyses including a fast-tracked evaluation of Illness in Syrian refugees.

The GeoSentinel Annual Meeting took place 13-15 May 2016 in Athens, Greece in a spectacular setting at the foot of the Acropolis. This was a landmark meeting with a wide range of cutting edge topics, working group reports and a new, 5-minute, research speed talk session. Guests included representatives from BlueDot, Troponet and the Hellenic CDC. There were 78 people from 53 sites in attendance. The GeoSentinel Midyear meeting will be held in Atlanta, Georgia, USA on Sunday, 13 November, for those attending the ASTMH Annual Meeting.

Members receive:

- Access to the only worldwide network of people working in the field of travel medicine through participating in the private, members-only MyISTM online portal, including the TravelMed ListServ with more than 3,500 members from 100 countries. The MyISTM portal also includes exclusive late-breaking travel and medical alerts and the ability to quickly and easily receive and share information with colleagues around the world.

- Member benefit webinars on the latest issues facing travel medicine practitioners today ... and if you can't attend the live webinar, they are archived for ISTM Members to access shortly after they are initially presented.

- Listing in the Online Global Travel Clinic Directory (with more than 800,000 visits each year) – with the new features allowing clinics to include availability of the Rabies Vaccine, Rabies Immune Globulin and JE vaccines.

- Specialized publications including:
  - Journal of Travel Medicine the ISTM peer-reviewed scientific journal published bimonthly
  - Travel Medicine News
  - The Responsible Traveler
  - Bibliographies on focused areas in the practice of travel medicine
  - Educational Materials and Handouts, including 7 tips for The Responsible Traveler, 10 tips for Healthy Travel, and ISTM Educational Patient Cases

- Eligibility to apply for Research Grants
- The ability to apply for Travel Awards for CISTM Presenters
- Exclusive alerts from and the ability to participate in GeoSentinel
- The ability to join ISTM Member Activity Groups, including Interest Groups and Professional Groups
- Eligibility to serve on ISTM Standing Committees
- The opportunity to contribute to the Mission and Goals of ISTM through the ability to vote and run for the Board of ISTM.
The exam is currently offered in conjunction with the biennial CISTM in odd-numbered years, and offered either once or twice in even numbered years at regional meetings. The next opportunity to take the ISTM Certificate of Knowledge (CTH®) Examination will be on Sunday 14 May 2017, just before the opening of the CISTM15, 14-18 May 2017 in Barcelona, Spain. The early registration deadline is 31 December 2016 and the final registration is 3 April 2017. Seating being limited, we advise candidates to register early. Please note, the ISTM will be offering a discounted rate for those residing in countries identified by the World Bank as Low and Low-Middle Income. You can find a list of these Countries on our website, www.istm.org/join.

The CTH® is awarded to professionals who pass the Certificate of Knowledge Examination that has been developed by an international panel of travel medicine experts representing a variety of professional disciplines. The examination is based on the ISTM Body of Knowledge, available on the ISTM website. Those passing the examination will receive a Certificate of Knowledge and will be granted a “Certificate in Travel Health®” or “CTH®” that must be maintained every ten years to remain active. ISTM members who have been awarded and maintain the Certificate will also be recognized in the ISTM Directory of Travel Medicine Providers and within the Travel Clinic section of the ISTM website.

Since 2003 the exam has been given 14 times in 10 countries (Australia, Canada, Hungary, Nepal, The Netherlands, Portugal, Singapore, United Kingdom, United States of America, Vietnam) to 3539 candidates from 69 countries (some candidates have taken the exam more than once). The current number of ISTM CTH holders is 2351.

This is a very good achievement and I hope to be up to the task of improving it still.

Pierre Landry, Examination Committee Chair
2016 has brought some fairly significant enhancements to the ISTM Journal of Travel Medicine. It is our first year publishing an online only Journal with our new publisher, Oxford University Press. The transition was completed successfully with contributions from many people during the process.

I'm also pleased to report that we are in the process of creating some special themed issues and supplements focusing on topics important to the entire travel medicine community. This is a new venture for us, and we are pleased that we will be producing two of these over the next several months. There will be a supplement focusing on the learnings and outcomes from the recent ISTM International Travelers’ Diarrhea Consensus Conference, 13-17 April 2016 in Atlanta, Georgia, United States, and an issue on “Closing the Gap” with the Guest Editor our President, Annelies Wilder-Smith.

Producing the JTM is the result of the efforts of many, and I’d like to acknowledge and thank the JTM Editorial Board for their time and contributions.

Erich Caumes, JTM Editor-in-Chief
Charles D Ericsson, JTM Deputy Editor-in-Chief

The Journal of Travel Medicine (JTM) was the idea of Dr. Bert DuPont and Dr. Robert Steffen. They recognized that any important scientific society should have a strong journal as its flagship and pursued its inception eagerly. Travel and Traffic Medicine International already existed, so they first met with its British editors with the idea of collaboration. The idea was rejected, but Bert and Robert were not disappointed; the editors seemed tentative and disorganized, and that journal only survived a couple more years. They then met with Brian Decker, who was building a portfolio of medical journals and accepted the challenge of helping an infant ISTM build its journal. BC Decker Publishing Company in Canada became the first publisher of JTM.

The Society enlisted Charlie Ericsson to be the first Editor-in-Chief. The first issue was published in 1994. As was entirely fitting, the lead article was an editorial written by Robert and Bert: “Travel Medicine: What’s That?” (J Travel Med 1994; 1:1-3.)

During the early years JTM (as was ISTM) a small organization. There was no automated system for online submissions. Everything was done by mail, and the editorial assistant was Charlie’s secretary, who worked the journal from home as an extra job. The Editor received no personal stipend. Shepherding JTM into the 21st century was a labor of love, and when the journal was finally indexed in 1998, it was a day for rejoicing.

The journal matured when Robert Steffen took over as Editor-in-Chief with Gaby Bossard as Editorial Assistant. It has continued to flourish under the watchful eye of Erich Caumes, who has maintained a high bar of excellence, rigorous review, and a healthy rejection rate.

Following a period with publisher Wiley Blackwell, recently Oxford University Press assumed publishing duties in a purely electronic format. JTM is looking forward to a long and prosperous relationship. ISTM Members can access the Journal by logging into their account and selecting ISTM Journal of Travel Medicine from the menu on your profile.

Dr. Bert DuPont and Dr. Robert Steffen recognized that any important scientific society should have a strong journal as its flagship and pursued its inception eagerly.
The Nursing Professional Group was chartered in 2011 to support the interests of nurse members of ISTM and now has 425 members. All nurses are automatically enrolled in the group when they initially join unless they request not to be added.

I have been an ISTM member since 1995, but my involvement with travel medicine, like so many members, actually predates the charter of the organization — it just wasn’t called travel medicine. Currently, I have a dual role at my company, Premise Health, serving as the on-site nurse for the Ford Foundation in New York City as well as serving as the national specialist consultant and clinical educator for travel medicine. I drive policy-making and practice excellence for nurses and physician at over 300 clinic sites providing on-site immunization programs. This facilitates a great opportunity to network with fellow nurses from around the world. I encourage NPG members to mark their calendars for this important biennial conference. And please consider submitting poster abstracts.

NPG also offers two awards: one for the emerging nurse new in their career and one for the experienced, leadership-level nurse annually in the form of complimentary CISTM conference attendance. Watch your mailbox for information on applying for this award.

Taking the exam in Barcelona? Please join our NPG Blog for CTH Exam Preparation to have your questions answered. Visit the NPG pages for information on joining this blog group: www.istm.org/nursinggroup.

Looking ahead:
As I consider my role as the voice of nurses in ISTM for the next two years, I truly want to engage all of our nursing professionals so all issues, such as practice challenges or learning needs, are addressed. If you are not already a member of NPG, please sign up for this free additional benefit of ISTM membership. I welcome all your suggestions for building NPG and maintaining a strong role for nurses within ISTM. Contact me at sueann.mcdevitt@premisehealth.com.

Meet the new NPG Chair: Sue Ann McDevitt, USA

The Pharmacist Professional Group has a number of ongoing projects that have been supported by ISTM in the form of a small bursary to employ a pharmacy student intern to work on them over the summer vacation. This has been conducted under the guidance of Prof. Larry Goodyer at DeMontfort University United Kingdom. This summer good progress has been made on three of these projects.

A database of literature on pharmacist involvement in Travel Medicine

The database gathers together published material concerning the involvement of pharmacists in travel medicines, including reviews and original research. This also covers the growing involvement of pharmacists more generally in delivering immunization programs. Where possible conference abstracts and presentations are also cited. The database now stands at over 130 references and should soon be available on the ISTM website.

Carrying Medicines across international borders

This is a subject often of great confusion to travelers as country regulations can vary greatly. The PPG group has for the last few years been constructing a database covering country submissions on the International Narcotics Control Board and other information made available via individual national websites. This database now has over 100 countries and work continues on identifying further sources of information. This should also be made available to members in the near future.

Meeting the needs of migrant and refugee populations

There is an increased demand for knowledge about health of migrant and refugee populations. In the past we have achieved in producing collection of resources related to migrant and refugee health and participating in panel symposiums during ISTM Congresses. We hope to expand our involvement in promoting further discussion relating to the subject within the travel health community.

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PSYCHOLOGICAL HEALTH GROUP

Two members of the Psychological Health of Travelers Interest Group Council traveled to Port Elizabeth for the South African Society of Travel Medicine conference at the end of September.

During our symposium we heard from Jolande Rust about her experience during extended travel in Africa, Lineke Westerveld-Sassen from Nairobi focused on promoting resilience in travelers and Mike Jones disclosed what we can learn from David Livingstone and his family. Overall, it was a successful conference.

Several members of the Interest Group Council retire this year. We are confident that a new leadership will inject energy and new direction for the future.

Michael Jones
Psychological Health Group Chair

RESPONSIBLE TRAVEL

- How can volunteering maximize positive impact to recipient country and promote long term independence?
- How can cruise ships balance environmental impact and cruise-ship work environment with positive tourism?
- What should we know about sex tourism?
- What is the complex relationship between tourists and indigenous people? And who ultimately benefits from cultural or ‘ethno-tourism’?
- What are the wider ethical implications of travel and what responsibility do travel health professionals have in this, beyond discussing the health risks to individual travelers?

The ISTM Responsible Travel Group has certainly not been able to answer all these or many other questions around social, cultural, environmental and health issues caused by travel and tourism. However, we aim to promote discussion and research around these issues. Over the last year our council members have represented the group at regional travel medicine conferences where we have been able to engage in discussion with those who have an interest in the broader issues of travel health and we have all enthusiastically supported those sessions related to Responsible Travel.

Through group discussion – we need a lot more of this, and a library of resources for interested members – and we are working on this, we hope to be able to look at ways to close the gap between travelers and host communities.

Susanna Maybin
Responsible Travel Group Chair

STUDENT TRAVEL ABROAD

As travel health professionals working in a college setting with students, we all know that this group loves to travel as much as we enjoy travel. However, the scope of travel medicine for the student population within colleges has widened considerably in recent years. Increasing numbers of international students are now studying in Western university campuses, international or non-domestic branch campuses in developing countries have been established and students of every age are going abroad on study tours. Factors such as increasing new and emerging infectious diseases, the speed of international travel and increased risk-taking behavior in this group add to the challenges. In addition to the travelers themselves, universities and travel medicine providers have a responsibility to promote safe travel for their students and teaching those leaving abroad, as well as facilitating adequate medical care for international students from less-developed countries studying in our communities and on our campuses. Working closely with university study abroad offices (as well as disabilities services and counselling departments) to help coordinate safe and healthy travel abroad can be a vital aspect of college travel health. Providing culturally appropriate medical and mental health care for the growing number of international students coming to our home universities offers additional challenges.

Many of the challenges involved in working with traveling college students are unique, and sharing knowledge among those who are involved would be very beneficial to all.

At the last CISTM in Quebec City, a group of keen and dedicated travel health professionals from around the world met for the first time, after months of laying the initial groundwork, to establish a ‘Student Travel Abroad’ Interest Group. We are thrilled to report that this new group was approved by ISTM administration and is up and running. A couple of our members were present at the recent APTHC Conference in Kathmandu, Nepal. More recently, the American College Health Association (ACHA) held its annual meeting in San Francisco and a lively meeting of travel health professionals working at university campus health services took place (including at least six ISTM members!).

There was very strong interest in developing a formal Travel Health Coalition within ACHA and plans are actively moving forth to establish this new group. This Coalition would ideally be a strong collaborative partner with STA. Many people within ACHA as well as the American Travel Health Nurses Association have expressed great enthusiasm regarding working together with ISTM and making all groups involved even stronger.

The STA leadership is delighted with the progress of establishing a more formalized forum for collaboration amongst those working with the unique challenges of traveling students, and would heartily welcome your input and participation. Many thanks to all who have supported this new endeavour, and we hope you will consider joining the STA group if you are not yet a member!

Sarah Kohl
Student Travel Abroad Group Chair

Nurses Association have expressed interest in working with travel health professionals in a number of meetings across the globe — Kathmandu, London and Port Elizabeth (South Africa) have all hosted Travel Medicine meetings and we’ve played a part in the main program as well as running workshops on various aspects of pediatric travel medicine. There are also plans for a workshop on pediatrics at CISTM15 in Barcelona next year.

I’ll be chairing the Scientific Committee for the next Asia Pacific meeting to be held in Bangkok in March 2016. If there are important topics you feel should be included, please let me know.

John Christenson continues to do a fantastic job maintaining the Pediatric Group Council. He has been represented at a number of meetings across the globe — Kathmandu, London and Port Elizabeth (South Africa) have all hosted Travel Medicine meetings and we’ve played a part in the main program as well as running workshops on various aspects of pediatric travel medicine. There are also plans for a workshop on pediatrics at CISTM15 in Barcelona next year.

John Christenson continues to do a fantastic job maintaining the Pediatric Interest Group Bibliography, a list of references relevant to pediatric travel medicine. If there are recent articles you feel are missing, please let us know via email or on the listserv.

Please also let me know if you have any requests or ideas for activities that you think our group should pursue.

Mike Starr
Pediatrics Group Chair
STM offers a number of research programs to help further the field of travel medicine. Each year Research Grants are awarded for cutting-edge research in the field. Travel Awards for CISTM Presenters are also provided to offer opportunities for those otherwise unable to attend and present at the International Congresses.

The Research and Awards Committee Wishes to Announce the Winning Projects for the 2015-2016 Research Awards:

- **Inhaled Budesonide for Altitude Illness Prevention**
  - Dr. Christopher Davis, United States, Principal Investigator

- **Persistence of neutralizing antibodies after immunization against Yellow Fever (YF) in HIV-infected patients**
  - Dr. Charlotte Martin, Belgium, Principal Investigator

- **Differential Vaccination Requirements of newly arrived Eritrean asylum seekers – an informative sample analysis**
  - Dr. Cornelia Staehelin, Switzerland, Principal Investigator

- **Association of Dengue Serotype-Genotype and Disease Severity in Foreign Travelers Admitted at Kasih Ibu Hospital, Bali, Indonesia**
  - Dr. Dewa Ayu Sri Masyeni, Kasih Ibu Hospital, Bali, Indonesia

This year the ISTM devoted special funding for research in resource-limited countries and emerging markets for the first time. This funding was in addition to the annual research grant program already in place. We are happy to announce the first recipient of this funding.

- **Persistence of Zika Virus in Semen After Acute Symptomatic Infection: a European clinical and laboratory observational prospective cohort study**
  - Dr. Denis Malvy and Dr. Matthieu Mechain, France, Principal Investigators

- **Association of Dengue Serotype-Genotype and Disease Severity in Foreign Travelers Admitted at Kasih Ibu Hospital, Bali, Indonesia**
  - Dr. Dewa Ayu Sri Masyeni, Kasih Ibu Hospital, Bali, Indonesia

This year, the ISTM has devoted special funding for Zika Research. Congratulations to the 2016 Zika Research Award Winner:

- **Persistence of Zika Virus in Semen After Acute Symptomatic Infection: a European clinical and laboratory observational prospective cohort study**
  - Dr. Denis Malvy and Dr. Matthieu Mechain, France, Principal Investigators

Martin Grobush, Research and Awards Committee Chair
Elizabeth Barnett, Research and Awards Committee Co-Chair

### UP Coming MEETINGS

- **Travel Medicine Review and Update Course**
  - Washington D.C., United States of America
  - 10-11 March 2017
  - For more information: [www.ISTM.org](http://www.ISTM.org)

- **The 15th Conference of the ISTM (CISTM15)**
  - Barcelona, Spain
  - 14-18 May 2017
  - For more information: [www.ISTM.org](http://www.ISTM.org)

#### TRAVEL MEDICINE YEAR IN REVIEW

2016: AN OLYMPIC YEAR

2016 was the year of the summer Olympics in Rio de Janeiro, Brazil. In keeping with this theme, the medals for coverage in travel and tropical medicine news for 2016 go to:

- **GOLD: Zika Virus**
  - Zika was definitively the talk of 2016 with almost daily reports of outbreaks throughout the world, endemic transmission, or local mosquito-borne infections. Especially alarming were the reports of person-to-person transmission of the virus, most likely sexually, but also through breast milk, transfusions, or transplantations. At the end of August, the US Food and Drug Administration recommended that all donated blood be screened for Zika. GeoSentinel surveillance sites have started to collect non-vector-acquired routes of Zika transmission in returned travelers, in addition to continuing to capture screening for and diagnosis of the disease, especially in pregnancy. On the ISTM TravelMedicine listserv as usual contains a plethora of extremely useful discussions about the vaccine, including recommendations, boosters, waivers, etc. Search the archives to see if a particular topic has already been posted.

- **SILVER: Yellow Fever**
  - A yellow fever outbreak in Angola in December 2015 has spread via infected travelers to Democratic Republic of Congo, Kenya, and China; other outbreaks were reported in Uganda and other African countries as well as some in South America. Of special concern is the virus is thought to be transmitted by infected A. aegypti mosquitoes directly between humans (rather than acting as incidental hosts), and that has not been found in Asia before, intensifying fears of potential global spread. To complicate matters, there is a shortage of yellow fever vaccine (and diluent) due to a variety of reasons; alternative doses are currently being used. At the end of August, the WHO recommended that national systems put in place specific measures for and diagnosis of the disease, especially in pregnancy. On the ISTM TravelMedicine listserv as usual contains a plethora of extremely useful discussions about the vaccine, including recommendations, boosters, waivers, etc. Search the archives to see if a particular topic has already been posted.

- **BRONZE: Tie between Malaria, Polio, Cholera**
  - Malaria cases rose in Greece due to an influx of migrants into the country; blood donations were suspended in some districts to stem the tide of infections. Venezuela, once considered a leader in malaria eradication, has experienced a resurgence in the disease as people are going to work in mines in malaria-endemic regions of the country, then bringing this disease back to populated cities. However, good news was reported on 5 September, as Sri Lanka was declared malaria-free. After two years of being polio-free, Nigeria reported three cases as of early September. In 2016, only Afghanistan and Pakistan were reporting cases of polio, albeit in very low numbers. In cholera news, the UN admitted responsibility for the 2010 cholera outbreak in Haiti. More encouraging was the WHO efforts in Democratic Republic of Congo to stem the tide of cholera in that country.

### Travel Medicine News

**2016: an Olympic year continued on page 26**
HONORABLE MENTION:
In late September, global leaders of the UN General Assembly held a high-level meeting to discuss the issue of Antimicrobial Resistance (AMR) and the lack of access to antimicrobials in low- and middle-income countries. This was only the fourth time a health issue has been discussed by this group (others were HIV, Ebola, and communicable diseases). World Antibiotic Awareness Week will be held 14-20 November. See the WHO press release and the Global Action Plan on Antimicrobial Resistance for more information on this initiative.


www.wpro.who.int/entity/drug_resistance/resources/global_action_plan_eng.pdf

TRAVEL MEDICINE ALERTS: For medal-winning news on outbreaks, alerts, etc., please remember to log in to ISTM.org and check TravelMedicine Alerts under TravelMedicine Resources (see below). Another great resource (not listed below) is ProMED Digest, from the International Society of Infectious Diseases. Sign up at: www.promedmail.org.

TRAVEL MEDICINE ALERTS
This section includes links to regular reports on travel safety, outbreaks of disease, food and water safety, weather, civil unrest, emergencies and disasters, vaccine supply issues, and other travel medicine related issues.

ISTM GeoSentinel Alerts
Travel Medicine and Traveler Alert Services
The ISTM appreciates the support and excellence of all travel medicine specialists and believes it is important to promote and import information with ISTM Members. Many thanks to the Center for Tropical and Travel Medicine, Academic Medical Center, The Netherlands for Excellent Beacon Children’s Hospital USA for HealthMap, IET, and Sketels for their support.

Epiblitz
HealthMap
IET
Sketels

Government and Public Health Organizations
- World health Organization
- US Centers for Disease Control and Prevention
- European Centre for Disease Prevention and Control
- UK National Travel Health Network and Centre

Look for links to organizations above whose websites are provided for information and verification only. The ISTM does not assume responsibility for the website or its part of the information found there. If you are posting any information, an acknowledgment of information source is required.

GeoSentinel sites are being asked to collect antimicrobial susceptibility data on certain infections and organisms in support of this critical initiative. Also in late September, PAHO/WHO announced that the Region of the Americas were the first to in the world announce that the Region of the Americas had been declared free of measles (outbreaks from imported strains still occasionally occur, however). Mass vaccination efforts led to this achievement.


TRAVEL MEDICINE NEWS
2016: an Olympic year

You may have noticed the Introduction to Travel Medicine Teaching Slide Set is down from the website.

We are excited to announce that the ISTM Professional Education Publication Committee are currently working on a total re-do with the most up-to-date information as this slide set is a great benefit for those in travel medicine.

Once the new slide set is available, we will alert the membership through email, our website, and social media.

Mary-Louise Scully
Professional Education Committee Chair

A new committee has recently been empaneled by the Executive Board, the Special Recognitions Committee (SRC). This committee is currently composed of ex-presidents, Fiona Genasi, Louis Loutan, Prativa Pandey, Phyllis Kozarsky and Charles Ericsson. Our charge has been to fine tune the criteria for “Fellow” status for ISTM members and then to administer the approved plan. Initially the Executive Board grandfathered in a select group including present and past presidents, secretary treasurers, and JTM editors. The committee then invited members to apply for fellow status according to published criteria and recommend to the Executive Board those applicants who we feel meet criteria. Those selected will be announced at the CISTM15 in Barcelona. The committee is aware that a number of worthy members have not yet applied for fellow status and encourage them to do so when the next round of applications is open for submission. Criteria are published on our website and an announcement will be made to all members when applications can be received.

The SRC also established criteria for the Alan Magill Honorary Lectureship. This is a special lecture to be given at each biennial CISTM. The Executive Board has graciously funded travel, room and board and CISTM registration for this lectureship so that we might entice giants in their fields to give cutting edge talks in their area of expertise.

Finally, the SRC is pondering additional honors to bestow such as an ISTM Service Award for exceptional service to our society or specific interest groups. The SRC welcomes members’ thoughts on possible awards. Please address your ideas to charles.d.ericsson@uth.tmc.edu.

Charles D. Ericsson
Special Recognitions Committee Chair

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Charles D. Ericsson
Special Recognitions Committee Chair

ISTM Founding Fellows
Class

Eric Caumes, France
Bradley Connor, United States of America
Herbert DuPont, United States of America
Charles Ericsson, United States of America
David Freedman, United States of America
Fiona Genasi, United Kingdom
Jay Keystone, Canada
Phyllis Kozarsky, United States of America
Peter Leggatt, Australia
Hans Lobel, United States of America

[Posthumously]

Louis Loutan, Switzerland
Alan Magill, United States of America

Charles Ericsson, United States of America

[Posthumously]

Prativa Pandey, Nepal
Michel Rey, France
David Shlim, United States of America
Robert Steffen, Switzerland
Frank von Sonnenburg, Germany
Annelies Wilder-Smith, Singapore
Challenging Cases: Voice Your Opinion

Formerly “Ask the Experts”

Winston Churchill toured the United States of America during prohibition and carried a note from his physician that stated, “...the post-accident convalescence of the Hon. Winston S. Churchill necessitates the use of alcoholic spirits especially at meal times.”

Long-term travelers carrying months’ worth of medications face confiscation of prohibited drugs, such as narcotics and psychotropics, based on a country’s drug policy. What advice do you give to long-term travelers, such as students and expatriates, regarding travel with prescription medications into countries that pose bans or restrictions on certain medication such as narcotics and psychotropics?

Read how your ISTM colleagues tackle this problem.

1) Derek Evans BSc(Pharm), MRPharmS, MPSI, Travel Health Specialist and Consultant; United Kingdom

The question to ask is, “How much benefit does the patient receive from these medicines?” In the class of narcotics, the conditions are occasionally not reviewed frequently enough and patients have self-sterilized using them “as needed”. In these cases, suitable alternatives can be substituted.

For medicines regarded as essential in a stabilized patient and there is clinical reasoning not to make a change, then a letter from a prescriber is considered essential. Contact with the visiting country embassy before departure or the foreign affairs department of the home country will usually provide local advice and guidance on policy. The main point is: the research must be done before departure.

2) Sarah Kohl, MD, CTM; United States of America

Long-term travelers with chronic illnesses face many obstacles. Ensuring an adequate supply of medication is a formidable task. Health insurances often restrict how much medication can be dispensed at one time. In some instances, such as stimulants or narcotics, there are US federal laws in place that limit dispensing of controlled substances to no greater than 90 days at one time, regardless of travel plans. Occasionally an accepted medication in one country may be illegal in another.

It may seem as if there are only two options: do without the medication or bring it in without permission. Neither option is satisfactory. Instead the traveler can use this as an opportunity to re-think their medications.

Rarely is long-term travel a last-minute decision. In the time spent preparing, the traveler can investigate whether there are similar medications allowable at the destination. They can switch before leaving or locate a doctor at the destination who would be willing to assume care for the traveler.

Travelers can check to see if medications are allowed or if a waiver can be obtained by contacting the host country embassy or online databases. Mailing is not an option as postal regulations often prohibit mailing medication and packages get lost or stolen.

www.deadiversion.usdoj.gov/fag/mult_rx_faq.htm
www.tsa.gov/travel/special-procedures

The INCB describes many individual country regulations. Further information can be obtained from country specific websites though these can be difficult to interpret. Contacting the embassies directly is a possibility but time consuming. Some countries list medicines they consider to have abuse potential and prohibit certain substances such as anabolic steroids. There are a few countries such as the Emirates that have more strict regulations and prohibit a wider range of medicines.

In summary take particular care when carrying psychotropics and narcotics, keep all medicines in original labeled packaging and carry a copy prescription or physician letter.

3) Mar Faraco, MD; Spain

In Spain, we have an official Agency (AEMPS), part of de MoH, that regulates this issue and the traveler should ask for a document authorizing travel with these medications. I provide the web page and/or telephone number and they should contact them and follow their instructions to get a certificate.

I recommend they travel with the original packages and always with a copy of his/her medical record or a certificate signed from his/her doctor. If necessary I translate it to English and sign and stamp the translation.

I do not usually check specific restrictions at a particular place; I assume that medications of potential abuse, such as narcotics, could be controlled in every country, but normal medicines, such ibuprofen, loperamide, and omeprazole in small quantities, are usually not going to pose any problem.

4) Larry Goodyer, PhD, MRPharmS; United Kingdom

In general, travelers do not usually experience problems carrying medicines for personal use across international borders, but there are a few principles to follow in order to reduce the risk of confiscation of such medicines or potential prosecution. There are usually restrictions on narcotic and psychotropic medicines being substances of potential abuse. Most countries will allow the travelers to carry 30-day supply and would also require a copy of a doctor’s prescription and/or letter describing the need for medication.

Regulations can vary so details do need to be checked. The first step for the traveler is to check the International Narcotics Control Board (INCB) website: www.incb.org/incb/en/publications/Guidelines.html

The INCB describes many individual country regulations. Further information can be obtained from country specific websites though these may include confiscation and stiff penalties like arrest, imprisonment or even a death sentence.

Adequate pre-travel advice and preparation will prevent these inconveniences.

Rules like carrying essential medicines in their own containers and a copy of the prescription (preferably in the language of the destination country) may be sufficient for common drugs and shorter stays of one month. Longer stays and particular types and quantities of drugs may require additional pre-travel guidance and even benefit from continued medical supervision in the destination.

Entities like the International Narcotics Control Board work to standardize requirements but significant deviations prevail and a review of the destination countries requirements must be reviewed. Also updated information from consular affairs offices and from the ISTM Listserv can be useful resources.

Nancy Piper Jenks

Mary Louise Scully

Debra Stoner

Travel Medicine News
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