



## 9th Conference of the International Society of Travel Medicine



Lisbon is the ideal stage for a conference on travel medicine.

In the fifteenth and sixteenth centuries Portugal was one of the world's great maritime powers, a leader in the knowledge of nautical science, ship construction and navigation. Portuguese explorers boldly sailed uncharted waters in their quest to discover new worlds. This rich colonial past is still very much in evidence in Lisbon's grand imperial buildings and stunning monuments.

Lisbon is a European city like no other. It melds the Atlantic Ocean, Western Europe and Northern Africa. It boasts as grand a cultural and historical heritage as any other major European city, but also has a tumbledown, earthier side that sets it apart. The city centre is a buzzing grid of grand streets, rumbling old trams, antiquated funiculars, and elevators. The funiculars and elevators help you negotiate Lisbon's steep hills.

At CISTM9, we strongly recommend that you attend our already traditional lecture series, "Meet the History" which will highlight Portugal's history and culture. Delegates and accompanying persons are cordially invited. For details see the conference schedule on our CISTM9 website.

Here are some of the other highlights from CISTM9:

### Workshops

The popular continuing education workshops will once again be a significant part of the program in Lisbon. These are designed to be interactive sessions where two experts on a topic discuss with each other and with the audience actual clinical scenarios pertaining to common or controversial areas in travel medicine. While the leaders will bring some pre-selected scenarios, attendees are encouraged to bring their own questions and clinical dilemmas as well. This year several of the workshops will feature topics that over the past two years have been frequent sources of debate on the TravelMed listserv.

- *Yellow Fever: Risk Assessment and Vaccine Safety* led by Rachel Barwick of the US CDC and David Hill, Director of Nathnac (National Travel Health Network and Centre) in the UK.
- *Rabies Immunization: Practical Issues* led by David Shlim, founder of the CIWEC Clinic in Kathmandu and Sonny Lau from the TMVC Melbourne Clinic.
- *Pregnant and Breastfeeding Travelers* led by Sheila Mackell and Phyllis Kozarsky.

### Malaria Prevention

This years malaria prevention symposium will feature Kevin Kain, University of Toronto, discussing *New Developments in Chemoprophylaxis*; Thomas Loescher, University of Munich on *Changing Concepts in Emergency Standby Therapy*; and Larry Goodyer, on the *World-wide Malaria Pharmacopeia*.

### Influenza

An entire plenary will be devoted to influenza. We are pleased to have Klaus Stohr, head of WHO pandemic preparedness, speaking on the *Influenza Situation 2005 and Pandemic Potential*; John Oxford from St. Mary's Hospital London, on *How Pandemic Strains Emerge*; and Fred Hayden, University of Virginia on *Antiviral Agents: Use and Availability*.

## Travel Medicine and Telephone Advice

Karl Neumann, MD

To give or not to give travel health advice over the telephone; that is the question that many of us ponder. Should we refuse to speak to callers and so risk the slings and arrows of their displeasure? Or is it nobler to advise them, knowing this can cause us a sea of trouble, to sleep no more or to suffer dreadful dreams if, perchance, outraged travelers claim that the advice has caused them heartaches and all the thousand natural shocks that flesh is heir to?

Shakespeare aside, handling telephone calls about travel health issues - often calls from total strangers - is a dilemma for many of us. This dilemma involves medical, ethical, legal, and financial issues. So, to get opinions on the subject, once again we turned to ISTM Listserv members, a group that is easily reachable - we just post the question on the website. This is a group not shy about stating their opinions. We thank them for their responses to this and previous queries. (This time: 37 responses from 7 countries.)

The question posted: **How do you handle telephone calls for advice?** Here are representative answers.

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"The pressure from patients is clear. In our clinic we have tried to alleviate the issue with clear guidelines. According to our College of Physicians (Canada) - and supported by legal decisions in the past - a consultation on the phone, in a corridor or in an office is still a consultation. Here is our policy:

1- No specific recommendations are made over the phone to a person without a chart. Generalities such as 'yellow fever vaccine is mandatory for entry into that country' and 'updating routine immunization is always recommended' are given over the phone. We encourage callers to visit Health Canada, and other travel medicine web sites.

2- Patients who have a chart – from previous visits to our clinic - can have a telephone consultation if booked in advance, and for a fee. All information regarding the telephone consultation is noted on the chart.

3- For patients calling for additional information after a visit, the chart is always available for the doctor or nurse taking the call, even for simple questions regarding possible minor side effects after a vaccine, for example. Often, patients do not comprehend what was given to them and confuse names. We have had patients convinced that we had given them malaria vaccine."

"We should give enough advice to push the traveler along the path to definitive preparation. We should not give enough detail to make the traveler think that they do not need a consultation with a travel physician. I give basic risk information then ask them if they would like to make an appointment with us or refer them to another travel clinic and/or ask them to check the CDC (USA) travel website."

"When they ask about cost of a visit, I say that protecting your health while traveling in the developing world will cost around 10-15% of the airfare, money well spent!"

"Phone calls for information are a problem. I take each phone call personally and do not give information *unless* they are traveling to a no-risk area. In that case I advise them that no special precautions are necessary. For all others I explain that they will be traveling to an area that presents potential health risks. Then I advise them that

adequate medical preparation for such travel is a complex process that cannot be carried out over the phone, that face-to-face consultation is needed and then refer them to the appointment desk..."

"Travel medicine must get the message out that there is more to a consultation than "giving shots"... Unfortunately, at some travel clinics "giving shots" is the only thing done. Therefore, we must also work on improving the standards of our profession."

"I take all telephone calls myself rather having the caller speak only to our very polite and knowledgeable receptionist. This results in more appointments and fewer no-shows... I am well traveled and have usually been in the area the caller will visit. I can talk briefly about their specific itinerary. This establishes a bond immediately..."

"I do not hesitate to give very simple advice over the telephone. I do tell callers who have no medical issues and are going to a "healthy" destination that they may not need to see a travel medicine physician. Sometimes I tell them to consult their own physicians for minor problems. I am very aware of legal issues but it seems a little far-fetched to be sued for giving very simple advice over the telephone."

"... It is an interesting phenomenon that many strangers feel free to call travel medicine practitioners for telephone advice. I do not think that they expect advice from orthopedists and cardiologists they have never visited..."

"I will give advice over the phone to a colleague, especially someone I know well. For others, I'll give some advice over the phone. Generally, though, I'd say something like: "You've raised some important questions, and the best way to go over this is in the Travel Clinic. Let me put you on hold and our clerk will schedule an appointment."

I do give basic information over the telephone, but I tell them that there are some variables based on medical history that we will discuss at the time of the visit. I find that I establish a relationship with the patients that extend to the visit. Occasionally, callers ... are just shopping price and go elsewhere... but the ones who do come to me know up front the costs and appreciate

my time on the phone. Many callers report the reason they chose our office is the courtesy I extended them on the phone."

... When time allows, it is a good idea to give callers appointments several weeks ahead rather than immediately to give them time to get their medical records from their various health providers, and to finalize their itineraries."

"No advice over the phone. The patients medical history/immunizations/travel itinerary etc. cannot be adequately discussed/evaluated and education provided over the phone."

"Telephone advice is unavoidable but must be given within a carefully developed framework. Here are our clinic's guidelines:

1. No advice is ever offered by the secretarial/support staff, only by the professional staff (physician, nurse practitioner). If the caller is not sure an appointment is needed we suggest they make an appointment - it is rare for a patient to be seen with no issues to discuss.

2. No advice is given to individuals who are not registered patients in the practice. (Our travel clinic is part of a large general practice.) Even a question such as, "Do I need shots for a trip to England?" which appears to be easily answered can be misleading. Much of travel medicine is not concerned with shots. Perhaps the caller is at risk for deep vein thrombosis due a coagulation problem or has COPD.

3. Telephone calls which are follow-ups to a recent appointment ("I forgot to take all my oral typhoid vaccine", "My itinerary has changed", "I just realized I'm allergic to sulfa drugs") may be answered by phone, but often will still require an office visit.

4. Calls relating to illness after travel almost always require an appointment and should not be dealt with by phone.

5. The tough calls are those relating to a repeat trip to the same country ("I'm going back to Haiti for the 3rd time this year and just need more malaria pills; you told me I wouldn't need any more shots.", "You saw me two years ago for my trip to Kenya, now I'm going to India..."). There is a level of expectation that since the traveler has been

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seen once they never have to come back again for an appointment."

"I feel comfortable giving updated information and renewing malaria and diarrhea medications over the telephone for our established patients that saw me within the past year and are going to the same destination."

"As an Emergency Physician my prospective is different. I periodically get called regarding health concerns including "I just returned from .... I think I got..." Because we don't know the patients, the official policy of our department is not to give any advice over the phone....

"As a 'company doctor' I engage in telephonic or email travel health advice almost daily, but exclusively for employees or family members whose medical care I am either involved in, aware of, or can easily access. Several times a year I receive calls or emails from complete strangers, about vaccines, malaria prophylaxis, etc, and respond with a limited answer to any specific question, and advise them to contact one of several public travel health clinics in their area and provide contacts for these."

"Working in a pharmacy, we get a lot of phone questions with the expectation that we will give out information for 'free.' Our approach is not to provide advice on medications that we have not filled and counseled on at our pharmacy and only to provide urgent advice (i.e., patient calls from overseas) to travelers who came to us for a pre-travel consultation."

"Dealing with phone calls has been a major issue in our clinic and I suspect it is in most. Very frequently travelers think that there is a 'list' somewhere of the needed immunizations for a destination. Many call and DEMAND we provide them the information. Some become very angry when we tell them that the answer depends on many factors."

"Our clinic services a military population; finances and liability are lesser issues. My experience is that people who get information over the phone and then come to the clinic have a set opinion about what they should receive. They seem to be invested in the telephonic advice vs. dis-

cussing the full itinerary and risk issues in person.

"I'll give advice over the phone to a colleague or friend, especially if they don't live nearby, and the advice is not too complicated. Others are referred to the CDC web site and told anything more detailed requires a consultation... A bigger problem is more distant colleagues; i.e. I've never met the person but they are a doctor at my hospital and got my name from someone, and are obviously trying to avoid a clinic visit. I try to edge them into the clinic. ... there are medical, legal, and economic sides to the question. From a medical standpoint, 'over the phone' pretty typically means without a full medical history, so mistakes may be made. From a legal standpoint, there's no documentation.

"... you are responsible for ANY problems the traveler encounters not just for the question dealt with on the telephone. It is YOUR responsibility to identify and deal with ALL issues (as in a routine consults) ... I had a patient nearly die from malaria because he misunderstood the advice about malaria prophylaxis given by phone."

"We are a governmental agency and do not give advice over the telephone but will answer fax and email questions. This reduces errors, saves time (people like to talk on the phone), and enables us to document the communication."

*Karl is the editor of NewsShare and Webmaster for the ISTM webpage.*

## The UK Royal College of Nursing (UK) Travel Health Forum

*Boyne L., Bradley A., Chiodini J., Driver C., Grieve A., Jordan A., Skeet J.*

**I**n the United Kingdom, most travel health advice is given in primary care settings by registered nurses. Individual practitioners can potentially be left isolated and remain unaware of advances in travel health practice.

The Royal College of Nursing (RCN) is the largest professional association for UK nurses. The Travel Health Forum is one of 75 forums for different specialist areas of practice supported by the RCN. The RCN structure broadly reflects political – in terms of UK national and regional government – and National Health Service (NHS) structures throughout the UK. It allows members to influence government and health policy at UK national and local levels.

### The Committee

Each RCN Forum has a Steering Committee made up of seven members elected by the Forum's membership. The steering committee elects a Chair who organises and Chairs committee meetings and is often used as an RCN spokesperson for the specialty. The Steering Committee meets four times a year to discuss issues, assess priorities and plan actions accordingly. Regular communication has been made easier with the advent of email. Members of the committee, aim to raise the profile of the group through attendance at conferences both na-

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## ISTM Examination Committee

The Exam Committee has welcomed new members and thanked those who retired. In anticipation of the upcoming exam in Lisbon, the group has been active in disseminating information about the Certificate in Travel Health and the exam within all regions of the world and we again hope that ISTM members and non-members alike will see the value in setting a standard for the practice of travel medicine.

Please see the ISTM web site for further information about the exam and for registration materials for Lisbon. The exam will be given on Sunday, May 1 in the Lisbon conference center where the meeting will be held. We look forward to hosting you at the upcoming exam!

— “The UK Royal College of Nursing (UK) Travel Health Forum,” continued from page 3 —

tional and international, through collaboration with other associated RCN Forums and through posters and newsletters. Members represent the Forum with designated voting places at RCN Congress, the RCN's main annual debating forum. The Chair's main responsibility is to ensure that the constitution is followed. Steering committee members are accountable for their activities. Their responsibilities include:

- To represent their forum's members
- To develop policy on behalf of their nursing specialism and their members
- To provide members with information (through Newsletters and the website)
- To co-ordinate the local professional activity for their forum to provide a benefit for members and to be an attraction to encourage nurses to join the RCN.

The seven members of the steering group work tirelessly in an honorary capacity to achieve these aims. They are nurses with specialist interest and qualifications in travel medicine, working in a broad range of settings, including primary care, occupational health, private and National Health Service travel clinics. They are also involved in nurse education throughout the UK.

A professional adviser acts as a support and resource to the membership, the steering committee and RCN staff. The adviser is responsible for influencing and co-ordinating RCN Policy in relation to the particular area of expertise as well as participating in external policy development, responding to consultation documents, and disseminating policy to members.

### Membership

The RCN Travel Health Forum is available to any RCN member involved with or interested in travel health. The group has an active database of over 5000 members, which possibly makes it the largest group of healthcare professionals in the world involved in travel medicine.

### Benefits

Services provided to members of the Forum include:

Annual conference. This event is well attended by delegates from all over the UK and enables those involved in the specialty to update their knowledge and skills and to

network with colleagues and experts in the field. It is organised by the Committee members and the RCN Events Team and is supported by medical colleagues.

Biannual newsletter. The Newsletter Editor is a member of the Steering Committee and responsible for the compilation and production of the newsletter. The aim is to communicate with forum members, to share experience and best practice and to inform members of RCN policy, activities and services as well as providing current research, evidence and information relevant to those working in the field. The Newsletter is free to forum members as part of their RCN membership. Nurses are eligible to join three forums free of charge.

Dedicated web site. The forum website is available as part of the RCN main website. The newsletter is available in the member's only area as Newsletter Plus. The website is currently being developed and extended to include more news and professional advice than is available in the printed version. The Chair and Newsletter Editor have been involved in a Pilot Scheme enabling them to update the website whenever new information becomes available.

Application for Educational funding. Some help with funding is available to enable members to attend educational conferences or study days. The member is asked to produce information on the purpose and theme of the event and the expected learning outcomes. In return the member is invited to share their findings and experience through the Newsletter.

Application for a Research grant. Members involved in Research in the field of Travel Medicine are eligible to apply for a research grant. A protocol setting out the purpose of the research is required with the application, which must be approved by two members of the Steering Committee. On completion the member is invited to present their findings to the committee and to present their results in the Newsletter.

The RCN Travel Health Forum is keen to link with similar groups around the world. For contact email the Chair, Jane Chiodini: jane.chiodini@which.net or Newsletter editor Sandra Grieve: alex@grieve.co.uk. Forum information at: www.rcn.org.uk/travelhealth

*Sandra Grieve, Newsletter Editor*

## View From Stone Mountain

*Brenda Bagwell*

**H**appy New Year! I hope that 2005 has gotten off to a great start for everyone and that this year will be your very best year ever!

Speaking of 2005 – have you paid your membership fees? If not, please get the dues into the office as quickly as possible or your member benefits will be suspended until payment is received. This includes the Journal, the posting of your clinic, Listserv privileges, and NewsShare, and other benefits. If you wish, you can always pay your membership fees via the Member Services section of the web site. Please be sure to contact me (istm@istm.org) if you have lost your username and/or password.

Have you made your Lisbon reservations yet? It is hard to believe that CISTM9 is just around the corner. If you have not registered, please do so now so that you will not miss out on this exciting meeting and the beautiful city of Lisbon. Also, if you have not done so already, why not consider taking the ISTM Certificate of Knowledge Exam. Please note that registration closes in April.

Thank you if you are one of the members who has submitted their votes for Executive Board members. If you have not mailed your ballot, please do so as quickly as possible. Keep in mind that they must be received by March 21, 2005. I am still hoping for 50% of the membership to take the time to fill out and mail the ballot! Results will be announced at the Membership Assembly in Lisbon.

By the time you read this you should have received your payment receipt and 2005 ISTM membership card (if, of course, your dues have been paid) as well as other materials you ordered with your renewal. If you have not, please be sure to let me know.

I look forward to seeing those of you who will be in Lisbon – do be sure to drop by the ISTM booth and at least say “hi” or if you prefer pull up a chair and visit for a while!

Until then, remember to slow down and take the time to really see. Take a moment to see what is going on around you right now, right where you are. You may be missing something wonderful! See you in Lisbon.

## Profile on an ISTM Member: Compassion and Medicine

**T**ravel medicine attracts interesting people. Or, perhaps, involvement in travel medicine makes people more interesting. Whichever, many of our members have fascinating aspects to their lives and careers, aspects which are intertwined yet separate to the actual practice of our specialty?

NewsShare is starting a new feature: profiling a member who fits this description. Please send a few paragraphs of an ISTM member, (it can be yourself), to be included in future issues.

“David R. Shlim, M.D., a long-time member of the ISTM, and the former medical director of the CIWEC Clinic Travel Medicine Center in Kathmandu, Nepal, has produced a book that grew out of his experience in running the world’s busiest destination travel medicine clinic. No, it’s not another book about travel-related diseases. The book, entitled *Medicine and Compassion: A Tibetan Lama’s Guidance for Caregivers*, is the result David offering free medical care at a Tibetan monastery while working at the CIWEC Clinic. The advice that he received from the Tibetan teachers at the monastery had a positive impact on his ability to offer compassionate medical care to travelers. Eventually, David got the idea to present two conferences on medicine and compassion featuring the head of the monastery, Chokyi Nyima Rinpoche. *Medicine and Compassion* represents the teachings that were given at the two conferences. The book presents a broad view of the advantages of cultivating a compassionate attitude towards patients, and how one can train individually to expand and strengthen one’s own compassion and patience.

For further information, please contact David at drshlim@wyoming.com

## Travel Medicine in Southern Africa

Steve Toovey, Regional Editor

**F**ollowing the successful Africa European Conference on Travel Medicine in Cape Town in February 2004, interest in travel medicine has continued to grow in southern Africa.

The University of Pretoria has incorporated travel medicine into its undergraduate medical curriculum, while the University of the Witwatersrand (Johannesburg) will host a course leading to a certificate in travel medicine. This course involves two weekends of attendance and studying at home. The Johannesburg course attracts both physicians and nurses.

Additionally, the distance learning course offered by the Academic Centre for Travel Medicine and Vaccines at the Royal Free Hospital Medical School in London, United Kingdom, has attracted students from southern Africa. This course ultimately leads to either a diploma or an MSc, and enrolls both doctors, nurses, and other health professionals.

As a mark of the interest shown by South African primary care and family physicians, the South African Medical Journal (SAMJ) has dedicated an entire special edition of its CME to travel medicine. The SAMJ has agreed to make these articles available free of charge to ISTM members. Articles cover malaria and rabies in primary care, travel related DVT, travellers’ diarrhoea, the pregnant traveller, travel related dermatoses, fever in the returned traveller, and the immunocompromised traveller. Members wishing to receive copies may e-mail Steve Toovey, guest editor of the journal, directly at toovey@travelclinic.co.za .

A further mark of the growing interest by southern African primary care practitioners in travel medicine is the publishing of an extensive series on the subject by South African Family Practice, a peer reviewed journal. Pharmacists are also interested. Journals of community pharmacy are publishing articles on the subject.

In less than ten years travel medicine has grown from a service offered by just two clinics, to a discipline practiced by nurses, pharmacists, and doctors. There are now more than 130 yellow fever vaccination centres in the country.

## 4<sup>th</sup> New Zealand Travel and Geographical Medicine Conference

The 4<sup>th</sup> New Zealand Travel and Geographical Medicine Conference was held in Auckland, New Zealand from 19<sup>th</sup> to the 21<sup>st</sup> of November, 2004. This meeting continued the high academic and professional standards of the previous biennial meetings, in that the speakers who presented were highly regarded locally in their respective fields of travel, geographical, military medicine, and public health.

Over the course of three days the meeting presented a programme that investigated the upsurge in global disease surveillance, safety and security issues for travellers, standards of safety in yellow fever vaccination centres, emerging and re-emerging infectious diseases, and military and adventure medicine.

Invited speakers to the meeting, organised by Associate Professor Shaw of the Worldwise Travellers Health Centres of New Zealand, were Dr Graham Fry (Dublin, Ireland), Professor Peter Leggat (Townsville, Australia), and Dr Bruce Adlam (Singapore). There were 20 presenters from New Zealand and they spoke to an audience of around 50 participants.

The meeting was deemed a popular success, and although funding and support from pharmaceutical companies has all but dried up, there is considerable goodwill amongst the local travel health community to continue these meetings, the only such national travel health meetings in Australasia and the South Pacific Region.

Marc Shaw, FRNZCGP, FFTM, FACTM, DipTravMed

# Calendar: Travel Medicine Conferences, Courses, Educational Travel

## Conferences

Feb  
21-25

**11th Swiss International Short Course on Travelers' Health.** Basel, Switzerland. February 21-25, 2005. Organized by the Swiss Tropical Institute. Comprehensive training in all aspects of travel medicine. Course intended for medical doctors, senior nursing staff and other health professionals, and also for travel industry personnel with a strong interest in travel medicine. Participants limited to 50. Language: English. Course Secretariat: Socinstrasse 57, P.O. Box CH - 4002 Basel, Switzerland. Tel: +41 61 284 82 80. Fax: +41 61 284 81 06. Website: [www.sti.ch](http://www.sti.ch).

March  
14-19

**Travel & Tropical Medicine Course (HCTTM).** Havana, Cuba. March 14-March 19, 2005. Organizer: Instituto de Medicina Tropical "Pedro Kouri" (IPK), in collaboration with Medical Services for the Tropics (MST), Maastricht, Netherlands. "Refresher course" for physicians, nurses, pharmacists and other health scientists. Special education curriculum (at reduced fee) for students interested in tropical medicine. Lectures by leading specialists (Cuban and others) and visits to hospitals, research laboratories, and community health centers. Lab training (on request) in bacteriology and parasitology. Official language: English. Medical education credits (20 hours) from Dutch accreditation authorities. Course Coordinator: Peter de Beer, MD, PO Box 1660, 6201 BR Maastricht, Netherlands. Email: [mstropics@planet.nl](mailto:mstropics@planet.nl); website: [www.tropenkliniek.nl](http://www.tropenkliniek.nl) and Dr Nereyda Cantelar of IPK.

March  
18-19

**The Westchester Course: Travel Health Care Training.** Hawthorne, NY (Near New York City). March 18-19, 2005. Unique learning experience for nurses, nurse practitioners, and physician's assistants. Prepares participants to deliver quality care and prepare for the ISTM Certificate of Knowledge examination. Course Director: Gail Rosselot, NP, MPH COHN-

S. Email: [garosselot@AOL.com](mailto:garosselot@AOL.com) Tel: 914-923-7073.

April  
21-22

**Manitoba 4th Annual Travel Health Conference.** April 21 & 22, 2005. Winnipeg, Canada. Forum for health professionals to exchange travel medicine information. Speakers are national and international experts including three members of the National Committee to Advise on Tropical Medicine and Travel. Information: Jill Evison, WRHA, 490 Hargrave Street, Winnipeg, Manitoba R3A 0X7. Telephone: 204-940-2081. Email: [jevison@wrha.mb.ca](mailto:jevison@wrha.mb.ca).

May  
1-5

**9th Conference of the International Society of Travel Medicine (CISTM).** Lisbon. May 1-5, 2005. Biennial meeting of the International Society of Travel Medicine brings together international experts for the largest and most important conference in travel and migration medicine. Intended for health care professionals, the travel media and travel industry, and manufactures of travel health-related products. Contact: Frank von Sonnenburg, Section on International Health, Georgenstrasse 5, D-80799 Munich, Germany. Tel: +49 89 2180 3830. Fax: + 49 89 33 60 38. Email: [istm\\_europe@csl.com](mailto:istm_europe@csl.com). Website: [www.istm.org](http://www.istm.org).

May  
8-13

**8th International Symposium on Maritime Health.** Rijeka, Croatia. May 8-13, 2005 (Biennial). Organized by International Maritime Health Association and local organizers, with support from WHO, IMO, ILO and ITF. For health professionals, educators, and legislators. Faculty of international experts. Conference held aboard cruise ship originating in Venice, sailing along Adriatic coast, and visiting the cities of Rijeka and Dubrovnik. Official language: English. Contact: 8th ISMH Secretariat, RI-AK, Verdieva 6, 51000 Rijeka, Croatia. Tel: +385 51 312-312; Fax: +385 51 312-333; e-mail: [secr-ismh8@ri-ak-tours.hr](mailto:secr-ismh8@ri-ak-tours.hr); web address: [www.ismh8.com](http://www.ismh8.com).

Nov.  
10-11

**1st International Conference of the Journal of Travel Medicine and Infectious Disease.** London, U.K. 10-11 November 2005. Organized by Elsevier Publishing in association with Travel Medicine and Infectious Disease Journal. Conference will bring together leading experts for a comprehensive and topical programme focusing on the latest research and policy in travel medicine and infectious disease. **Website:** [www.travelmedicine.elsevier.com](http://www.travelmedicine.elsevier.com) **Secretariat:** Sophie Peters, Conference Secretariat, Elsevier, The Boulevard, Langford Lane, Kidlington, Oxford OX5 1GB, UK Tel: +44 (0) 1865 843643 Fax: +44 (0) 1865 843958 Email: [s.peters@elsevier.com](mailto:s.peters@elsevier.com)

Dec.  
11-15

**54th Annual Meeting of the American Society of Tropical Medicine and Hygiene.** Washington, DC. December 11-15, 2005. Details about registration and abstract submission will be posted in early 2005. Contact: ASTMH, 60 Revere Drive, Suite 500 Northbrook, Illinois 60062. Tel: (847) 480-9592; Fax: (847) 480-9282. E-mail: [astmh@astmh.org](mailto:astmh@astmh.org). Web site: [www.astmh.org](http://www.astmh.org)

## 2006

June  
7-10

**North European Conference on Travel Medicine.** Edinburgh. June 7-10 2006. A collaborative conference organised by the International Society of Travel Medicine and the travel medicine societies and organisations of Northern Europe. Website: [www.nectm.com](http://www.nectm.com). Information: In Conference Ltd., 10B Broughton Lane, Edinburgh EH1 3LY, Scotland, UK. Tel: +44 131 556

9245. Fax: +44 131 556 9638. E-mail: N E C T M @ i n - conference.org.uk.

Feb. 22  
May 18

## Courses/ Educational

### Travel

**Training in Tropical Medicine and Traveler's Health.** Bethesda, Maryland, USA. February 22-May 18, 2005. Course includes 300 hours of teaching, covers all aspects of tropical diseases, and fulfills didactic requirements to sit for the qualifying examination of the American Society of Tropical Medicine and Hygiene. Includes comprehensive written and oral examinations to help prepare students for the exam. Information: Lisa Keep, MD, MPH, LTC, USA, Room A1037, Dept. of Preventive Medicine, Uniformed Services University, 4301 Jones Bridge Road, Bethesda, MD 20814-4799. (301) 295-3734. lkeep@usuhs.mil

Feb.  
13-25

**Tropical Medicine Expeditions to East Africa:** 12th Kenya Expedition scheduled for February 13-25, 2005, and 10th Uganda Expedition scheduled for March 13-25, 2005. In collaboration with Kay Schaefer, MD, PhD, MSc, DTM&H, of Cologne, Germany and the Universities of Nairobi, Kenya, and Makerere, Uganda. Two-week expeditions designed for a limited number of health care professionals (doctors, public health experts, scientists, pharmacists, nurses). Participants visit hospitals and health projects in urban and rural areas. Includes individual bedside teaching, laboratory work, and lectures in epidemiology, diagnosis, treatment, and prevention and control of important tropical infectious diseases. Also update on travel medicine and visit to the "Flying Doctors". 50 contact hours. Official language: English. Medical

education credits applied from German accrediting authorities. Contact: Dr. Kay Schaefer, Tel/Fax: +49-221-340 49 05. E-mail: contact@tropmedex.com. Web address: www.tropmedex.com.

See  
listing

**World Wide Learning: Two-week Courses in Clinical Tropical Medicine:** Moshi, Tanzania, March and October 2005. Manaus, Brazil, May and November 2005.

Kolkata, India, April and November, 2005. Also, Tropical Dermato-Venereology and Leprosy, Moshi, Tanzania, November, 2005. Organized by the Institute of Tropical Medicine, Berlin. Hospital- and community-based courses include participation in outpatient clinics and ward-rounds in medical, paediatric, ophthalmological, dermatovenereological and gynaecological departments; laboratory practice; tutorials, lectures, community project visits. Knowledge of spoken English required. Written examination with certificate in Clinical Tropical Medicine for successful candidates. German CME credits and recognition awards available. Information: Dr. Ute Schwarz, Institute of Tropical Medicine, Spandauer Damm 130, 14050 Berlin, +49 30 30116 794 / +49 30 85074 630. Email: ute.schwarz@charite.de

Aug.  
15-26

**The Gorgas Advanced Course.** Lima,

Peru. August 15-26, 2005. 2 weeks of bedside clinical experience on 36-bed tropical disease unit. Sponsor: Gorgas Memorial Institute. Site: Tropical Medicine Institute (IMT), Universidad Peruana Cayetano Heredia. Course provides experienced clinicians hands-on exposure to large numbers of patients in a short period of time. Educational Format (in English): 1) Monday-Friday of 2 consecutive weeks; 2) 5 participants & 1 senior sub-specialty trained faculty per clinical group; 3) 3 hours/day seeing inpatients and 3 hours/day seeing outpatients; 4) Case conferences/CPC every day; 5) Parasitology laboratory review session; 6) One formal lecture/day; 7) Weekend excursion: Verruga Bridge, inter-Andean valleys endemic for bartonella and leishmania; ascent to 4,800m. Peru has an unusually wide spectrum of tropical diseases (full listing on the website). IMT is major tropical disease referral center. 80 CME hours. Course Directors: Dr. Eduardo Gotuzzo (IMT) <egh@upch.edu.pe>, Dr. David O. Freedman, (Gorgas/UAB). World Wide Web: <http://www.gorgas.org> Click on GORGAS ADVANCED COURSE. Telephone: +1 205 934 1630 Fax: 205 934 5600 E-mail: info@gorgas.org

## Journal of Travel Medicine on

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The Journal of Travel Medicine can now be accessed on Medscape. To view the support pages you may go to the Medscape Publication List (<http://www.medscape.com/pages/public/publications>), click on the journal title under Medical Journals and navigate through the pages. You may go directly to the Journal of Travel Medicine pages at the following URLs:

**About the Publication:** [www.medscape.com/viewpublication/1148](http://www.medscape.com/viewpublication/1148)

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**First Article:** [www.medscape.com/viewarticle/491698](http://www.medscape.com/viewarticle/491698)

**Note:** articles are posted from a single issue over a 2-4 week period depending on the number of articles. This keeps the content fresh on the site.

# NewsShare

the Quarterly Newsletter of the International Society of Travel Medicine

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