



Capetown is Just Around the Corner African-European Conference on Travel Medicine



The African-European Conference on Travel Medicine (AECTM) - jointly organized by the International Society of Travel Medicine (ISTM) and the South African Society of Travel Medicine - will take place in Cape Town, South Africa from the 8th to 11th February 2004.

While the conference is specifically targeted at European doctors and nurses who have a special interest in travel medicine, there will be plenty of material to satisfy people from other continents as well. Reflecting the location of the meeting, the programme will focus on the travel medicine aspects of Africa, but will also include information about other continents. The scientific chairs are Professor Robert Steffen, University of Zurich, Switzerland, the co-founder of the still young field of travel medicine, and Professor Mary Ross, University of the Witwatersrand, South Africa. They have attracted leading international speakers to participate. The faculty will be enriched by local experts who will contribute their hands-on experience and expertise to the program. A conference highlight will be a lecture series "Meet the History", a well-established tradition at ISTM conferences. An extensive and exciting program will also be offered for accompanying persons. The AETMC will undoubtedly be the premier event of 2004 for travel medicine in Europe, Africa, and elsewhere.

ISTM has selected South Africa to host the conference in order to strengthen the link and the information exchange with Africa, a destination continent for many European travelers. Your attendance will not only contribute to the development of travel medicine in Africa but will also provide a unique opportunity for better understanding of the lure and challenges of travel in Africa.

The number of early bookings already indicates an unusual interest in the event. Europe's foremost travel medicine specialists have already confirmed their participation. All the leading producers of vaccines and travel medicine relevant drugs will be present with booths and satellite symposia.

Register and view the program and other details at the ISTM website www.istm.org - "Conference Information". The deadline for presentation and poster abstracts is 1 No-

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Committee Reports

Update and New Initiatives from the Electronic Communications Committee

The Electronic Communications Committee (ECC) provides oversight for two major ISTM activities, the TravelMed listserv and the ISTM website.

The TravelMed listserv is a closed list electronic discussion forum which provides private discussion space for ISTM members. It allows members to discuss interesting or troublesome clinical cases and new research and clinical developments, and to identify travel medicine resources on a global basis. The 450 current subscribers are in more than 40 countries and the discussions are lively and informative. One or more subscriber always seems to have the requisite expertise needed or lives in or is experienced with a locale under question.

Two major enhancements are in store for the listserv in the coming months. First, ECC member Phil Scappatura has collated into archive files all listserv discussions since 2001, and has sorted them by topic. These files will be available shortly for

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vember 2003. Details and application forms are now available on the web along with the second announcement.

Cape Town is considered to be one of the most beautiful cities in the world. It was founded as a supply station for sailors travelling between Europe and the East, primarily to prevent scurvy among the seamen. This history predestines the city for a travel medicine conference. The event will be held in the brand new, ultra-modern conference venue which is directly linked to the world famous Waterfront of Cape Town, where life pulsates day and night. Of course, Cape Town is also an excellent starting point for excursions within the Cape region and in South Africa as a whole.

South Africa is booming and, although the exchange rate of the Rand has improved recently, South Africa is still extremely good value for money. A week's stay in South Africa and the flight costs no more than an equivalent 4-5 days in a major city of Europe.

A word on safety: the conference venue, the on-site conference hotel, the surrounding hotels and the Waterfront provide very safe environments. Moreover, South Africa is a safe destination, as long as you adhere to a few very simple safety rules and common sense.

Please book early. Since February is the best time of the year in Cape Town, accommodation and travel there are in high demand. Accordingly the flights are heavily booked and it can be a problem to find a carrier if you are late. In addition, early booking gives you access to the very reasonable early bird delegate fees. For information, please go to our webpage at: www.istm.org.

We look forward to welcoming you in Cape Town.

Albie de Frey, MD

*Co-Chair, Organizing Committee, AECTM
President, SASTM*

*Prof. Frank v. Sonnenburg, MD, MPH Co-Chair, Organizing Committee, AECTM
Secretary / Treasurer, ISTM*

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download on the new “Members Only” section of the ISTM website (see below). This will lend a permanence to some very high level discussions on hot topics in travel medicine and will act as an ongoing resource. Secondly, the signup and change of e-mail addresses for signing on to listserv will be dramatically simplified by the end of the year. Signup will merely involve checking a box on each member's listing in the online membership form in the Members Only section of the website. In the meanwhile, for those who want to join listserv the instructions are found on the TravelMed tab on the current ISTM website. We invite members to join.

Our ISTM website continues to be a tremendous success. There are more than 20,000 total visitors and 15,000 unique visitors a month, 8,000 of them visiting the Clinic Directory. Our success is even more remarkable because unlike many larger societies or societies that charge far higher dues, ISTM has no full-time staff devoted to maintaining our website. We depend on committee volunteers.

Furthermore, we are pleased to announce that by November a completely new website will be in place. An allocation from the ISTM annual budget is enabling us to finance some contract programming and a graphical overhaul to develop a state of the art SQL server web-enabled data base. This is in the final stages of development. The website project is under the supervision of web-site editor Karl Neumann and the database is being overseen by the ECC directly.

The new database will take over all administrative functions of the ISTM and will be directly accessible to all members. The October membership renewal mailing will contain a login/password that will allow each member to access a Member's Only section. This section will contain the online Journal of Travel Medicine, the TravelMed listserv archives, and a searchable ISTM membership directory. Members will be able to renew online as well as change information in their membership listing and any ISTM Travel Clinic Directory listing that they have elected to post, as often as they wish.

(The ISTM Travel Clinic Directory will remain open to the public as it is now.) Listings will show committee memberships, CTH certification and will allow options to join TravelMed listserv and to receive a printed version of NewsShare. Because the whole system is database driven each member will be able to use only one e-mail address for all ISTM functions. Existing listserv subscribers have already had their TravelMed e-mail addresses matched to their e-mail addresses in the membership database (a slightly painful process for some). We have compared the functionalities that ISTM will offer to that offered by other societies and, we believe, we will be at the leading edge.

Over the years, a number of ISTM members have suggested various ideas for “commercialization” of the ISTM website as a potential revenue stream. The issue was once again discussed by the ECC in New York. No satisfactory model that would benefit ISTM emerged, mainly because of the desire to maintain ISTM's status, stature, and image as a non-profit scientific and academic society remains paramount. The major strategies for commercialization proposed have involved co-branding with a major industry sponsor and the concept of offering a “shopping mall” with links or advertisement space rented to ISTM members and non-members engaged in various entrepreneurial activities. However, the revenues from a “shopping mall” would not be substantial and would likely be offset by having to pay a staff person to administer the space. Issues such as checking legitimacy of businesses, assigning positions of links and dealing with ensuing disputes, billing, and legal issues (an ISTM member denied a listing, for example) are very time consuming. Major sponsorship would likely come with some strings attached and would likely dilute revenue already coming to ISTM for sponsorships during the ISTM conferences. Also, one of the major reasons for the high volume of traffic on our website and on the Clinic Directory is because of direct hyperlinks from such high profile, high volume authoritative websites such as the Ameri-

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can CDC's Travel Home page. We would likely lose these links if our website was felt to be commercial in nature.

The ECC will present a report to the mid-term Executive Board meeting in February 2004 on the feasibility and cost of using a service such as elections.com for online balloting for the next ISTM elections.

The ECC welcomes feedback and suggestions from any ISTM member at any time.

David O. Freedman, MD for the ECC

Report of the ISTM Publication Committee

The Publications Committee (PC) is charged with keeping an eye on all written communication using the logo of ISTM. The PC also collaborates with the Electronic Communications committee. A number of possible initiatives have been proposed by Brian Decker, our publisher, and other ideas have been generated out of the recent Executive Board meeting:

Guidelines for the practice of travel medicine. These guidelines would be published in JTM. The Executive Board believes it is time for ISTM to stand forward and be fully recognized as the authoritative body that it is. Clinical Infectious Diseases is already developing such guidelines. National differences in practices can be accommodated in guidelines that are flexible enough to recognize the commonalities while accommodating the differences. The Professional Education Committee is considering this charge, and a member of the PC will work with this committee.

A booklet for the education of travelers. Dr. Steffen published such a booklet on behalf of ISTM in the past. While the artwork was debated, the content of the booklet was very well received. The Industry Liaison and the Public Education Committee have responsibility for this booklet. Our nurses have expressed a strong desire to take the lead on this project. It should be a notable membership benefit when completed.

Oversight for content and appearance of our journal. The PC will be mindful of the advertisements in our journal and whether they are ethical and appropriate in their claims and whether our authors have fully disclosed conflicts of interest. With the change in editorship of JTM, consideration should be given to changing the appearance of our journal. Likewise, the idea of a name change to the Journal of Travel and Migration Medicine should be seriously debated.

The Membership Committee needs to have written products (brochures, banners, etc.) that support the solicitation of new members. Improving membership is a major concern of our new president.

Anyone wishing to participate on the Publications Committee and assume some responsibility for helping us achieve these goals should please contact me.

*Charles D. Ericsson, MD
Chair, Publications Committee
charles.d.ericsson@uth.tmc.edu*

ISTM Migration Health Committee

A meeting was held during on May 7, 2003 in New York. Present were: Brian Gushulak (Canada), Christoph Hatz (Germany), Louis Loutan (Switzerland), Anne McCarthy (Canada), Rogelio Lopez-Velez (Spain), Elizabeth Barnett (USA), Francesco Castelli (Italy), Doug MacPherson (Canada).

Review of Activities: The meeting took place during CISTM8, a dynamic undertaking marked by several sessions, workshops, presentations and activities that reflected the increasing interest and importance of the health migrants and other mobile populations. The sessions and workshops on issues of migrant health were well attended and the quality of the presentations was impressive.

During the past year the Committee has had difficulty in completing many of the tasks it set for itself. The generation of publications and reference documents has been difficult for Committee members

given their respective workloads. Reviewing the pressures of time and external commitments, some members suggested that these goals were perhaps too ambitious and the Committee should consider less complex undertakings.

It was almost universally accepted that health issues in migrant populations continue to be an area of growth and increasing interest both with ISTM and in the broader medical community. Those interests extend from issues of screening for disease in practitioners' offices to the public health principles of population mobility. Surveys of academic literature demonstrate that the amount of published material dealing with migration health is expanding, reflecting the growing number of providers, researchers and policy makers who are now involved in the subject.

Considerable discussion focused on appropriate methods of trying to meet the diverse challenges within the capacity of the Committee.

Challenges: Discussion reinforced the need for simple clear guidelines and instructions for practitioners who deal with migrants. It was noted that the relevance of health issues in migrants continues to increase, particularly for those who deal with refugees and asylum seekers.

Challenges inherent in the field are created by the significant differences and variation in migrant populations between providers and national locations. The political and social factors that affect and stimulate migration are diverse and the resulting population movements are correspondingly diverse. This makes the generation of standard reference material a complex task. For example, the screening instructions designed for a group of asylum seekers or illegal migrants from rural tropical Africa would not be totally appropriate for similar migrants from Eastern Europe. It was noted that Committee membership might need to be expanded or altered to expand capacity and perspective.

Issues for Action: The issue of the role and mandate of the Committee: contin-

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ued to generate comment and it was suggested that the Terms of Reference initially drafted in Innsbruck be re-circulated for consideration and comment. Following that process the Terms will be proposed for formal adoption by the subcommittee and referred to the Executive Board.

Committee Products: After some consideration the subcommittee agreed to work towards a modular approach to migration health issues for ISTM. The modular approach was felt to have several advantages:

- (a) It allows committee members to work within their direct sphere of knowledge.
- (b) The products are of a size that may be easier for committee members to produce.
- (c) The concept allows for continuous integrated growth of what could become a complete syllabus or reference manual on the subject.

(d) The concept allows for natural use of electronic media and easy distance learning opportunities and extension into the less developed world.

Action Plan:

It was agreed that members would, within three months, develop draft presentations. The presentations will be in PowerPoint format. They will be from 10 to 20 slides and will include no more than the relevant references. The individual modules will be authored by one individual but will require the approval and adoption of a majority of the subcommittee before being considered for external use.

Following completion, each draft will be circulated to the full subcommittee for comment and adoption as a committee module. Adopted modules will be presented to the Publications and Electronic

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View from Stone Mountain



Greetings from Stone Mountain, Georgia, USA, where we are eagerly awaiting the beginning of fall and cooler temperatures.

I recently attended the Wilderness Medical Society's 4th World Congress, held in Whistler, British Columbia, Canada, and returned to Stone Mountain with 30 new ISTM members! I would like to send a special "thank you" to Drs. Peter Hackett, Marc Shaw, David Shlim and Mary Wilson for encouraging WMS members to give the ISTM a try. Welcome to all our new members from WMS and elsewhere around the globe. I trust you will find the ISTM to be a valuable source of information for yourself and your patients.

I am very pleased to announce that we have a new, and I think more "eye-catching" membership brochure. I know one of our President's goals is for our society to double the membership by 2005. One way we can assist in achieving this goal is by getting information about ISTM into the hands of potential members. I always keep a supply in the office to send out at anytime. So, please remember to request these brochures to distribute at meetings you may be attending.

I am curious to know if there is an interest within the membership of the society for items such as certificates of membership, membership pins, etc. Please email (to istm@istm.org) your thoughts and suggestions on these ideas.

Remember to speak a kind word to someone each day – it may be the only time they hear something positive!

Brenda Bagwell

Put Edinburgh, June 2006, on Your Calendar

Plans are well underway for a major travel medicine event in the summer of 2006, in the beautiful and historic city of Edinburgh, Scotland. The ISTM, along with the Scandinavian Forum for Travel Medicine (Danish Society of Travel Medicine, Norwegian Forum for Travel Medicine, Swedish Society for Tropical Medicine), the British Travel Health Association, the Irish Society of Travel Medicine, and the Royal College of Nursing Travel Health Forum (UK) will be hosting a Northern European Conference in Travel Medicine - and it promises to be a great meeting!

The venue is the Edinburgh International Conference Centre, which is ideally situated within one of Europe's capital cities. Edinburgh is an ideal centre for walking, full of culture, colour, history and heritage. The city is lively and dynamic with an excellent choice of restaurants and nightlife.

The conference programme will be packed with topics central to the practice of travel medicine - but with a focus on issues of particular relevance to the northern European region. As well as the diverse scientific programme there will be a lively calendar of social events, including a visit to the world famous castle - so bring along your partner, family, and friends as well!

Look out for news of the 2006 conference as plans progress...

For information, contact:

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The Responsible Traveler

As travel health professionals, we are all working under the broad umbrella of world health concerns and regularly giving advice to travellers on how best to look after themselves. Let us also show concern for the countries that are hosting our travellers, be aware of the negative effects that tourism can have and support the need for responsible tourism and travel.

These issues are addressed by the ISTM Host Countries Committee, the committee that helped produce The Responsible Traveller Guidelines. The Guidelines were distributed to all delegates at the conference in New York and appeared in the previous edition of NewsShare (July/August 2003). The Guidelines can be downloaded from the ISTM website. Also available is a yellow bookmark card stating the "Seven Tips for Responsible Travel." The cards can be ordered from the ISTM office and distributed in your travel clinic waiting rooms.

From time to time we will bring your attention to organizations that we feel are working in the area of responsible travel. One such organization is featured here.

Radical Move by UK Trek Tour Operators Helps Transform Mountain Porters Lives

Tourism Concern is a London-based, charity, membership organisation that has been campaigning for ethical and fairly traded tourism since 1989. They work with people worldwide to promote tourism that benefits the host countries' communities by raising the awareness of the negative impacts of tourism: economic, cultural, environmental and social. Host country communities often find that they have tourism imposed upon them by governments, foreign developers and the tourism industry. Often there is little linkage between tourism, especially tourism on a mass scale, and local industry, such as agriculture. Land and natural resources are frequently co-opted, often illegally, and local cultural traditions are appropriated and commercialised.

Tourism Concern has launched a campaign that has prompted action amongst British trekking operators to protect porters used by their trips, working with operators taking treks to the Himalayas, Macchu Pichu in Peru and Kilimanjaro in Tanzania. Some observers estimate that porters are four times more likely to fall ill or die on trips as trekkers, the result of hypothermia, dehydration or altitude sickness. Porters in mountain regions frequently earn as little as £2 a day, carry loads of up to 60 kg, go without boots or jackets, and are often left to sleep out-

side. Often they receive insufficient food, sometimes even being denied the leftovers from trekkers' meals, particularly on Macchu Pichu or Kilimanjaro. In extreme cases, porters believe they are simply seen as "beasts of burden". In the words of a Peruvian porters' syndicate: "We suffer humiliation upon humiliation, and are treated as less than human... If we protest, we simply won't be re-contracted: we don't have any other employment options." A tour operator in Pakistan is even more direct: the way porters are treated, he says, "amounts to modern slavery."

Tourism Concern's message is 'Do go trekking - it is a vital income for trekking communities. But now please go with an operator who has committed to protecting its porters.' Scottish ex-police officer Jonny Gibb, who won the £1m Survivor prize in May this year, was shocked to see three porters die on his celebratory trek and welcomes Tourism Concern's campaign. "After I won Survivor I left my job and decided to treat myself to a trek up Kilimanjaro, Africa's highest mountain," says Jonny. "We assumed the cost of the trip included looking after porters and were horrified that this didn't happen. I saw porters carrying our luggage wearing just flip flops or thin golf shoes. It was freezing cold. Three of them died of cold on one night after having to sleep out in very bad weather conditions. I was keen to go on the trip, but I wasn't desperate enough for people to die."

When Tourism Concern contacted UK trekking and climbing operators, they dis-

covered that only a few operators had well-defined policies concerning porters. Most operators said that they left responsibility for porters to the companies in the destination country and did not know what would be done if porters were injured or fell ill. Few set guidelines on the weights of loads porters carried, wages, or protective clothing and footwear.

Suggested guidelines on porters' working conditions were then drawn up by tour operators, porters' groups and Tourism Concern. As a result, 40 of the 81 tour operators in the United Kingdom (UK) that were contacted by Tourism Concern now have policies to provide essential protection, fair pay and humane working conditions. (The names of the cooperating tour operators are available on the Tourism Concern website.)

Examples of the problem and progress:

- **Himalayas:** Kul Bahadur Rai's story: Nepalese porter Kul Bahadur Rai was hit by altitude sickness while carrying a heavy load for tourists. Rapid descent is the effective and simple cure for altitude sickness. But an unsympathetic trek sirdar (trek foreman) made Kul Bahadur go on, then left him to descend alone. Kul Bahadur slipped into a coma and woke in hospital to find that his frostbitten feet had to be partially amputated. Early this year a porter in Nepal was found unconscious by the side of a trail. He had been forced to carry his load until he was unable to go any further, then left with no money to make his way down the mountain alone.

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PROGRESS: The International Porter Protection Group (IPPG) (www.ippg.net) and the Himalayan Explorers Connection (HEC) (www.hec.org) have improved conditions for porters significantly. They have established Porter Clothing Banks, provide safety education, and have built shelters, including a porter rescue post in the notorious Gokyo “death” valley. This post will also help trekkers in distress. Nepali porters are now beginning to be rescued by helicopter. Some trekking companies are now providing tents for their porters and have food cooked for them by the trekkers’ kitchen staff. An HEC member is providing scholarships for Kul Bahadur Rai’s children’s education.

- Pakistan has no such porter support system. As Agha Igrar Haroon, President of the Ecotourism Society of Pakistan explains: “Porters are poor people and the majority work without proper insurance and without proper clothing. They receive no proper training and get next to nothing if they are injured or disabled while working. Foreign tour operators can play a great role in protecting porters’ rights. They should ask the ground agents about the facilities they provide for porters before giving them business, and not just give business to the cheapest ground agent. Tour operators shouldn’t try and keep costs down at the expense of basic human rights.”

- Kilimanjaro, Tanzania: Tourism Concern has received reports of sick porters being abandoned by tour operators, of porters frequently working without shoes or proper equipment, and of guides bribing the rangers who weigh the porters’ loads, so that porters end up carrying huge weights. Guides choose porters on the basis of payments and bribes and threaten those who refuse to pay with no more work. Kilimanjaro National Park has described Tourism Concern’s campaign as “a justifiable and achievable cause.”

Three porters died on September 17th last year. One died working in cold, driving rain dressed only in trousers and a T-shirt and then sleeping out all night, as the porters’ accommodation was full. Two others froze to death overnight.

PROGRESS: A new porters’ association, the Kilimanjaro Porters Association, has been created which “has reinforced guides’ discipline as well as operators’ discipline, as they are no longer able to bulldoze porters and have now to treat them fairly well.” HEC is opening an office in Kilimanjaro to address the needs including clothing, shelter and education of mountain porters.

- Macchu Pichu, Peru: Official guidelines for trekking the Inca Trail have been established, including ensuring a maximum weight of 20kg for packs carried by porters. Packs are weighed by government officials before treks. However, last September, porters went on strike, demanding regulation on porters’ wages and a minimum wage of US\$30 per four day trek. This May, 1000 members of the Inca Trail porters’ union marched to protest that the minimum wage was not being paid. They presented a letter to relevant authorities asking for the good example of one operator to be replicated which provides appropriate clothing, provides the same food as is provided for tourists (rather than leftovers), respects the maximum legal weight limit of 20kg, and “treats their porters like real human beings.”

For more information about Tourism Concern, visit www.Tourismconcern.org.uk or email info@tourismconcern.org.uk. (Please note that a typing error resulted in the wrong address being given for Tourism Concern in the Responsible Tourism document which appeared in the previous issue of NewsShare.)

(This is the bookmark-like card available from the ISTM office)

The Responsible Traveler

Seven Tips for Responsible Travel

(International Society of Travel Medicine)

Be informed. Travel allows us to discover natural beauties, historical sites and above all the diversity of other societies and people. Be an informed traveler before leaving home and discover what the people you’ll meet at your destination can teach you.

Be open-minded and patient. Experience other cultures and lifestyles.

Be respectful. Local people welcome you. Show them gratitude and respect. Respect also local customs: the way you dress, behavior in religious sites, displays of affection.

Avoid exploitation. As travelers we are perceived as rich. Be generous in a constructive way by promoting the local economy. Avoid and denounce exploitation of the local people (e.g., low salaries, overwork, child abuse and sex).

Protect the environment. Avoid overuse of water, wasting food, littering and damaging sites.

Leave a good impression. A positive experience with local people will pave the way for those coming after you leave.

Respect and mutual discovery will make your trip a wonderful experience and will promote your security and your health too! So enjoy yourself and have a good trip!

An Interesting Fact:

An average 18-hole golf course soaks up at least 525,000 gallons of water a day? Perhaps not a significant statistic for those of us who live in a climate where rain falls regularly, but the same quantity of water would also supply the irrigation needs of 100 Malaysian farmers, says Tourism Concern. Maintaining golf courses in prime condition also requires massive inputs of fertilisers, pesticides and herbicides. The 1980’s economic boom saw a proliferation of golf courses world-wide and a massive surge in golf tourism, particularly in tropical Southeast Asia. Many farming communities lost their land and were evicted either with minimal or no compensation.

Calendar: Travel Medicine Conferences, Courses & Educational Travel

(Note: This calendar is a service for the travel medicine community. The listings come from reputable individuals within the community but are not checked or necessarily endorsed by ISTM.)

Oct
7-8

Intensive Update Course in Clinical Tropical Medicine and Travelers' Health. San Diego, California. October 7-8, 2003.

Immediately preceding the IDSA Annual Meeting. Sponsored by ASTMH in cooperation with the ACCTMTH. Contact ASTMH at (847) 480-9592. E-mail: astmh@astmh.org. Web site: www.astmh.org.

Nov
6-8

The Heart and Global Health. Forlì, Italy. 6-8 November 2003. Opening day: "Travelling with Cardiovascular Disease."

Topics include: hypertension; pacemaker; defibrillation; diving; altitude; the effects of various travel-related and tropical diseases on the heart and cardiovascular system. International scientific committee. Official languages: Italian and English. Organized in collaboration with WHO and CDC, Atlanta (USA). For information concerning abstracts, posters and attendance: Dr. Walter Pasini, Viale Dardanelli, 64 - 47900 Rimini, Italy, Tel. (+39) 0541-24301. E-mail: wpasini@rimini.com.

Nov
7

Journée de la Société de Médecine des Voyages. Lyon, France. Novembre 7, 2003. Organisateur: Société de Médecine des Voyages.

Programme: Grippe chez le voyageur; Pneumopathie à coronavirus, SARS; Fièvres hémorragiques virales; Fonctionnement d'un centre de vaccination. Lyon - Bron, à l'Ecole du service de santé des armées. Contact: Prof. F. Peyron, Service de parasitologie, Université de Lyon; www.parasitologie.univ-lyon1.fr/Congrs/Congr%E8s_1/SMV%20index.htm.

Nov -
April

Foundation in Travel Medicine by Distance Learning. Glasgow, UK. November, 2003-April, 2004. Multi-disciplinary six-month course. Comprises four distance learning units of core material

with written assignments. Overseas students welcome. Contact: Miss Amanda Burridge, Course Administrator, Travel Health Department, Scottish Centre for Infection and Environmental Health, Clifton House, Clifton Place, GLASGOW, G3 7LN. Tel: 0141 300 1132. Fax: 0141 300 1170. Email: Tmdiploma@scieh.csa.scot.nhs.uk. Web address: www.travelcourses.scieh.scot.nhs.uk.

Nov
13-14

14th Conference on the Health of International Travelers. Montreal, Canada, November 13th and 14th, 2003. Lectures, expert panels, and workshops. Many interactive sessions. For physicians and nurses to develop and update their knowledge and skills in travel medicine. Sponsor: The Medisys Travel Health Clinics and TravelMedisys.com. Hotel Omni.

Contact: Dr. Dominique Tessier or Mrs. Nicole Côté, Medisys Travel Health Clinic 500 Sherbrooke West, Suite 1100, Montréal, Quebec, Canada H3A 3C6. Tel: 514-499-2773. Fax: 514-845-4842. Email: nicole.cote@medisys.ca. <mailto:nicolecote@medisys.ca>.

Nov
17-22

Havana Travel & Tropical Medicine Course 2003. Havana, Cuba. November 17-22, 2003. Organizer: Instituto de Medicina Tropical «Pedro Kouri» (IPK), Havana, in collaboration with Medical Services for the Tropics (MST), Maastricht, Netherlands. For physicians (especially those working in general practice, occupational, aviation, tropical and public health medicine), pharmacists, microbiologists, nurses, and other health scientists. Lectures by leading specialists (Cuban and others) and visits to hospitals, research laboratories, and community health centers. Lab training available on request in bacteriology and parasitology, and extra module, public health. Official language: English. Medical education credits applied for from Dutch accrediting authorities. Course Coordinator: Peter de Beer, MD; PO Box 1660; 6201 BR

Maastricht, Netherlands. Email: mstropics@mail.com and pedebeer@hvision.nl. Web address of MST: www.tropen.kliniek.nl. IPK information: Director, Training Programs, Dr. Nereyda Cantelar. See Web address IPK: www.ipk.sld.cu.

Dec
2-3

Current Issues in Clinical Tropical Medicine and Travelers' Health. Philadelphia, Pennsylvania. December 2-3, 2003. Sponsored by the American Society of Tropical Medicine and Hygiene in cooperation with the ACCTMTH. Contact: ASTMH, 60 Revere Drive, Suite 500 Northbrook, Illinois 60062. Tel: (847) 480-9592; Fax: (847) 480-9282. E-mail: astmh@astmh.org. Web site: www.astmh.org.

Feb
8-11

African-European Conference on Travel Medicine (AECTM). Cape Town, South Africa. February 8-11, 2004. Organized jointly by International Society of Travel Medicine (ISTM) and South African Society of Travel Medicine (SASTM). Meeting especially targeted at European and African professionals. Leading experts from all parts of the world will present the very latest in travel and migration medicine. Many interactive sessions. Special workshops on travelers in Africa, visitors of game parks, medical services for long-term expatriates etc. Contact: Ken Brown, African Conferences and Incentives (ACI). E-mail: aectm@acitravel.co.za. Phone: (+27)(11)475 2902. Fax: (+27)(11)475 0366. Web address: www.istm.org; www.sastm.org.za.

Feb
13-17

Winter Wilderness Medicine Conference, Jackson Hole. Wyoming, USA. February 13-17, 2004. The latest in winter-related wilderness and travel medicine. Contact: WMS, 3595 East Fountain Blvd., Suite A-1, Colorado Springs, CO 80910. USA. Tel: +1-719-572-9255. Fax: +1-719-572-1514. Web address: www.wms.org.

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March
4-7

11th International Congress of Infectious Diseases. Cancun, Mexico. March 4-7, 2004. Sponsor: International Society for Infectious Diseases (ISID). Official language: English. ISID, 181 Longwood Avenue, Boston, MA 02115, USA. Tel: (617) 277-0551. Fax: (617) 731-1541. Email: info@isid.org. Web address: www.isid.org.

March
6-11

Hypothermia and Cold Related Injuries. Alyeska, Alaska. March 6-11, 2004. Sponsored by the Wilderness Medical Society.

Contact: WMS, 3595 East Fountain Blvd., Suite A-1, Colorado Springs, CO 80910. USA. Tel: +1-719-572-9255. Fax: +1-719-572-1514. Web address: www.wms.org.

March
8-Feb

Postgraduate Diploma in Travel Medicine by Distance Learning. Glasgow, UK. March 8, 2004-February 2005. Year long, distance-learning course for qualified medical practitioners, nurses and other health care professionals with special interest in travel health. Diploma qualification awarded through Royal College of Physicians and Surgeons. Students may be invited to continue onto MSc in Travel Medicine through the University of Glasgow. Overseas students particularly welcome to apply. Contact: Miss Amanda Burridge, Course Administrator, Travel Health Department, Scottish Centre for Infection and Environmental Health, Clifton House, Clifton Place, GLASGOW, G3 7LN. Tel: 0141 300 1132. Fax: 0141 300 1170. Email: Tmdiploma@scieh.csa.scot.nhs.uk. Web address: www.travelcourses.scieh.scot.nhs.uk.

March
4-7

11th International Congress of Infectious Diseases. Cancun, Mexico. March 4-7, 2004. Sponsor: International Society for Infectious Diseases (ISID). Official language: English. ISID, 181 Longwood Avenue, Boston, MA 02115, USA. Tel: (617) 277-0551. Fax: (617) 731-1541. Email: info@isid.org. Web address: www.isid.org.

March
29-31

4th European Conference on Travel Medicine (ECTM4). Rome. March 29-31, 2004. Travel Medicine and Safety. Sponsored in part by WHO and CDC, Atlanta. An interdisciplinary approach to travel medicine, preceded and followed by meetings held in close collaboration with leading societies in dermatology, occupational health, sports medicine, pediatrics, psychology and psychiatry, environmental health, cardiology, and other subjects. These meetings will be held in Venice and in other Italian cities of cultural interest. Abstracts accepted from those wishing to take part. Send abstracts to: wpasini@rimini.com by November 30, 2003. Other information: Expomedia Srl, Via XXVIII Luglio 218, 47893 Borgo Maggiore, Republic of San Marino. Tel. (+378)907577, fax (+378)944795, e-mail: info@expomedia.sm.

April
25-28

Wilderness and Travel Medicine. Santa Fe, New Mexico. April 25-28, 2004. Sponsored by the Wilderness Medical Society. Contact: WMS, 3595 East Fountain Blvd., Suite A-1, Colorado Springs, CO 80910. USA. Tel: +1-719-572-9255. Fax: +1-719-572-1514. Web address: www.wms.org.

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. Detailed information about the meeting will be available in the next issue.

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; Web address: www.ismh8.com.

Courses/Educational Travel

Feb 2-
April 2

The Gorgas Course in Clinical Tropical Medicine. Lima, and the Andes and Amazon regions, Peru. Course scheduled for February 2-April 2, 2004 (waiting list only) and January 31-April 1, 2005. Sponsored by the University of Alabama and the IAMAT Foundation. Includes lectures, case conferences, diagnostic laboratory procedures, and bedside teaching in a 36-bed tropical medicine unit. Official language: English. International Faculty. 380 contact hours. Contact: David O. Freedman, M.D. Gorgas Memorial Institute, University of Alabama at Birmingham, 530 Third Avenue South, BBRB 203, Birmingham, AL 35294. Fax: 205-934-5600. Or call: The Division of Continuing Medical Education at 800-UAB-MIST (U.S.) or 205-934-2687 (from overseas). Email: info@gorgas.org. Web address: www.gorgas.org.

Feb
15-27

Tropical Medicine Expeditions to East Africa: 9th Uganda Expedition scheduled for February 15-27, 2004, and 11th Kenya Expedition scheduled for March 7-19, 2004. In collaboration with Kay Schaefer, MD, PhD, MSc, DTM&H, of Cologne, Germany and the Universities of Nairobi and Makerere. Two-week expeditions designed for up to 8 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: +49-221-3404905, E-Mail: contact@tropmedex.com. Web address: www.tropmedex.com.

— "Committee Reports," cont. from p. 4 —

Communications Committee for consideration as web-based components of the ISTM web site. The authors and the subjects of the initial modules:

Christoph Hatz: The Migrant Medical History; Louis Loutan: The Use of Interpreters in Clinical Situations; Elizabeth Barnett: Immunization in Migrants; Anne McCarthy: Screening for Infectious Disease; Brian Gushulak: The Phases of Migration

The process will be reviewed in one year to assess its success.

Other Business:

New Members: The Committee welcomed Dr. Rogelio Lopez-Velez from Spain and Dr. Anne McCarthy from Canada to the group.

Next Meeting: Subcommittee members will look for a potential venue at another event attended by several members as a site for a meeting in 2004, to try and avoid the 2-year hiatus between ISTM Conferences.

NewsShare

the Bimonthly Newsletter of the International Society of Travel Medicine

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