President's message

I hope you enjoyed the conference in Washington, DC, and feel invigorated by the program and by the social connections with friends and colleagues. The Scientific Program Committee, under the leadership of Blaise Genton, addressed timely topics like Climate Change: Ready to Change? and a new format like Where's the Evidence? — a brainchild of Leo Visser. The Scientific Program Chairs for CISTM17 have already started formulating ideas for our next conference to be held in May 2021 in Kuala Lumpur, Malaysia.

The ISTM respects that there are some who are concerned about holding CISTM17 in Kuala Lumpur, Malaysia. This venue was decided on for reasons that represent our commitment to hold more activities in emerging regions to reflect the changing patterns in travel and tourism. Kuala Lumpur also has the capacity to meet the needs of a congress of our size in the region. Most significantly, our congresses offer an opportunity to be an example of the importance of collaboration between global citizens during complex times. We trust that our members and hosts will appreciate our hopes for inclusivity, harmony and respect.

The Journal of Travel Medicine (JTM) has made exciting strides under Editor-in-Chief Annelies Wilder-Smith, supported by many ISTM leaders who serve on the editorial board and previous Editors-in-Chief who laid the groundwork. Its impact factor has steadily risen and it has a fresh new face! JTM has attracted influential authors and published innovative content; it continues to improve. I encourage our membership to check out JTM’s rich materials and to publish their high-quality papers in JTM. The strong efforts to make JTM a premier journal in travel medicine are showing.

I would also like to highlight my presidential charge “Building Communities, Not Walls” to 1) adopt Sustainable Development Goals SDGs that are most relevant to tourism and travel; 2) nurture emerging economies in assessing their resources and needs and develop travel medicine to suit their framework; 3) continue to integrate migration health into travel medicine; and 4) promote the growth of infrastructure to meet today’s ISTM needs. In addition to recently-formed Task Forces on South America and Migration Health, we plan to appoint a Task Force to adopt SDGs into ISTM activities. We are now assessing the way forward for a new website. ISTM has grown and established new programs, such as the ISTM Foundation and new interest groups that require better integration into our website, and our technology infrastructure must evolve with the Society’s growth.

The Digital Communications Committee has surveyed and interviewed the ISTM membership. Under the leadership of Sarah McGuinness, these results will guide our plans for a modern website that is well-integrated, is easily navigated, and provides seamless links to JTM, Global Travel Clinic Directory, GeoSentinel, Membership Directory, ISTM Foundation, education portal, the listserv, and other vital functions. We have initiated steps towards refreshing our website.

Lin Chen, ISTM President
SECRETARY-TREASURER’S REPORT

Over the 17 months between January 2018 and taking over the Secretary-Treasurer role on 8 June 2019, I have been deeply grateful to Prof Peter Leggatt, our outgoing Secretary-Treasurer and Diane Nickolson for their tolerant and wise mentoring whilst I have shadowed Peter who now continues on the Executive Board as President-Elect.

There is good news and not so good news on the finances of ISTM. Membership has risen to the highest level in the history of the society, reflecting the huge esteem attached to ISTM's professional educational offerings and performance, and our investments have performed a little better than we expected. Membership fees are a vital source of income for the society but only meet a minor proportion of the costs of running the society over a 2 year cycle. The Society depends for its financial good health on other sources of income, notably the biannual conference, the CTH® examination which attracted a near record number of applicants in June and the North American Travel Medicine Review and Update Course, which was held in Atlanta in April. Notable items of expenditure include our contribution to GeoSentinel in partnership with CDC and supporting the Journal of Travel Medicine, which has taken great strides forward under the Editorship of Eric Caumes and Annelies Wilder-Smith.

Since 2017 two conferences have adversely affected our revenue and reserves. In 2017 value added tax (VAT) was applied at 21% to the organization of the Barcelona CISTM and converted an expected net revenue into a loss. Secondly, holding the Rome International Conference on Migrant Health in October 2018 carried considerable risk. This was the first such conference on this topic, the topic was timely for Europe, and the program was brilliant but attendance was disappointing. ISTM was the only risk bearing partner in its organization and sustained an overall loss of about $300,000, offset by about $30,000 from a generous ISTM Foundation grant.

ISTM reserves have fallen as a result. Whilst $2 million may appear a substantial reserve it is relatively small set against our annual expenditure and proportionately much smaller than reserves held by similar organizations. A deficit budget cannot be sustained for very long and we now aim to achieve a balanced budget and live within our means.

The Executive Board have agonized for hours over difficult budget decisions and have now set an interim budget through to end October while we continue to review ISTM expenditures. The tension is to balance the budget whilst avoiding harming the functioning of the society.

When I was interviewed for the Secretary-Treasurer post I was asked why I was applying. I replied that it was because I liked and respected all those who were involved. That remains true. This is a great society with wonderful leadership and I look forward to the next 2 years under our President, Prof Lin Chen. We face challenges but I am confident we will gain in financial strength as we continue to grow and develop.

Michael Jones,
Secretary-Treasurer
CISTM16 in Washington had more than 1,300 delegates from around 70 countries in attendance. Three hundred and sixty-six individuals sat for the CTH® Exam on first day of the conference. Aside from the United States of America, the top 10 countries represented at CISTM16 were: Australia, Belgium, Canada, France, Japan, South Africa, Sweden, Switzerland, The Netherlands, and United Kingdom.

The opening plenary session, Climate Change: Ready to Change? was a thought-provoking discussion that explored climatic migrants, the impact of climate change on mosquitoes, and how travel choice and responsible travel practices makes a difference. This plenary helped set the theme for CISTM16: Travel Medicine in a Changing Climate. Other plenary themes included Antimicrobial Resistance, mHealth and Digital Health in Travel Medicine, and Arboviral Diseases.

Select CISTM16 slide presentations have been approved for release by speakers and are available online free to ISTM members. These are conveniently organized by day, program, topic and speaker name; conference presentations will continue to be posted as they become available. You may view CISTM16 presentations here. We hope you find this tool useful to implement topics covered in Washington and to make the most of your experience. You can also find pictures from the CISTM here.

New to CISTM16 were several session types and activities:

- **Delegate Selected Oral and Poster Awards** – Delegates had the ability to interactively vote for their favorite poster using the CISTM16 app.

- **Photography Display and Silent Auction** – Ten compelling photographs by Vlad Sokhin (www.vladsokhin.com) reflecting the conference theme were on display at the expo and were available for purchase through a Silent Auction.

- **Poster Pitches** Winning poster presenters were invited to participate in the Poster Pitch session and received complimentary full registration to CISTM17 in 2021.

- **Quiz Show Session** – The moderator gave the audience answers and asked attendees to supply travel-medicine-specific questions in this popular gameshow-style session.

- **Clean Travel Award** – In support of our conference theme, the person(s) who travelled the longest distance to Washington via a low-carbon-footprint method were awarded a USD 50 Visa gift card. There were two winners of the Clean Travel Award: V.S. Srikanth who travelled 400 km by train, 38 km by bus in India, and metro bus and Faye Huang who travelled 707 km by train, metro and foot-utilizing no plane transportation.

- **Student Case Competition** – The CISTM16 Local Organizing Committee implemented a Student and Trainee Case Competition for CISTM16. Top submissions were invited to present their cases to a panel of judges and the 3 winners presented their cases at CISTM16 and received 2-year ISTM Memberships. Winners were: Ludovico Cobuccio (Switzerland), Heidi Fernandes (Canada), and Eduardo Alfonso Hernández Muñoz (Mexico).

- **Where’s the Evidence** – This session featured invited speakers to present scientific evidence countering commonly held belief(s) and/or practice(s) in travel medicine.

In keeping with the CISTM Climate Change theme, a number of new eco-friendly initiatives were introduced during this CISTM, including:

- A paperless conference, no program materials were distributed. All delegates received a reuseable, stainless steel cup for their use onsite for drinks.

- Delegate badges printed on recycled paper with bamboo lanyards; plastic covers and ribbons were omitted.

- Onsite paper signage was replaced by canvas, cloth or recycled clings.

- Poster presenters were asked to bring their posters printed on cloth.

- Recycling bins and water stations were located throughout the venue.

- Friday, 7 June was designated as Vegetarian Day, where only vegetarian food was served.

On behalf of the ISTM, many thanks to the CISTM16 Scientific Program Committee, the Local Organizing Committee, ISTM Officers and Executive Board, and the Secretariat Team for developing planning and executing such a rich and invigorating conference program.

The 17th Conference of the ISTM will be the first CISTM to be held in Asia! Please mark your calendars for 19-23 May 2021 in Kuala Lumpur, Malaysia. We look forward to seeing you there – you won’t want to miss it!

Diane Nickolson, ISTM Executive Director

“The 17th Conference of the ISTM will be the first CISTM to be held in Asia! Please mark your calendars for 19-23 May 2021 in Kuala Lumpur, Malaysia.”
The Annual GeoSentinel Site Directors Meeting took place on 3-5 June, in Leesburg, Virginia, United States of America, ahead of CISTM16. Marty Cetron (CDC) discussed the original plan and history of the formation of GeoSentinel and, in collaboration with Leo Visser (ISTM Past President), future plans for restructuring of the cooperative agreement between the CDC Division of Global Migration and ISTM were presented and discussed.

Much of the rest of the Annual Site Directors’ meeting focused on a review of active projects of each of the Working Groups (described in greater detail below), data quality control issues, and future strategic directions for the GeoSentinel Surveillance Network.

We would like to welcome Dr. Farzana Badrun as the new Medical Data Analyst. She will be working on a half-time basis helping with data management and quality control for GeoSentinel.

GeoSentinel has four Working Groups:

- **The Enhanced Clinical Surveillance Working Group (ECLIPSE)** is overseeing several network projects currently. The chikungunya, dengue, Zika study CHIDEZIMA continues to recruit cases and now has 217 participants who are enrolled in long-term follow up. SEVTRAV (study of severe illness of unknown cause in returned travelers), SMART (Severe MAlaria in Travelers & Migrants) and NEURAL (NEUrocognitive outcomes in travelers with mAlaria) study protocols are all currently in development.

- **The Data Collection Working Group continues to focus on data quality.** A new data entry form has been successfully introduced, allowing the collection of health information on both migrants and travelers.

- **The Special Populations Working Group** has several projects underway, including a near-final prospective study of travelers returned from mass gatherings, a prospective evaluation of the effect of migration on patterns of disease, and a prospective analysis of planned and unplanned medical care during travel. A new prospective project on respiratory tract infections in older tourist travelers, in relation to vaccination status, has just begun. Several prospective projects in migrants have also been planned including those on Chagas disease, schistosomiasis, strongyloidiasis, and focused studies on student travelers and VFR travelers.

- **The Tracking and Communications Working Group** reviews and responds to the daily entry of data by GeoSentinel sites. In the second quarter of 2019, there were 16 alarming diagnoses reported including rabies, East African trypanosomiasis, travel-related measles, and a yellow fever vaccine adverse event (YEL-AND). Two alerts, Q fever ex Canaries, Spain and Dengue ex Tanzania, were sent to GeoSentinel sites and affiliates, as well as TropNet members, and partner agencies. In the coming year, Alarming Diagnosis guidance criteria are to be developed and a retrospective review of past Alarming Diagnoses will take place. The group will be assisting the ISTM Digital Communications Committee in their website redesign project.

### GeoSentinel Committees

The Data Use Committee has been renamed the External Collaborations Committee. The committee will be reviewing the impact of data privacy legislation on data sharing both within GeoSentinel and with any potential external collaborators. A process is to be developed for assessing and approving future external requests.

**Publications Committee**
Chair, Andrea Boggild (TOR)
Since the last newsletter, the Publications Committee continues to review proposals and optimize processes. In advance of the 2019 Site Directors Meeting, the Publications Committee recruited 8 new members. We welcome the participation and engagement of new members Sapha Bakarti, Emmanuel Botteau, Clara Crespillo, Marta Diaz Menendez, Gilles Eperon, Federico Gobbi, Abraham Goorhuis, and Paul Kelly, and look forward to ongoing contributions by Stefan Hagmann, Martin Grobusch, and Kristina Angelo. Recent publications in peer-reviewed scientific journals are listed at the end of this article.
GeoSentinel Subnetworks

CanTravNet (CTN)
Since the last newsletter, CanTravNet continues to support the Office of Border and Travel Health of the Public Health Agency of Canada in its surveillance mandate. Our 2018-19 contract will be up for renewal in Q3, which we are in the process of renegotiating. We provided an update to the CISTM16 attendees in Washington, DC, and continue to build our affiliate network. We aim to present abstracts summarizing CanTravNet data at the American Society of Tropical Medicine and Hygiene (ASTMH) meeting in National Harbour, MD, USA, this coming November, and to finalize manuscripts arising from recently presented works on cutaneous larva migrans, enteric fever, Canadian pediatric travelers, and malaria.

EuroTravNet

EuroTravNet is currently conducting two analyses. The first one is led by the Liverpool team and describes the pattern of travel-associated diseases in Europeans over the last 20 years. Results of the latter were presented at the CISTM in June.

At CISTM16, four oral abstracts including a latebreaker were presented [1-4]. An open GeoSentinel session was well attended.

The GeoSentinel Network is always interested in having new ISTM members join them as Affiliate Members. If you are interested in lending your expertise and/or submitting interesting cases, please email the GeoSentinel project coordinator at: geosentinel@ISTM.org

Recent GeoSentinel Publications:


As I write this where I live in Ontario, Canada we are currently experiencing temperatures of 33-35 degrees Celsius after a very long, wet, cold spring and I can’t help but think of our changing climate and its impact on our environment. I want to take this opportunity to thank the Scientific Program Committee for tackling the theme “Travel Medicine in a Changing Climate” last month at CISTM16 in Washington, DC.

One of the highlights of the conference for me was to see the engagement and participation of nurses as well as other professionals in events presented by the Nursing Professional Group (NPG.) Our two workshops – “Destination South East Asia” and “The Imperfect Travel Health Consultation” were well attended.

At the Nurse’s Reception, Sue Ann McDevitt from the United States of America was presented the Distinguished Nurse Award and Jutarmas Olanwijitwong from Thailand was presented The Emerging Nurse Award. Over 80 nurses attended the dinner hosted by the NPG Steering Committee at a local Washington restaurant. Very special thanks to Valneva for their generous support of this event. The reception gave us the ability as a professional group to network, share opportunities within NPG and ISTM, and encourage attendees to join interest groups. We also presented our very first game of Travel Medicine Kahoot!

Moving forward, this year we are planning to collaborate on research and educational projects with the Pharmacists Professional Group (PPG) and the special interest groups, as well as start to prepare for CISTM17 in Kuala Lumpur, Malaysia in 2021. I hope to see many of you there!

A really big thanks to our fantastic Steering Council for all their hard work!!

Heather Connor,
Nursing Professional Group Chair

The Pharmacists Professional Group (PPG) has a membership of over 400 pharmacists with a special interest in travel health. At the recent ISTM Conference in Washington, DC the new chairman, Derek Evans (United Kingdom) took charge and outlined his strategy to the PPG Council members.

The PPG is recognized by the ISTM as the fastest growing membership group within the organization and the Chair wishes to sustain the membership growth with the development and addition of current projects with an integration to working directly with some of the other Special Interest Groups.

Current projects include maintenance of the Drugs Across Borders database which now has open access and reporting from 130 countries of the individual restrictions on travelling with personal medicines. In addition, other Council members are underway with projects that include an evaluation of travel health apps and developing a pipeline for pharmacy students to become involved with travel health earlier in their careers.

The Chair has introduced some new projects, one of which is working with the International Pharmacy Federation (FIP) to design minimum standards for pharmacists wishing to practice travel health using the expertise of the PPG for education and good practices. Other projects include the development of post-CTH® education to support Continuing Professional Development and the writing of specific research articles on the pharmacology of ayahuasca preparations, and the pharmacodynamics and pharmacokinetics of drugs used in travel medicine in older travelers.

Following a successful pre-conference training session and a symposium on Pharmacist Provided Care in the Older Traveler given by members of the PPG, there are several developing opportunities for members to join Council members in delivery of a project. Any PPG members who would be interested in supporting any of the projects above please contact the Chair of the PPG, Derek Evans, through the ISTM website or directly by email at d.p.evans@btinternet.com.

Derek Evans,
Pharmacist Professional Group Chair
RESEARCH COMMITTEE

This year, the ISTM Research Committee awarded the following proposals:

1. Measuring neutralizing antibodies against yellow fever virus ten years after standard (0.5 mL) yellow fever vaccination in elderly population (> 60 years at time of vaccination), Anna Roukens, The Netherlands, Principal Investigator.

2. Prospective evaluation of neurocognitive outcome in travelers and migrants presenting with malaria to GeoSentinel Sites, Kevin Kain, Canada, Principal Investigator.

3. Concomitant administration of yellow fever vaccine with measles, mumps, rubella vaccine in healthy adults – a multi-center prospective observational study, Silja Bühler, Germany, Principal Investigator.

The Research Committee is constantly renewing, and ISTM members of good standing interested in joining are encouraged to express their interest by contacting Professor Martin Grobusch (m.p.grobusch@amsterdamumc.nl), Professor Mary Wilson (mewilson@hsph.harvard.edu) or Jodi Metzgar (jmetzgar@ISTM.org).

Martin Grobusch,
Research and Awards Committee Chair

Mary Wilson,
Research and Awards Committee Co-Chair

“The Research Committee is constantly renewing, and ISTM members of good standing interested in joining are encouraged to express their interest.”

ISTM PUBLICATIONS COMMITTEE

The first face-to-face meeting of the new ISTM Publications Committee was held in June at the CISTM16 congress in Washington, DC.

It was a privilege to succeed Prof. Joe Torresi as Chair of this committee. I know from my term on the ISTM Executive Board that Joe was very effective in this role and as a result I have been fortunate to inherit a very competent and energetic team. I should like to pay tribute to my good friend, Prof. Hans Dieter Nothdurft, who has recently retired as Website Editor. We thank Hans for his loyal service to the Society over many years and congratulate him on being awarded fellowship of the ISTM at the congress. Congratulations also to fellow committee members Vanessa Field, Sandra Grieve, Joe Torresi and Rudy Zimmer on being part of the Fellows Class of 2019.

As I settle into my new role, the Publications Committee will continue to exercise an important oversight function according to its published charter which is available to view on the ISTM website. One of the primary functions of the committee is to monitor the content of ISTM publications, including Journal of Travel Medicine, the listserv and Travel Medicine News. I salute Joe Torresi for his contribution as Chair of the Publications Committee and I look forward to working closely with the current committee in the years ahead.

Gerard Flaherty,
Publications Committee Chair
NEW ISTM INTEREST GROUP: EXPEDITION AND WILDERNESS MEDICINE

The world is becoming more globally mobile with increasing numbers of travelers participating in expedition, wilderness and extreme activities and events nationally and internationally. To address these special travelers, the ISTM has established a new Interest Group on Expedition and Wilderness Medicine. The Group’s Founders are listed below.

Initial outreach has resulted in more than 70 members, and we have high expectations for this new Group. For more information about this group including preliminary objectives, please visit the ISTM website (www.ISTM.org/expeditionandwilderness).

Founding Organizers for this group are:
Budda Basnyat, Nepal
Blaise Genton, Switzerland
Travis Heggie, United States of America
Kevin Kain, Canada
Peter Leggat, Australia
Marc Shaw, New Zealand
Christopher Van Tilburg, United States of America
Jenny Visser, New Zealand

Note that membership in ISTM Interest and Professional Groups are at no additional cost to ISTM Members. You can easily join this group (as well as others) when you log into your ISTM account. As always if you need assistance or have questions, don’t hesitate to contact the ISTM Secretariat (ISTM@ISTM.org)
Military Travel

Established 1991
International Society of Travel Medicine
Promoting healthy travel worldwide

Military Pre-Course Speakers: (left to right, back row) John Sanders (United States of America), Anne McCarthy (Canada), Martin Haditsch (Austria), Gary Wynn (United States of America), Eric Garges (United States of America), Christophe Rapp (France), and Olivier Aoun (France); (left to right, front row) Lucy Lamb (United Kingdom), and Mark Riddle (United States of America).

Military Symposium Speakers: (left to right, back row) Lucy Lamb (United Kingdom), David Benedek (United States of America), Christophe Rapp (France), Mark Riddle (United States of America); (left to right, front row) Olivier Aoun (France), and Peter Leggat (Australia).

During CISTM16 in Washington, DC, the Military Travel Interest Group held a four-hour Pre-Course with 10 speakers from Austria, Belgium, Canada, France, United Kingdom, and the United States of America (refer to pictures 1-2). Topics ranged from dermatology and infectious disease to military readiness and psychiatry. Highlights included Ebola, sexually transmitted infections STIs, tick-borne encephalitis TBE, leishmaniasis and smallpox. As part of the main conference, a symposium on military deployment-related health issues was held 7 June, with speakers from France, the United Kingdom, and the United States of America (refer to picture 3). Topics included diarrhea prevention, an on-site approach to fever, skin and soft tissue infections SSTI, and management of psychiatric events during combat and non-combat deployments. Our sincere thanks to the 30 and 50 individuals who respectively attended these sessions.

On 7 June, we held our first general meeting. Key points were:

- the group is open to all healthcare personnel interested in or treating the military,
- the 5 council members should be actively involved and available,
- representation of all nations is to be prioritized by directly reaching out through known contacts, and
- a Malaysian military member (to be determined) will be invited to participate in the leadership council to assume the position of local organizer (replacing the former United States of America council member) as we plan for CISTM17 in 2021.

We would also like to deeply thank all those who supported our group by buying our coin as 78 were sold out of the 100 manufactured! We truly appreciated it!

Patrick Soentjens (Belgium)

We are counting on all of you to continue in helping us promote our group!

Olivier Aoun (France) Chair
Milly Casey-Campbell (Canada) Secretary/treasurer
Holly Doyne (United States of America) Co-Chair
Peter Leggat (Australia) Scientific Chair

Olivier Aoun,
Military Travel Interest Group Chair
The newly founded Older Travellers Special Interest Group (SIG) held its inaugural meeting in May this year at CISTM16 in Washington. The SIG was formed in order to provide a focus for the health issues faced by older travelers. This has become an increasingly important topic of interest as a larger number of travelers over the age of 65 years venture to more and more adventurous destinations. Older adults now make up a larger proportion of international travelers with up to 30% of international travelers aged 60 years or more. One United States of America study of travelers attending a pre-travel clinic found that 48% of their travelers were aged more than 50 years, 33% were over 60 years and 2% were over 80 years of age.

The ease of international travel has made it possible for older travelers to visit remote places in Africa or South America, for example, and also to destinations at very high altitude. It is not only travel to such destinations that pose problems for older travelers though. Travel to more tourist focused places, holiday resorts and urban centres also raises several important issues relating to general medical issues, polypharmacy and restrictions in mobility for these travelers. This is in addition to the risks of illnesses such as travelers diarrhea and exposure and acquisition of locally prevalent infections such as multi-drug resistant bacteria, influenza and dengue.

Prevention of infection in older adults by vaccination is of course one very important way in which we can protect the health of our older travelers. In the past decades significant advances have been made in ensuring that children are adequately protected against infectious disease through the development and implementation of immunization programs. However, similar advances have not been made for adults despite an ageing global population and the prediction that in the next 30 years more than 20% of individuals globally will be over the age of 60 years.

The increased susceptibility of older adults to infections is associated with significant morbidity and mortality. Improving vaccination strategies in older adults would therefore be expected to result in reduced morbidity and mortality. The importance of immunization strategies for older adults was also recently highlighted in a WHO meeting on immunization in older adults (1). What is clear from the WHO meeting is that there is a need for more effective immunization strategies and implementation for older adults. The WHO has also clearly stated that promoting and maintaining immunization beyond infancy and towards older adults is a global priority that is essential in promoting healthy ageing (1). To better appreciate the problem of waning vaccine immunity in older adults that results in poor responses or loss of immunity following vaccinations it is also important to better understand the basis of immunosenescence. The result of the loss of immunity associated with ageing is highlighted by several examples of the reduced immune response to several vaccines like influenza, pneumococcal disease, hepatitis B and zoster vaccine.

It is generally accepted that vaccination of older adults is an important strategy to protecting the health of older travelers, however, significant knowledge gaps in the optimal vaccination and booster strategies for older adults remain. Whilst there is published evidence for the loss of immune response to some vaccines in older adults, evidence-based practice guidelines for the vaccination and boosting of older adults are lacking.

The Older Travellers SIG will aim to work towards developing practice guidelines, defining and developing research priorities on the health issues for older adults, education for travel health practitioners providing advice to older travelers and providing health promotion for older travelers. We welcome all ISTM members wishing to become involved with the activities of the Older Travellers SIG to join us and engage in what I hope will be many fruitful discussions, research projects, focused publications and outcomes that will be of benefit to the many older travelers we all care for.


Joseph Torresi, Older Traveller Interest Group Chair

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Pediatric Council: (left to right, back to front) Philip Fischer, John Christenson, Sheila Mackell, Mike Starr, Francisco Silva, Sarah Kohl, Karl Neumann, Shirley Molitor-Kirsch, Stefan Hagmann, Natalie Prevatt, Eyal Leshem by Skype

Pediatrics

In Washington, DC at CISTM16, Shirley Molitor-Kirsch presented a survey of practice gaps and educational needs in pediatric travel medicine. With over 200 respondents, the survey shows that travel medicine practitioners are increasingly seeing pediatric patients in daily practice despite lack of pediatric specific education and training. One of the main objectives of the pediatrics interest group is to promote professional education focusing in pediatric travelers.

We hope many of you enjoyed the workshop and Pre-Course meeting in Washington, DC covering a wide range of topics in pediatric travel medicine. We began planning our educational activities for the upcoming 2020 regional travel medicine meetings including the Asia Pacific meeting in Auckland, New Zealand, the North European meeting in Rotterdam, The Netherlands and the South African meeting.

An excellent resource for scientific data and reviews of specific topics in pediatric travel medicine is the frequently updated pediatric interest group bibliography by John Christenson. This database of recent and important articles is divided by topic and contains both article information and a summary line. The updated bibliography is available for our group members and while information about pediatric travel medicine is a main focus, the list contains landmark and important papers in general travel medicine which I find very useful.

For those interested in further learning about our group please check our webpage at: www.ISTM.org/pediatricsgroup. We welcome new members interested in pediatric travelers regardless of their primary specialty. Please feel free to contact me with any ideas or requests (Eyal.Leshem@sheba.health.gov.il).

Eyal Leshem, Pediatrics Interest Group Chair
PSYCHOLOGICAL HEALTH OF TRAVELLERS

The first-ever CISTM symposium on mental health was themed: Psychological Health is Not a Luxury: Building Resilience. Industrial Psychologist Marius van Aswegen addressed the costs of failed assignments, the challenges of adjusting to an increasingly demanding business environment and the need to take a systems-based approach when preparing international assignees. As Executive Director of a travelers’ health advocacy organization, I discussed issues around access to psychiatric care abroad, the exclusions and limitations of mental health coverage for work assignees, study abroad participants, and short-term travelers, as well as the medico-legal issues around travel health insurance. Fanie Jute, a regional medical director of a health and travel security assistance company, concluded the session with his personal experience as an international assignee in five countries over 15 years with his family. There was a great turn out for the session and it was an excellent opportunity to address the importance of travel and mental health within our society.

Look out for our upcoming ISTM webinar later this year! Our group is organizing a session on A Mental Health First Aid Kit for Practitioners. Participants will learn how to identify psychiatric concerns during a pre-travel consultation and understand how psychiatric emergencies should be handled abroad, including repatriation and challenges around insurance coverage.

Lastly, please join me in welcoming our two new council members: Anne Terry, an advanced registered nurse practitioner from Seattle, WA, United States of America, who works with students travelling abroad and Péter Felkai, from Budapest, Hungary, who specializes in psychiatric repatriations. Marius van Aswegen and Fanie Jute, both from South Africa, and Tullia Marcolongo from Toronto, Canada will continue to be on the council. We look forward to bringing you practical resources and training opportunities over the next two years.

Tullia Marcolongo
Psychological Health of Travellers Interest Group Chair

RESPONSIBLE TRAVEL

The backdrop of Washington, DC for CISTM16 5-9 June 2019 did not disappoint. A location rich in history, with a culturally diverse population, provided an abundance of historical places to explore. “Travel Medicine in a Changing Climate” was the theme chosen for the conference and included adopting eco-friendly practices. As announced, one of these eco-friendly practices was a paperless conference.

In place of a printed program booklet with agenda and abstracts, a dedicated app was the program guide. Suitable for both Apple and Android phones and tablets, once downloaded and after a few practice sessions, the app was intuitive and easy to navigate.

Four of the Responsible Travel Interest Group Steering Council members attended the conference. In keeping with the success of the Responsible Travel Interest Group stand at previous conferences, expo booth participation was repeated at CISTM16. The stand was well attended during the breaks.

Council members were available to consult regarding current and proposed future activities.

Responsible Travel Interest Group members past and present, have identified special interest in the following areas:
- Ethics in Tourism
- Voluntourism
- Sex Tourism
- Health Voluntourism
- Cruise Ship Tourism

Information flyers were reviewed and updated in preparation for CISTM 16. These flyers are readily accessible via the ISTM website, located under groups and committees. There may be topics of interest that have not yet been considered or explored. If you have some ideas to share, your input and participation would be most welcome.

Jim Bond and Tullia Marcolongo facilitated a Pre-Conference Workshop on ‘Ethical dilemmas on an expedition’, all based on real life, tricky situations faced by expedition teams and their accompanying medics on three different continents. The small number of workshop participants was more than compensated for by the quality and enthusiasm of their engagement with the topic, along with an ensuing lively debate.

Jim Bond and Trish Smith hosted an informal meeting during the conference; 12 participants attended. Jim discussed ethical dilemmas on an expedition and facilitated discussion. Trish discussed some of the issues regarding Cruise Ship Tourism and further discussion ensued. At the conclusion of this informal meeting, the group explored the milieu of numerous restaurants close by and shared an authentic Eritrean meal.

There are already plans for a potential joint Pre-Conference Workshop. This would involve all the Special Interest Groups at CISTM 17 in Kuala Lumpur, Malaysia, provisionally on the theme of Sex Tourism, and how it potentially relates to or impacts the health of various travelers, migrants and destination communities. The breadth of professionals’ experience and perspectives available between the groups should enable quite an interesting discussion.

Patricia Smith
Responsible Travel Interest Group Chair
I am happy to report the Student Travel Abroad (STA) Group now has 214 members. The new Steering Council team includes myself (United States of America), Mark Newell, Immediate Past Chair (Australia), Jorge-Baruch Diaz-Ramirez (Mexico), Catherine Ebelke (United States of America), Sarah Kohl (United States of America), Marie Plisson-Saune (France), Gail Rosselot (United States of America), and Dawd Siraj (United States of America).

In the upcoming year, we hope to find more meaningful ways to engage the membership and reach out to some of the other interest groups where we have overlapping interests (e.g. student travelers and mental health concerns). Our Immediate Past Chair, Mark Newell, has years of experience with student travelers and will now regularly monitor the listserv to assist community members with questions or concerns.

I would like to update you on recent STA activities. The Steering Council put together seven wonderful talks at CISTM16 in Pre-Conference and Workshop sessions focusing on challenges facing student travelers. These presentations are loaded with concrete tools and resources that providers can immediately integrate into best practices and improve the quality of care. Catherine Ebelke presented a myriad of reliable information you can use in your work with lesbian, gay, bisexual, transgender, queer (or questioning), intersex and asexual (or allies) and other sexualities, sexes, and gender populations LGBTQIA. As you know, these groups must overcome many obstacles and until recently their travel concerns were pretty much ignored. This is the most comprehensive set of materials I’ve seen on the topic.

Don’t have an HIV PEP program in place at your facility yet? Dawd Siraj and Anjali Silva provided plenty of specifics on how to put one together. Gail Rosselot shared many useful clinical pointers in her two presentations — one on the highly allergic traveler and the other on how to provide optimal care to the traveler with limited resources and time. Mark Newell explained the complex issues facing international and inbound students and Marie Plisson-Saune walked us through the variations in national immunization schedules. If you haven’t had a chance yet, do look at all this content on the ISTM website. As you may have surmised, much of this material can be useful in helping non-student travelers as well as faculty and staff.

The other item I want to remind everyone about is the large undergraduate student traveler research project we are working on with Kristina Angelo and her team from US Centers for Disease Control and Prevention. This is the very first study of its kind as it is quite comprehensive. Our group is very excited about the potential for valuable information this study will reveal about student travelers. Currently several schools have completed the Institutional Review Board (IRB) process and are now collecting data (these schools include Stanford, the University of Pittsburgh, the University of Virginia and the National University of Ireland Galway).

If you are interested in your college or university participating in this project, please contact Sarah Kohl, our project lead, who can assist with the IRB process. Please don’t hesitate to join us in this very exciting endeavor! You may contact us for further information through the ISTM Secretariat by email: ISTM@ISTM.org or phone: +1 (404) 373-8282.

Julie Richards,
Student Travel Abroad Interest Group Chair

Jorge-Baruch Diaz-Ramirez at next to his poster.

Mark Newell at the CISTM16 STA Booth.
travel for work

As a result of ISTM Deputy Director Jodi Metzgar “cornering” Albie de Frey (South Africa), Carolyn Driver (United Kingdom), and myself (United States of America) in Barcelona during CISTM15, the Travel for Work (TFW) Interest Group was founded. Shortly thereafter, we added council members Dipti Patel (United Kingdom), Douglass Randell (Australia), and Herbert Schiltthuis (Netherlands) and elected Albie as our Chair.

Our first 2 years of existence culminated in our CISTM16 pre-meeting workshop entitled “Corporate Malaria Risk Management - Towards an International Best Practice Guideline for Corporates”. Albie, who has great perspective on malaria issues on the African continent, began with an introduction of malaria in Africa including issues and first-hand accounts of both delayed and over-diagnosis. This set the stage for our panel members to discuss their company’s operations in high malaria risk areas, malaria policies, issues with compliance, and malaria cases. We were very fortunate to have an outstanding and diverse panel from different industries which included Noud Schel (KLM Royal Dutch Airlines), Barbara Martin (Delta Air Lines), Jerry Strohkorb and Malick Diara (ExxonMobil International), and Trish Batchelor (Australian Government). Albie represented land based rural and urban employers, the latter on behalf of Herbert Heiniken who was unable to attend.

This introduction was followed by interactive cases that covered topics including fit for travel issues of antimalarial drugs: declined in high risk areas, oil rig workers with only daytime stops planned in high risk areas, and long-term malaria use in expatriates. Further conversation revolved around the main drivers of malaria policy, enforcement of taking antimalarial drugs, risk adversity, long-term malaria use, access to emergency care at destination and how it influences malaria policy, and pre-existing conditions specific to malaria that would exclude a posting. A fascinating discussion ensued about the use of malaria rapid diagnostic tests, standby emergency treatment, standby prophyaxis as well as duty for care for employees and their families. Using urine drug tests to detect antimalarial drugs as part of one company’s successful compliance program was a hot topic that generated many questions.

With the completion of our first two years, we thank our first Chair, Albie de Frey, for his work, dedication, and humor (though his work is not done yet…) and welcome our two newly elected council members Jennifer Sisson (Australia) and Ian Cheng (Australia). As we determine our next steps, one of our goals is to produce a consensus document regarding corporate malaria risk mitigation as well as employer duty of care. The council plans to send out a survey in the near future to get input from TFW members regarding duty of care and employer malaria policies, building on a pilot survey we sent out in May. We also have a goal to produce a consensus document or framework for “fitness for travel” exams to include the components of an exam based on certain variables (e.g. access to care, type of work, and duration) as well as minimal exclusion criteria for specific general assignment types. We plan to collaborate with the ISTM “Psychological Health of Travellers” Interest Group as psychological fitness is an extremely important part of this exam especially for long duration assignments and expatriates.

According to Albie who attended the Leadership Council meeting following CISTM16, the Chairs of all Special Interest Groups agreed and put it to the incoming ISTM Executive Board that the topics of the various Interest Groups have a large following within the ISTM and deserve more “floor space” during the bi-annual ISTM Conferences. Most of these topics are outside of infectious disease research that get a lot of air time at the conference. Happy to hear other ISTM members who support this view!

We will also be creating a library within the TFW community on the MyISTM site to house Travel For Work related articles, employer policies, fit for travel exams, important websites and we will be calling on our group members to submit material. I am very excited about the direction of our Interest Group and given the enthusiasm of the members that gathered at CISTM16, I think we can be a very productive group within the ISTM community.

Michael Holzer,
Travel for Work Interest Group Chair

INTEREST GROUPS continued
Journal of Travel Medicine celebrates 25 years!

It is truly an exciting time for the ISTM as our Society’s Journal of Travel Medicine has reached its 25 year mark. This is a significant milestone in our history. JTM was founded in 1994. Its first Editor-in-Chief was Charles Ericsson from 1994 to 2003, followed by Robert Steffen from 2004 to 2010, then Eric Caumes from 2011 to 2018.

Our 10 most published authors in the 25 years of the JTM should be recognized, and are listed here:

- Robert Steffen 71
- Peter Leggat 48
- Eli Schwartz 45
- A. Wilder-Smith 39
- Eric Caumes 35
- Karin Leder 34
- Gerard Flaherty 32
- Herbert Dupont 30
- Francesco Castelli 27
- Joe Torresi 27

To celebrate our 25th anniversary, it is with great delight that I share with you the recent announcement of JTM’s new Impact Factor. Many thanks to all the authors who submitted such high quality papers to JTM!

We need to remain fit for purpose and adapt to changing times. To herald the next 25 years, JTM has implemented some major changes.

1. We have revamped the website
2. We introduced a new design and logo
3. We expanded our editorial board which now includes Advisors, Associate Editors, Section Editors, an Associate Editor for Social Media, and Clinical Pearl Editors
4. We have increased the publishing speed. Our current mean interval between acceptance and appearance on PubMed is 1.2 weeks.
5. We created new manuscript categories: (1) “Clinical Pearls” are meant for interesting clinical case reports in travelers and migrants. (2) “Rapid Communications” provide the opportunity for fast publication for issues that warrant to be disseminated quickly for public health purposes or immediate translation into clinical care.
6. We had calls for Systematic Reviews and Theme Issues
7. Twice per month we send out JTM highlights to the ISTM membership and beyond.

If you cannot wait for the twice monthly JTM news, please sign up for our E-alerts: You can receive the latest updates and articles from the Journal of Travel Medicine delivered right to your inbox:

Sign up for e-alerts

We have many reasons to celebrate 25 years of our journal, and look forward to the next 25 years of continued growth.

Annelies Wilder-Smith, Editor-in-Chief, Journal of Travel Medicine

MEETINGS AND CONFERENCES

» South African Society of Travel Medicine (SASTM) Pan African Travel Medicine Congress (PATMC)
   Nairobi, Kenya
   16 -18 October 2019

» 13th Asia Pacific Travel Health Conference (APTHC)
   Auckland, New Zealand
   18-21 March 2020
   www.apths.org/welcome-apthc

» 20th Argentine Congress on Infectious Diseases (SADI - Sociedad Argentina de Infectologia) and 5th Latin American Congress on Travel Medicine (SLAMVI – Sociedad Latinoamericana de Medicina del Viajero)
   Buenos Aires, Argentina
   21-23 May 2020

» Northern European Conference on Travel Medicine 2020 (NECTM8)
   Rotterdam, The Netherlands
   3-5 June 2020
   www.NECTM8.com
TRAVEL TALK

I.T. (Ill Traveler) Phone Home: Telemedicine in Travel Medicine

In mid-May, another eye and ear opening discussion on telemedicine/telehealth for travel was posted on the listserv. The last time this issue was covered in this column was September 2015, so it’s time for an update.

(1) Some respondents offered helpful suggestions on how they aid their travelers who get sick during travel:
- using Whatsapp to have travelers text photos of lesions, etc.
- using an online-only arm of their travel business which can do some of the following (note: this may not be feasible depending on regulations of your country); last minute advice/prescriptions can be accessed, connect client with a nearby pharmacy to receive drugs and vaccines, available early morning to late evening, videos and articles supplement the “talking” part of the consult, email follow-up

(2) “Finding Truth in a Digital Age” was the topic of a scientific session at this year’s CISTM16 in Washington, DC. The following presentations are available on the ISTM website by following this link: www.ISTM.org/cistm16-presentations
- The Traveler in the Digital World (Risk Assessment, Web 5.0) - Andrea Farnham, Switzerland
- Dynamic Clinical Support Algorithms - Valerie D’Acremont, Switzerland

(3) The following is a bibliography of general literature on telemedicine (not travel medicine focused) suggested by a number of respondents:

(4) The following articles specific to travel medicine were published very recently in the Journal of Travel Medicine:

(5) These are other articles of interest published previously in the Journal of Travel Medicine:

(6) Several respondents suggested developing a separate interest group or forum on the topic of telemedicine. Stay tuned for any communications regarding this.

(7) Coming Soon!

The CDC’s Yellow Book, 2020 Health Information for International Travel, will contain a new section on telemedicine, authored by members of the American Society of Telemedicine. While focused on US issues, which are fraught with regulatory challenges, hopefully the suggestions in the chapter will be useful and applicable in some cases for other countries.

Nancy Pietroski,
Travel Medicine News Associate Editor
A mother is travelling to Madagascar with her 7-month-old infant who is otherwise up to date on immunizations. She is concerned about the measles outbreak there and wonders if the child can be immunized early for measles. The infant was breast fed exclusively for 3 months, but is now eating baby food and nursing just at night. The trip is to visit family, as the patient herself was born and raised in Madagascar.

What would you recommend, if anything, now for measles protection in this 7-month-old infant?

Response:
The mother is right to be concerned about measles for her 7-month-old infant visiting family in Madagascar for many reasons:

1. Measles is a serious and sometimes fatal disease.
2. Madagascar is in the midst of a measles outbreak due to its very low vaccination rate of 58%. According to the United Nations Children's Fund (UNICEF) there have been more than 18,000 cases of measles in the past six months, and 1,688 reported deaths.
3. Travelers visiting friends and relatives (VFR) are at a higher risk of acquiring infectious diseases compared to other travelers.

These points should be discussed to validate the mother's concern.

While the Measles, Mumps and Rubella (MMR) vaccine is only recommended at the age of 12 months in most national guidelines, this cut-off is lowered to 6 months among those travelling internationally. The 2019 CDC Health Information for International Travel (commonly called the Yellow Book) states:

“If an infant 6–11 months of age is travelling internationally, a dose of MMR is recommended but does not count toward the 2-dose recommended series. The next dose should be administered at 12–15 months of age and a minimum of 4 weeks from the international travel dose.”

The mother should thus be recommended an MMR vaccination for her 7-month-old infant, while reminding her that the infant will need another two doses thereafter at 12-15 months and then at 4-6 years. Given the very vocal and ongoing anti-vaccine campaigns surrounding the MMR vaccine, any concerns in regards to her child's vaccination should be explored, to ultimately reassure the mother on the safety and efficacy of the MMR vaccine.

Rainer Tan MD
Lausanne, Switzerland

If you haven't had a chance to participate, maybe this next case can be your challenge!

A 35-year-old female and her husband are leaving from Canada to go to Egypt to seek in vitro fertilization (IVF). What vaccines would you recommend the woman receive and is there any timing concerns in relationship to her IVF procedure?

Send your response to maryscully.ms@gmail.com by 1 September 2019 for the next edition of Travel Medicine News. Responses should be less than 300 words and address the specifics of the case.

Challenging Cases: Voice your Opinion is a great way to challenge your knowledge and learn from our international colleagues.

In case you missed any of them, all the prior cases are available to view on the MyISTM website under Educational Patient Cases.

Challenging Cases Editors:

Nancy Piper Jenks
Challenging Cases Editor

Mary-Louise Scully
Challenging Cases Editor