

Pediatric Interest Group Bibliography

International Society of Travel Medicine

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Adolescent and Student Travelers

1. Nield LS. Health implications of adolescent travel. *Pediatr Ann* 2011;40:358-361.
A very nice review.
2. Sundbeck M, Emmelin A, Mannheimer L, Miörner H, Agardh A. Sexual risk-taking during travel abroad – a cross-sectional survey among youth in Sweden. *Travel Med Infect Dis* 2016;14:233-241.
Youth, alcohol and drug use, and prolonged travel = sexual risk-taking. Must read article.
3. Han H, Kim W, Kiatkawsin K. Emerging youth tourism: fostering young travelers' conservation intentions. *J Travel Tourism Market* 2017;34:905-918.
Environmental awareness may be an incentive for some teens to travel.
4. Maltezou HC, Pavli A, Theodoridou K et al. Preparedness of adolescents departing from Athens International Airport to Africa or Asia: a five-year airport-based prospective study. *Travel Med Infect Dis* 2018;21:69-73.
Important paper. Less than one-third of adolescents sought counseling. We need to target this high-risk group.
5. Angelo KM, Haulman NJ, Terry AC et al. Illness among US resident student travellers after return to the USA: A GeoSentinel analysis, 2007-2017. *J Travel Med* 2018; 2018 Jan 1;25(1):10.1093/jtm/tay074. doi: 10.1093/jtm/tay074.
While the study group was mostly young adults, some of the issues would pertain to an adolescent studying abroad.
6. Dao TL, Gautret P. Patterns of diseases in health students abroad: A systematic review. *Trav Med Infect Dis* 2021;39:101944.
A comprehensive review
7. Pupaibool J, Walaliyadda H, Tasevac B et al. Travel-related behaviors and health outcomes of adolescents compared with adults on short-term international service missions. *Am J Trop Med Hyg* 2022;106:345-350.
Interesting findings. Article is a must read if you have adolescent travelers.

Arthropod-Transmitted Infections

1. Gibney KB, Fischer M, Prince HE et al. Chikungunya fever in the United States: A fifteen year review of cases. *Clin Infect Dis* 2011;52:e121-e126.
A good review of cases. Helps with the recognition and management.

2. Ranjit S, Kisson N. Dengue hemorrhagic fever and shock syndromes. *Pediatr Crit Care Med* 2011;12:90-100.
Good review article on the recognition and management of patients with DHF and DSS.
3. Amarasinghe A, Kuritsky JN, Letson GW, Margolis HS. Dengue virus infection in Africa. *Emerg Infect Dis* 2011;17:1349-1354.
Febrile travelers coming from Africa may have dengue fever; an underdiagnosed and underreported condition in this continent.
4. Krishnan N, Purswani M, Hagmann S. Short report: severe dengue virus infection in pediatric travelers visiting friends and relatives after travel to the Caribbean. *Am J Trop Med Hyg* 2012;86:474-476.
Pediatric travelers are at risk for severe dengue virus infection. Prevention is key.
5. Sotir MJ, Hoang Johnson DK, Davis JP. Travel-associated dengue illnesses among Wisconsin residents, 2002-2008. *Wisc Med J* 2009;108:447-452.
Mosquito exposure was high. Unfortunately, insect repellent use was low. The result: dengue.
6. Pérez Rodríguez NM, Galloway R, Blau DM et al. Case report: case series of fatal *Leptospira* spp./dengue virus co-infections-Puerto Rico, 2010-2012. *Am J Trop Med Hyg* 2014;91:760-765.
Co-infections do occur. Major implications when it comes to management.
7. Lindsey NP, Prince HE, Kosoy O et al. Chikungunya virus infections among travelers-United States. *Am J Trop Med Hyg* 2015;92:82-87.
Travel medicine specialists must be familiar in the epidemiology of Chikungunya among travelers. This article discusses the US experience.
8. Gutierrez-Saravia E, Gutierrez CE. Chikungunya virus in the Caribbean: a threat for all of the Americas. *J Pediatr Infect Dis Soc* 2015;4:1-3.
Nice short review on the topic. Nice diagram of diagnostic criteria.
9. Cetron M. Revision to CDC's Zika travel notices: Minimal likelihood for mosquito-borne Zika virus transmission at elevations above 2,000 meters. *MMWR Morb Mortal Wkly Rep* 2016;65:267-268.
At elevations above 2,000 meters, the risk for mosquito-borne exposure to Zika virus is considered to be minimal.
10. Armstrong P, Hennessey M, Adams M, et al. Travel-associated Zika virus disease cases among US residents-United States, January 2015-February 2016. *MMWR* 2016;65:286-289.
Discussion of travel-associated Zika infections.
11. Karwowski MP, Nelson JM, Staples JE et al. Zika virus disease: A CDC update for pediatric health care providers. *Pediatrics* 2016;137:e20160621.
Nice comprehensive general review on Zika virus.

12. Petersen LR, Jamieson DJ, Powers AM, Honein MA. Zika virus. N Engl J Med 2016;375:294-295.
Latest review on Zika.
13. Goorhies A, von Eije KJ, Douma RA et al. Zika virus and the risk of imported infection in returned travelers: implications for clinical care. Trav Med Infect Dis 2016;14:13-15.
Nice review. This issue is dedicated to Zika, CHIK and dengue.
14. Hagmann SHF. Clinical impact of non-congenital Zika virus infection in infants and children. Curr Infect Dis Rep 2017;19:29.
Excellent review. A must read.
15. Griffin I, Martin SW, Fischer M et al. Zika virus IgM 25 months after symptom onset, Miami-Dade County, Florida, USA. Emerg Infect Dis 2019;25:2264-2265.
Careful with interpreting Zika serologies. IgM can persist for a while.
16. Wong JM, Adams LE, Durbin AP et al. Dengue: A growing problem with new interventions. Pediatrics 2022;149:e2021055522.
Most of us are seeing more dengue. This article is outstanding in representing the present and the future of the problem and potential preventive measures. A must read.
17. Man O, Kraay A, Thomas R et al. Characterizing dengue transmission in rural areas: A systematic review. PLoS Negl Trop Dis 2023;17:e0011333.
Dengue is no longer an urban disease.
18. Huits R, Angelo KM, Amatya B et al. Clinical characteristics and outcomes among travelers with severe dengue. A GeoSentinel analysis. Ann Intern Med 2023;176:940-948.
Great summary of cases. If you see dengue in your practice, a must read.
19. Bierbrier R, Javelle E, Norman FF et al. Chikungunya infection in returned travellers: Results from the GeoSentinel Network, 2005–2020. J Travel Med 2024;31:2.
It is critical that we educate travelers on the risk and preventive measures as relation to Chikungunya infections.
20. Kiplagat SJ, Rodrigue DM, Rivera A et al. Increased in travel-associated and locally acquired dengue cases-United States, 2024. MMWR 2026;75: 227-233,
Nice epidemiologic summary from the Dengue Branch in Puerto Rico. This increase in dengue is not a surprise to many of us in the US. Similar patterns being observed in other countries.

Bacterial Infections and Colonization-Resistance

1. Were T, Davenport GC, Hittner JB et al. Bacteremia in Kenyan children presenting with malaria. J Clin Microbiol 2011;49:671-676.

Bacteremia and malaria go together in many countries in Africa. Both need to be considered when evaluating the child with a febrile illness.

2. Zhou YP, Wilder-Smith A, Hsu LY. The role of international travel in the spread of methicillin-resistant *Staphylococcus aureus*. J Travel Med 2014;21:272-281.
Plenty of epidemiologic and molecular data support the notion that MRSA has been transmitted through international travel.
3. Kantele A, Lääveri T, Mero S et al. Antimicrobials increase travelers' risk of colonization by extended-spectrum beta-lactamase-producing *Enterobacteriaceae*. Clin Infect Dis 2015;60:837-846.
Antibiotic use for the treatment of traveler's diarrhea increased the risk of colonization. An "adverse event" of antibiotic use.
4. Ruppé E, Armand-Lefèvre L, Estellat C et al. High rate of acquisition but short duration of carriage of multidrug-resistant *Enterobacteriaceae* after travel to the tropics. Clin Infect Dis 2015;61:593-600.
This study found that ~50% of travelers to the tropics were colonized with resistant bacteria on their return.
5. Angelin M, Forsell J, Granlund M et al. Risk factors for colonization with extended-spectrum beta-lactamase producing *Enterobacteriaceae* in healthcare students on clinical assignment abroad: a prospective study. Travel Med Infect Dis 2015;13:223-229.
Should we prescribe antibiotics for travelers? See editorials in Gastrointestinal section.
6. Karanika S, Karantanos T, Arvanitis M, Grigoras C, Mylonakis E. Fecal colonization with extended-spectrum beta-lactamase-producing *Enterobacteriaceae* and risk factors among healthy individuals: a systematic review and meta-analysis. Clin Infect Dis 2016;63:310-318.
Must read article.
7. Marston HD, Dixon DM, Knisely JM et al. Antimicrobial resistance. JAMA 2016;316:1193-1204.
If you prescribe antibiotics, a must read article.
8. Arcilla MS, van Hattem JM, Haverkate MR et al. Import and spread of extended-spectrum β -lactamase-producing *Enterobacteriaceae* by international travellers (COMBAT study): a prospective, multicenter cohort study. Lancet Infect Dis 2017;17:78-85
A growing problem. Must read article.
9. Stryzko JP, Mony V, Cleveland J et al. International travel is a risk factor for extended-spectrum β -lactamase-producing *Enterobacteriaceae* acquisition in children: A case-case-control study in an urban US hospital. Travel Med Infect Dis 2016;14:568-571.
First description of this problem in the US. It was about time.

10. Worby CJ, Earl AM, Turbett SE et al. Acquisition and long-term carriage of multidrug-resistant organisms in US international travelers. *Open Forum Infect Dis* 2020 Dec 21;7(12):ofaa543. doi: 10.1093/ofid/ofaa543.
The problem with MDRO continues.
11. Van Duffel L, Yansouni CP, Jacobs J et al. Accuracy of C-reactive protein and procalcitonin for diagnosing bacterial infections among subjects with persistent fever in the tropics. *Open Forum Infect Dis* 2022; <https://doi.org/10.1093/ofid/ofac434>.
CRP appears to be a very useful tool in ruling-out bacterial infections.
12. McGuinness SL, Muhi S, Nadimpalli ML et al. Patient characteristics and antimicrobial susceptibility profiles of *Escherichia coli* and *Klebsiella pneumoniae* infections in international travellers: A GeoSentinel analysis. *J Travel Med* 2025;32:taae090.
Antimicrobial resistance is a global threat. International travellers have been contributors to its spread.
13. Patjas A, Kantele A. Travel to low- and middle-income countries and travellers' diarrhoea increase risk fo mismatching antimicrobial therapy for urinary tract infection. *J Travel Med* 2025;32:No.4 taaf025.
International travel, especially to low- and middle-income countries is a known risk factor for urinary tract infections and infections by resistant organisms.

Breastfeeding and Travel

1. Chen LH, Zeind C, Mackell S et al. Breastfeeding travelers: precautions and recommendations. *J Travel Med* 2009:1195-1982.
Everything you wanted to know about breastfeeding and travel. Great review.
2. Hagmann SHF, Rao SR, LaRocque RC et al. Travel characteristics and pretravel health care among pregnant of breastfeeding US women preparing for international travel. *Obstet Gynecol* 2017;130:1357-1365.
Very important paper addressing this "special" traveler frequently visiting high-risk areas.
3. Stirling J, Moore JE, Bell J, Millar BC. Baby bottle and other disinfection devices used during travel to low electrical voltage (110V) regions: A practical experiment with implications for baby, lactating mothers and patient safety. *Travel Med Infect Dis* 2021;40:101991.
A very important observation that "under-discussed" with mothers traveling with infants.

Communicable Diseases and Travel

1. Su Q, Zhang Y, Ma Y et al. Measles imported to the United States by children adopted from China. *Pediatrics* 2015;135:e1032-1037.
Important article that address a major problem with measles in unvaccinated medical-needs children coming from China.

2. Jost M, Luzi D, Metzler S, Miran B, Mutsch M. Measles associated with international travel in the region of the Americas, Australia and Europe, 2001-2013: a systematic review. *Travel Med Infect Dis* 2015;13:10-18.
A very nice analysis of measles transmission as relates to international travel.
3. Marienau KJ. Communicable disease X (Ebola, MERS, TB, measles...)-Coming soon to a neighborhood near you? Lessons learned about communicable disease and air travel. *Travel Med Infect Dis* 2015;13:1-5.
Air travel and communicable diseases: a perfect storm. A must read.
4. Hagmann SHF, Christenson JC. Measles and the risk posed by international travelers at the time of elimination or post-elimination. *Travel Med Infect Dis* 2015;13:1-2.
Importation of measles continues to be a problem. Another must read.
5. Olson D, Birkholz M, Gaensbauer JT, Asturias EJ, Todd JK. Analysis of the Pediatric Health Information System Database as a surveillance tool for travel-associated infectious diseases. *Am J Trop Med Hyg* 2015;92:1067-1069.
A new tool for the surveillance of travel-related infections in children.
6. Sotir MJ, Esposito DH, Barnett ED et al. Measles in the 21st century, a continuing preventable risk to travelers: data from the GeoSentinel Global Network. *Clin Infect Dis* 2016;62:210-212.
Measles remains a major threat to unvaccinated travelers.
7. Yezli S. The threat of meningococcal disease during the Hajj and Umrah mass gatherings: A comprehensive review. *Travel Med Infect Dis* 2018;24:51-58.
As stated, a nicely-done comprehensive review.

COVID-19

1. Rodriguez-Morales, AJ, Cardona-Ospina JA, Gutiérrez-Campo E et al. Clinical, laboratory and imaging features of COVID-19: A systematic review and meta-analysis. *Trav Med Infect Dis* 2020;34:101623.
Excellent, comprehensive summary of current knowledge.
2. Schwartz KL, Murti M, Finkelstein M et al. Lack of COVID-19 transmission on an international flight. *CMAJ* 2020;192:e410.
No transmission in a flight from China to Toronto, Canada.
3. Barnett A. COVID-19 risk among airline passengers: Should the middle seat stay empty? *Medrxiv* 2 August 2020.
What is the risk of acquiring COVID-19 when flying in a full plane? Check it out.
4. Hoehl S, Karaca O, Kohmer N et al. Assessment of SARS-CoV-2 transmission on an international flight and among a tourist group. *JAMA Network Open* 2020;3:e2018044.
Nicely done study. Two likely SARS-CoV-2 appeared to occur on this flight.

5. Khanh NC, Thai PQ, Quach H-L, et al. Transmission of severe acute respiratory syndrome coronavirus 2 during long flight. *Emerg Infect Dis*. 2020 Nov [Epub 18 Sep 2020].
Another in-flight exposure. This lead to many cases.
6. Jutzeler CR, Bourguignon L, Weis CV et al. Comorbidities, clinical signs and symptoms, laboratory findings, imaging features, treatment strategies, and outcomes in adult and pediatric patients with COVID-19: A systematic review and meta-analysis. *Travel Med Infect Dis* 2020;37:101825.
An extensive review of COVID-19.
7. Swadi T, Geoghegan JL, Devine T et al. Genomic evidence of in-flight transmission of SARS-CoV-2 despite predeparture testing. *Emerg Infect Dis* 2021;27:687-693.
Formal publication. Pre-flight testing will not prevent all in-flight transmission.
8. Ahmed W, Bivins A, Simpson SL et al. Wastewater surveillance demonstrates high predictive value for COVID-19 infection on board repatriation flights to Australia. *Environ Int* 2022;158:106938.
A very interesting paper. Examining wastewater on flights does not sound like fun. However, it may provide useful information on the introduction of COVID-19 in areas with lower endemic rates.

Dermatologic Conditions Associated with Travel

1. Juckett G. Infections, dermatologic conditions in the returned pediatric traveler. *Pediatr Ann* 2011;40:362-367.
Nice review
2. Neumayr A, Hatz C, Blum J. Not to be missed! Differential diagnoses of common dermatological problems in returning travellers. *Travel Med Infect Dis* 2013;11:337-349.
This review is written in a very useful manner that will assist all of us in assessing travelers returning with skin conditions.
3. Kamimura-Nishimura K, Rudikoff D, Purswani M, Hagmann S. Dermatological conditions in international pediatric travelers: epidemiology, prevention and management. *Travel Med Infect Dis* 2013;11:350-356.
Nice review of skin conditions in pediatric travelers.
4. Panin F, Venturini E, Oranges T et al. Skin diseases in internationally adopted children: a retrospective analysis in a tertiary care hospital in Tuscany, Italy, 2009-2016. *Travel Med Infect Dis* 2020;37:101679.
A nice review of skin manifestations observed in children.
5. Ju T, Vander Does A, Ingrassi G, Norton SA, Yosipovitch G. Tropical parasitic itch in returned travellers and immigrants from endemic areas. *JEADV* 2022;36:2279-2290.
An important travel-related problem.

Epidemiology of Travel-Acquired Infections

1. Harish V, Buajitti E, Burrows H et al. Geographic clustering of travel-acquired infections in Ontario, Canada, 2008-2020. PLoS Glob Public Health. 2023;3:e001608.
This is a great article. Addresses important epidemiologic factors related to travel medicine, infections, and prevention.
2. Semenza JC, KO AI. Waterborne diseases that are sensitive to climate variability and climate change. N Engl J Med 2023;389:2175-2187.
Climate changes will affect all of us. During travel and at home.
3. Parker S, Steffen R, Rashid H et al. Sacred journeys and pilgrimages: health risks associated with travels for religious purposes. J Travel Med 2024;taae122.
A nicely-done comprehensive review.

Gastrointestinal Problems [including travelers' diarrhea], typhoid, and hepatitis

1. Pitzinger B, Steffen R, Tschopp A. Incidence and clinical features of traveler's diarrhea in infants and children. Pediatr Infect Dis J 1991;10:719-723.
The best description of the epidemiology of traveler's diarrhea in children.
2. Ouyang-Latimer J, Jafri S, VanTassel A et al. In vitro antimicrobial susceptibility of bacterial enteropathogens isolated from international travelers to Mexico, Guatemala, and India from 2006 to 2008. Antimicrob Agents Chemother 2011;55:874-878.
A must read if you discuss with travelers the benefits of antimicrobial agents for the prevention and treatment of traveler's diarrhea.
3. Eren M, Dinleyici EC, Vandenplas Y. Clinical efficacy comparison of *Saccharomyces boulardii* and yogurt fluid in acute non-bloody diarrhea in children: a randomized, controlled, open label study. Am J Trop Med Hyg 2010;82:488-491.
Probiotics appear to be beneficial in the treatment of acute non-bloody diarrhea in children.
4. DuPont HL, Galler G, Garcia-Torres F et al. Travel and traveler's diarrhea in patients with irritable bowel syndrome. Am J Trop Med Hyg 2010;82:301-305.
Travel-related acute diarrhea worsens the symptoms of patients with IBS.
5. Jiang Z-D, DuPont HL, Brown EL et al. Microbial etiology of traveler's diarrhea in Mexico, Guatemala, and India: importance of enterotoxigenic *Bacteroides fragilis* and *Acrobacter* species. J Clin Microbiol 2010;48:1417-1419.
"Newly-recognized" enteric pathogens in traveler's diarrhea.
6. Powell CVE, Priestley SJ, Young S, Heine RG. Randomized clinical trial of rapid versus 24-hour rehydration for children with acute gastroenteritis. Pediatrics 2011;128:e771.
Nasogastric tube rehydration may be needed for young infants with acute gastroenteritis. This study compares a rapid regimen versus a standard slower regimen. Interesting findings.

7. Mondal D, Minak J, Alam M et al. Contribution of enteric infection, altered intestinal barrier function, and maternal malnutrition to infant malnutrition in Bangladesh. *Clin Infect Dis* 2012;54:185-192.
While it is not a surprise to most, this study demonstrates the relationship between enteric infections, intestinal barrier disruption and malnutrition.
8. Olson CK, Blum LS, Patel KN et al. Community case management of childhood diarrhea in a setting with declining use of oral rehydration therapy: findings from cross-sectional studies among primary household caregivers, Kenya, 2007. *Am J Trop Med Hyg* 2011;85:1134-1140.
While the use of ORS is known to be beneficial for children with diarrhea, its use still faces challenges in some countries.
9. Blum LS, Oria PA, Olson CK et al. Examining the use of oral rehydration salts and other oral rehydration therapy for childhood diarrhea in Kenya. *Am J Trop Med Hyg* 2011;85:1126-1133.
The use of ORS still faces challenges in some countries. In some countries, caregivers and health care workers need to be better educated on its benefits and to best utilize them.
10. Pantenburg B, Ochoa TJ, Ecker L, Ruiz J. Short report: use of commercially available oral rehydration solutions in Lima, Peru. *Am J Trop Med Hyg* 2012;86:922-924.
ORSs are under-utilized. Many homemade ORS are inappropriately prepared.
11. Ross AGP, Olds GR, Cripps AW et al. Enteropathogens and chronic illness in returning travelers. *N Engl J Med* 2013;368:1817-1825.
Excellent, comprehensive review. Nice summary table.
12. Verghese VP, Robinson JL. A systematic review of hepatitis E virus infection in children. *Clin Infect Dis* 2014;59:689-697.
This is a much awaited-topic that needed review.
13. Henriey D, Delmont J, Gautret P. Does the use of alcohol-based hand gel sanitizer reduce travellers' diarrhea and gastrointestinal upset?: A preliminary survey. *Travel Med Infect Dis* 2014;12:494-498.
It appears it does. Good to know.
14. Larsen CS. Re-thinking prevention and treatment of travelers' diarrhea-time for a change? *Travel Med Infect Dis* 2015;13:211-212.
First of two thought-provoking editorials on antibiotics for TD. See article 5 in Bacterial Infections and Colonization Section.
15. Kantele A. A call to restrict prescribing antibiotics for travellers' diarrhea-travel medicine practitioners can play an active role in preventing the spread of antimicrobial resistance. *Travel Med Infect Dis* 2015;13:213-214.

Second of two thought-provoking editorials on antibiotics for TD. See article 5 in Bacterial Infections and Colonization Section.

16. Kittittrakul C, Lawpoolsri S, Kusolsuk T et al. Traveler's diarrhea in foreign travelers in Southeast Asia: a cross-sectional survey study in Bangkok, Thailand. *Am J Trop Med Hyg* 2015;93:485-490.
Good article on the epidemiology of TD in this region.
17. Ballard SB, Saito M, Mirelman AJ, Bern C, Gilman RH. Tropical and travel-associated norovirus: current concepts. *Curr Opin Infect Dis* 2015;28:408-416.
Excellent review of an important and rising cause (but still underdiagnosed) of diarrhea disease among travelers.
18. Kantele A, Mero S, Kirveskari J, Lääveri T. Increased risk for ESBL-producing bacteria from co-administration of loperamide and antimicrobial drugs for traveler's diarrhea. *Emerg Infect Dis* 2016;22:117-120.
Loperamide only may not be a bad idea for older children with TD.
19. Soriano-Arandes A, García-Carrasco E, Serre-Delcor N et al. Travelers' diarrhea in children at risk. An observational study from a Spanish database. *Pediatr Infect Dis J* 2016;35:392-395.
An interesting study from Spain. Giardiasis was the most common gastrointestinal disorder among pediatric travelers. Longer duration of travel?
20. Lääveri T, Sterne J, Rombo L, Kantele A. Systematic review of loperamide: no proof of antibiotics being superior to loperamide in treatment of mild/moderate travellers' diarrhoea. *Travel Med Infect Dis* 2016;14:299-312.
No further need for antibiotics? You decide.
21. Barrett J, Brown M. Travellers' diarrhoea. *BMJ* 2016;353:i1937 doi: 10.1136/bmj.i1937.
Nice review. Good tables.
22. Esteban Carretero J, Durbán Reguera FD, López-Argueta Alvarez S, López Montes J. A comparative analysis of response to ORS (oral dehydration solution) vs. ORS + gelatin tannate in two cohorts of pediatric patients with acute diarrhea. *Rev Esp Enferm Digest* 2009;101:41-48.
Another alternative to antibiotic therapy?
23. Ashkenazi S, Schwartz E, O'Ryan M. Travelers' diarrhea in children: what have we learnt? *Pediatr Infect Dis J* 2017;35:698-700.
Nice short review
24. Hagmann SHF, LaRocque RC, Ryan ET. Preparing pediatric international travelers for travelers' diarrhea. Insights from the Global TravEpiNet. *Pediatr Infect Dis J* 2017;36:242-243.
Some additional data on pediatric travelers' diarrhea.

25. Jennings MC, Tilley DH, Ballard SB et al. Case-case analysis using 7 years of travelers' diarrhea surveillance data: preventive and travel medicine applications in Cusco, Perú. *Am J Trop Med Hyg* 2017;96:1097-1106.
Seven years of prospective surveillance data on TD for this region. Careful with the chichi.
26. Riddle MS, Connor BA, Beeching NJ et al. Guidelines for the prevention and treatment of travelers' diarrhea: a graded expert panel report. *J Travel Med* 2017;24 [Suppl 1]:S2-S19.
Excellent well-written guidelines. However, no pediatric recommendations.
27. Tribble DR. Resistant pathogens as causes of traveller's diarrhea globally and impact(s) on treatment failure and recommendations. *J Travel Med* 2017;24 [Suppl 1]:S6-S12.
Excellent review on resistant among enteric pathogens.
28. Stoney RJ, Han PV, Barnett ED et al. Travelers' diarrhea and other gastrointestinal symptoms among Boston-area international travelers. *Am J Trop Med Hyg* 2017;96:1388-1393.
Important paper. TD during travel is a major disruptor of travel activities.
29. Shane AL, Mody RK, Crump JA et al. 2017 Infectious Diseases Society of America clinical practice guidelines for the diagnosis and management of infectious diarrhea. *Clin Infect Dis* 2017;65:1963-1973.
Core knowledge on diagnosis and management. Concise section on TD.
30. Riddle MS, Connor P, Fraser J et al. Trial evaluating ambulatory therapy of traveler's diarrhea (TrEAT TD) study: a randomized controlled trial comparing 3 single-dose antibiotic regimens with loperamide. *Clin Infect Dis* 2017;65:2008-2017.
Important study. Military personnel. Useful data. Supports the prescribing practice of many "civilian" travel specialists. Single-dose azithromycin, levofloxacin, rifaximin with loperamide were equally effective.
31. Hitch G, Fleming N. Antibiotic resistance in traveller's diarrhoeal disease, an external perspective. *J Travel Med* 2018;25 (suppl 1):S27-S37.
Resistance is a serious problem. Is it time to find alternatives to antibiotics as prophylaxis?
32. McFarland LV, Goh S. Are probiotics and prebiotics effective in the prevention of travellers' diarrhea: a systematic review and meta-analysis. *Travel Med Infect Dis* 2019;27:11-19.
Are they effective? More studies are needed.
33. Freedman SB, Soofi SB, Willan AR et al. Oral ondansetron administration to dehydrated children in Pakistan: A randomized clinical trial. *Pediatrics* 2019;144:e20192161.
A related discussion on its use occurred in Washington DC at CISTM. Here perhaps in an answer. It can be beneficial.

34. Watkins LKF, Winstead A, Appiah GD et al. Update on extensively drug-resistant *Salmonella* serotype typhi infections among travelers to or from Pakistan and report of ceftriaxone-resistant *Salmonella* serotype typhi infection among travelers to Iraq-United States, 2018-2019. *MMWR* 2020;69:618-622.
The spread of these XDR strains who create quite a havoc as it would limit therapeutic options.
35. Ashkenazi S, Schwartz E. Traveler's diarrhea in children: New insights and existing gaps. *Trav Med Infect Dis* 2020; 34:101503.
Nicely done comprehensive review.
36. Leshem E. Antibiotics for travelers' diarrhea in children?: To SBET or not to SBET? *Trav Med Infect Dis* 2020;34:101681.
Good discussion on antibiotic use for traveler's diarrhea.
37. Meyer Sauter PM, Stevens MJA, Paioni P et al. Siblings with typhoid fever: An investigation of intrafamilial transmission, clonality, and antibiotic susceptibility. *Trav Med Infect Dis* 2020;34:101498.
Interesting case report.
38. Niño-Serna LF, Acosta-Reyes J, Veroniki AA, Florez ID. Antiemetics in children with acute gastroenteritis: A meta-analysis. *Pediatrics* 2020;145:e20193260.
Ondansetron appears to be beneficial in controlling vomiting and avoiding hospitalizations. Some travel medicine specialists prescribe for travelers.
39. Gandhi AR, Rao SR, Chen LH et al. Prescribing patterns of antibiotics for the self-treatment of traveler's diarrhea in Global TravEpiNet, 2009-2018. *Open Forum Infect Dis* 2020, publish online, November 2020.
Antibiotics are frequently prescribed, but the trend appears to be decreasing. Fluoroquinolones are being prescribed less.
40. Hagmann SHF, Angelo KM, Huits R et al. Epidemiological and clinical characteristics of international travelers with enteric fever and antibiotic resistance profiles of their isolates: a GeoSentinel analysis. *Antimicrob Agents Chemother* 2020;64:e01084-20.
Great paper. Outstanding analysis of the scope of antimicrobial resistance of enteric fever pathogens throughout the world. A must read.
41. Lago K, Telu K, Tribble D et al. Doxycycline malaria prophylaxis impact on risk of travelers' diarrhea among international travelers. *Am J Trop Med Hyg* 2020;103:1864-1870.
Double benefit when using doxycycline? Prevent malaria and less TD?
42. Carey ME et al. Spontaneous emergence of azithromycin resistance in independent lineages of *Salmonella* Typhi in Northern India global child health. *Clin Infect Dis* 2021, pre-print online, February 5, 2021.

This spontaneous emergence of resistance may eventually affect our ability to use azithromycin for treatment. A main reason for vaccinating travelers against typhoid fever.

43. Centers for Disease Control and Prevention. Extensively drug-resistant *Salmonella* Typhi infections among U.S. residents without international travel. Health Alert Network Health Advisory, February 12, 2021.
A problem no longer exclusive of travelers. Now we need to look in our own backyards.
44. Masuet-Aumatell C, Atouguia J. Typhoid fever infection-Antibiotic resistance and vaccination strategies: A narrative review. Travel Med Infect Dis 2021;40:101946.
An excellent review.
45. Lääveri T, Antikainen J, Mero S et al. Bacterial, viral and parasitic pathogens analysed by qPCR: Findings from a prospective study of travellers' diarrhea. Travel Med Infect Dis 2021;40:101957.
Very interesting findings. Overuse of antibiotics in travelers with viral gastroenteritis. Likely related to the fact that norovirus was associated with severe symptoms?
46. Ara-Montojo MF, Bustamante J, Sainz T et al. Intestinal giardiasis in children: Five years' experience in a reference unit. Travel Med Infect Dis 2021;42:1020832.
Very useful paper. Discusses therapeutic failures as related to metronidazole dosing. If you care for internationally adopted children, a must read.
47. Kontoni VS, Lepage P, Hainaut M, Miendje Deyi VY, Maatheus W, Pace D. Paediatric enteric fever in Brussels: A case series over 16 years. Eur J Pediatr 2022;181:1151-1158.
Diagnostic challenges still plague clinicians. Travel to high-risk regions remain major risk factor.
48. Gambushe SM, Zishiri OT, El Zowalaty ME. Review of *Escherichia coli* O157:H7 prevalence, pathogenicity, heavy metal and antimicrobial resistance, African perspective. Infect Drug Resist 2022;15:4645-4673.
A needed assessment of the pathogen outside of high-resource countries.
49. Posen HJ, Wong W, Farrar DS et al. Travel-associated extensively drug-resistant typhoid fever: a case series to inform management in non-endemic regions. J Travel Med 2023;1-9, <https://doi.org/10.1093/jtm/taac086>
A reminder that vaccination is important for travelers visiting high-risk regions.
50. Ford L, Shah HJ, Eikmeier D et al. Antimicrobial-resistant nontyphoidal *Salmonella* infection following international travel-United States, 2018-2019. J Infect Dis 2023;228:533-541.
International travel can be risky. Resistant bacteria can be travel companion.
51. Gaspar C, Rios P, Moeller TD. Landscape of bacterial enteric disease and traveler's diarrhea in South America. J Infect Dis 2025;231[S1]:S10-S18.

An important article. Resistance is a serious problem in Latin America. How to prevent it?

52. Toriro R, Williams CT, Wooding DL et al. Syndromic diagnosis for travelers' diarrhea: Near-patient field-expanded testing in resource-limited settings. *Open Forum Infect Dis* 2016; Feb 17;13(3):ofag076. doi: 10.1093/ofid/ofag076.
The technology and clinical utility is still evolving. Clinical reasoning is still needed when interpreting the results.

Global Child Health

1. Maitland K, Kiguli S, Opoka RO et al. Mortality after fluid bolus in African children with severe infection. *N Engl J Med* 2011;364:2483-2495.
Very interesting study. Have we been doing things wrong for decades?
2. Townley TA. Medical work in developing countries: how to approach a global health experience. *Pediatr Ann* 2011;40:376-380.
A very timely review article. There is great interest in global health.
3. Deepak M. Kamat and Philip R. Fischer (eds). *Textbook of Global Child Health*, Second Edition, American Academy of Pediatrics, 2016.
A very comprehensive book that covers a wide array of topics pertaining to global health, and travel and geographic medicine. A must-have selection for your library.
4. McMichael AJ. Globalization, climate change and human health. *N Engl J Med* 2013;368:1335-1343.
A concise review on the topic.
5. Jani IV, Peter TF. How point-of-care testing could drive innovation in global health. *N Engl J Med* 2013;368:2319-2324.
6. *Some of you may be involved in research and treatment programs in countries with limited resources. This is an excellent "editorial" that discusses how POC testing may be revolutionizing how we can provide care in these environments. A must read.*
7. Iroh Tam PY, Obaro SK, Storch G. Challenges in the etiology and diagnosis of acute febrile illness in children in low- and middle-income countries. *J Pediatr Infect Dis Soc* 2016;5:190-205.
Excellent review.
8. Pitt MB, Gladding SP, Butteris SM. Using simulation for global health preparation. *Pediatrics* 2016;137,e20154500.
Preparing health care professionals for a global health experience is important. Simulation is an additional tool can be utilized.
9. Lasker, JN. *Hoping to Help. The Promises and Pitfalls of Global Health Volunteering*. Cornell University Press, 2016.
A must read book. Eye-opening.

10. Stone GS, Olson KR. The ethics of medical volunteerism. *Med Clin N Am* 2016;100:237-246.
Very nice review on the topic. Another must read.
11. Butteris SM, Leyenaar JK, Leslie LK et al. International experience of US pediatricians and level of comfort caring for immigrant children and children traveling internationally. *J Pediatr* 2020;225:124-131.
Prior international experience among pediatricians enhance their ability to care for immigrant children and pediatric travelers.

High-Altitude Illness & Fitness to Fly

1. Yaron M, Waldman N, Niermeyer S et al. The diagnosis of acute mountain sickness in preverbal children. *Arch Pediatr Adolesc Med* 1998;152:683-687.
Children are not more susceptible to altitude sickness.
2. Bloch J, Duplain H, Rimoldi SF et al. Prevalence and time course of acute mountain sickness in older children and adolescents after rapid ascent to 3450 meters. *Pediatrics* 2009;123:1-5.
Healthy nonacclimatized children and adolescent can tolerate well high altitudes [up to 3450 meters].
3. Rexhaj E, Garcin S, Rimoldi SF et al. Reproducibility of acute mountain sickness in children and adults: A prospective study. *Pediatrics* 2011;127:e1445-e1448.
A very interesting study. A must read.
4. Duster MC, Derlet MN. High-altitude illness in children. *Pediatr Ann* 2009;38:218-223.
A concise review of the topic.
5. Ritchie ND, Baggott AV, Todd WTA. Acetazolamide for the prevention of acute mountain sickness-a systematic review and meta-analysis. *J Travel Med* 2012;19:298-307. See editorial: Basnyat B. Acclimatizing with acetazolamide. *J Travel Med* 2012;19:281-283.
Very good analysis. Confirms that lower doses are as effective as higher doses.
6. Hackett PH, Roach RC. High-altitude illness. *N Engl J Med* 2001;345:107-114.
An excellent review.
7. Bärtsch P, Swenson ER. Acute high-altitude illnesses. *N Engl J Med* 2013;368:2294-2304.
Another nice review.
8. Zafren K. Prevention of high altitude illness. *Travel Med Infect Dis* 2014;12:29-39.
Good sections on non-pharmacologic and non-recommended methods of preventing AMS.

9. Davis C, Hackett P. Advances in the prevention and treatment of high altitude illness. *Emerg Med Clin N Am* 2017;35:241-260.
Good updated review.
10. Ryan S, Dudley N, Green M, Pruitt C, Jackman G. Altered mental status at high altitude. *Pediatrics* 2018;142:e20173973.
Interesting case reports of patients with cerebral palsy with baclofen pump overinfusion as a consequence of high altitude. Interesting read.
11. Israëls J, Nagelkerke AF, Markhorst DG, van Heerde M. Fitness to fly in the paediatric population, how to assess and advice. *Eur J Pediatr* 2018;177:633-639.
Nice overview. Frequent question.
12. Liptzin DR, Abman SH, Giesenhagen A, Ivy DD. An approach to children with pulmonary edema at high altitude. *High Alt Med Biol* 2018;19:91-98.
Interesting findings. HAPE and heart disease and pulmonary hypertension.
13. Luks AM, Auerbach PS, Freer L et al. Wilderness Medical Society Practice Guidelines for the Prevention and Treatment of Acute Altitude Illness: 2019 Update. *Wilderness Environ Med* 2019 Dec;30(4S):S3-S18.
Latest guidelines by experts in the field. A must have reference.
14. Luks AM, Hackett PH. Medical conditions and high-altitude travel. *N Engl J Med* 2022;386:364-373.
Excellent and necessary review.
15. Rieger M, Algaze I, Rodriguez-Vazquez A et al. Kids with altitude: Acute mountain sickness and changes in body mass and total body water in children travelling to 3800 m. *Wilderness Environ Med* 2022;33:33-42.
Important research. More AMS in children? Are we discussing this with our parents?
16. Herberg U, Knies R, Müller N, Breuer J. Altitude exposure in pediatric pulmonary hypertension-are we ready for [flight] recommendations? *Cardiovasc Diagn Ther* 2021;11:1122-1136.
Nicely done review article, specific for pediatric with recommendations for children with pulmonary hypertension.
17. Levin JC, Sheils CA, Hayden LP. Pre-flight hypoxemia challenge testing in bronchopulmonary dysplasia. *Pediatrics* 2023;152:e2022061001.
If you anticipate travelers with BPD, this is a must read.
18. Lagowski W, Grodzka O, Domitrz I. Atypical neurological symptoms at high altitude: A systematic literature review. *Travel Med Infect Dis* 2025;66:102867.
Interesting paper. Atypical symptoms associated with high altitude such as speech, memory and disturbances have been described. This may have limited relevance to children, but we should all be attentive.

Hygiene

1. Rosa G, Clasen T. Estimating the scope of household water treatment in low- and medium-income countries. *Am J Trop Med Hyg* 2010;82:289-300.
Household treatment of water to improve water quality and prevent disease is widely practiced in many high-risk countries. The practice is widespread in the Western Pacific and less so in Eastern Mediterranean and African countries. Boiling water is the most common method used.
2. Rosa G, Miller L, Clasen T. Microbiological effectiveness of disinfecting water by boiling in rural Guatemala. *Am J Trop Med Hyg* 2010;82:473-477.
Great article. While boiling water improves the microbiological quality of water, boiled and stored drinking water is not always free of fecal contamination.

Immunizations

1. Greenwood CS, Greenwood NP, Fischer PR. Immunization issues in pediatric travelers. *Expert Rev Vaccines* 2008;7:651-661.
Good review on vaccine issues for pediatric travelers.
2. Rahier JF, Moutschen M, Van Gompel A et al. Vaccinations in patients with immunemedicated inflammatory diseases. *Rheumatol* 2010;49:1815-1827.
Practitioners are frequently asked to provide pre-travel recommendations for high-risk patients on immunosuppressive agents. This is a good review for patients with autoimmune disorders.
3. Kaltenböck A, Dubischar-Kastner K, Schuller E et al. Immunogenicity and safety of IXIARO® (IC51) in a phase II study in healthy Indian children between 1 and 3 years of age. *Vaccine* 2010;28:834-839.
The Ixiaro JEV appears to be safe and immunogenic in young children.
4. Duggan ST, Plosker GL. Japanese encephalitis vaccine (inactivated, absorbed) [IXIARO®]. *Drugs* 2009;69:115-122.
Good summary on the new JEV vaccine.
5. Centers for Disease Control. Update on Japanese encephalitis vaccine for children-United States, May 2011. *MMWR* 2011;60:664-665.
Information on dosing for young children; and availability of vaccine abroad.
6. Shin S, Desai SN, Sah BK, Clemens JD. Oral vaccines against cholera. *Clin Infect Dis* 2011;52:1343-1349.
A nice review.
7. Centers for Disease Control and Prevention (CDC). Transmission of yellow fever vaccine virus through breast feeding – Brazil, 2009. *MMWR* 2010;59:130-132.
Vaccination of a lactating mother may pose a risk to infant.

8. Kuhn S, Twele-Montecinos L, MacDonald J et al. Case report: probable transmission of vaccine strain of yellow fever virus to an infant via breast milk. *CMAJ* 2011;183: e243-e245.
Confirmation. Vaccination of a lactating mother poses infant at risk of acquiring vaccine-derived yellow fever.
9. Rongkavilit C. Immunization for pediatric international travelers. *Pediatr Ann* 2011;40:346-350.
A succinct review of the topic.
10. Jentes ES, Pomeroy G, Gershman MD et al. The revised global yellow fever risk map and recommendations for vaccination, 2010: consensus of the informal WHO Working Group on Geographic Risk for Yellow Fever. *Lancet Infect Dis* 2011;11:622-631.
Yellow fever vaccination recommendations have changed this past year. This is a thorough discussion of the rationale and consensus.
11. Klein NP, Reisinger KS, Johnston W et al. Safety and immunogenicity of a novel quadrivalent meningococcal CRM-conjugate vaccine given concomitantly with routine vaccinations in infants. *Pediatr Infect Dis J* 2012;31:74-71.
MenACWY-CRM was found to be immunogenic in young infants. Substantial immunity was achieved after 3 doses given at 2, 4, and 6 months of age.
12. Thomas RE, Lorenzetti DL, Spragins W et al. The safety of yellow fever vaccine 17D or 17DD in children, pregnant women, HIV+ individuals, and older persons: systematic review. *Am J Trop Med Hyg* 2012;86:359-372.
This systematic review shows that serious adverse events are exceedingly rare in infants and children receiving yellow fever vaccines.
13. Warrell MJ. Current rabies vaccines and prophylaxis schedules: preventing rabies before and after exposure. *Travel Med Infect Dis* 2012;10:1-15.
Excellent review. Everything you wanted to know about rabies vaccines and preventive strategies against rabies.
14. Wahid R, Simon R, Zafar SJ et al. Live oral typhoid vaccine Ty21a induces cross-reactive humoral immune responses against *Salmonella enterica* serovar Paratyphi A and *S. Paratyphi B* in humans. *Clin Vaccine Immunol* 2012;19:825-834.
We frequently tell travelers that the oral typhoid vaccine may confer cross-protection against paratyphoid. This is the recent research in support.
15. Pakkanen SH, Kantele JM, Kantele A. Cross-reactive gut-directed immune response against *Salmonella enterica* serovar Paratyphi A and B in typhoid fever and after oral Ty21a typhoid vaccination. *Vaccine* 2012;30:6047-6053.
We frequently tell travelers that the oral typhoid vaccine may confer cross-protection against paratyphoid. This is the recent research in support.
16. Raczniak GA, Bulkow L, Bruce MG et al. Long-term immunogenicity of hepatitis A vaccine in Alaska 17 years after initial childhood series. *J Infect Dis* 2013;207:493-496.

Study shows that hepatitis A antibodies are present up to 17 years after childhood immunization.

17. Advisory Committee Statement Committee to Advise on Tropical Medicine and Travel (CATMAT). Statement for travelers and yellow fever. *Canada Comm Dis Rep* 2013;39:ACS-2.
Good source of current information on yellow fever vaccination.
18. Grabenstein JD. What the world's religions teach, applied to vaccines and immune globulins. *Vaccine* 2013;31:2011-2023.
An excellent review. This is a must-read.
19. van den Bijllaardt W, Siers HM, Timmerman-Kok C et al. Seroprotection after hepatitis A vaccination in patients with drug-induced immunosuppression. *J Travel Med* 2013;20:278-282.
Don't wait for the last moment to vaccinate against hepatitis A. In the immunosuppressive host, it appears to be less protective.
20. Rubin LG, Levin MJ, Ljungman P et al. 2013 IDSA clinical practice guideline for vaccination of the immunocompromised host. *Clin Infect Dis* 2014;58:e44-e100.
A must-have resource if you are seeing travelers who happen to be immunocompromised.
21. Lafond KE, Englund JA, Tam JS, Bresee JS. Overview of influenza vaccines in children. *J Pediatr Infect Dis Soc* 2013;2:368-378.
New influenza vaccines appeared in the market this year. This is a good review.
22. Desai SN, Kamat D. Closing the global immunization gap: delivery of lifesaving vaccines through innovation and technology. *Pediatr Rev* 2014;35:332.
Excellent article. Nice summary of our future.
23. Wallace GS, Seward JF, Pallansch MA. Interim CDC guidance for polio vaccination for travel to and from countries affected by wild poliovirus. *MMWR* 2014;63:591-593.
This article summarizes the current international recommendations for travelers visiting countries with wild poliovirus transmission.
24. Mahon BE, Newton AE, Mintz ED. Effectiveness of typhoid vaccination in US travelers. *Vaccine* 2014;32:3577-3579.
Analysis of typhoid vaccine effectiveness. Estimated to be 80% for travelers to SE Asia.
25. Deshpande BR, Rao SR, Jentes ES et al. Use of Japanese encephalitis vaccine in US travel medicine practices in Global TravEpiNet. *Am J Trop Med Hyg* 2014;91:694-698.
Authors found that high-risk travelers are not receiving JEV vaccine. Why?
26. Villar L, Dayan GH, Arredondo-García JL et al. Efficacy of tetravalent dengue vaccine in children in Latin America. *N Engl J Med* 2015;372:113-123.
Vaccine was shown to be efficacious in preventing severe dengue disease.

27. García Garrido HM, Wieten RW, Grobusch MP, Goorhuis A. Response to hepatitis A vaccination in immunocompromised travelers. *J Infect Dis* 2015;212:378-385.
An important article that deserves review.
28. Martins RM, Pavao ALB, de Oliveira PMN et al. Adverse events following yellow fever immunization: report and analysis of 67 neurological cases in Brazil. *Vaccine* 2014;32:6676-6682.
If you administer yellow fever vaccines to children, you should read this article.
29. Seligman SJ. Risk groups for yellow fever vaccine-associated viscerotropic disease (YEL-AVD). *Vaccine* 2014;32:5769-5775.
Are young children at risk of YEL-AVD? If you administer yellow fever vaccines to children, you should read this article.
30. Pakkanen SH, Kantele JM, Savolainen LE et al. Specific and cross-reactive immune response to oral *Salmonella Typhi* Ty21a and parenteral Vi capsular polysaccharide typhoid vaccines administered concomitantly. *Vaccine* 2015;33:451-458.
The future of typhoid fever vaccination? Interesting.
31. Rabe IB, Miller ER, Fischer M, Hills SL. Adverse events following vaccination with an inactivated, Vero cell culture-derived Japanese encephalitis vaccine in the United States, 2009-2012. *Vaccine* 2015;33:708-712.
While this article looks at AEs in adults, it provides needed data on the safety of the JE-VC vaccine.
32. Kantele A. Should close contacts of returning travelers with typhoid fever be protected by vaccination? *Vaccine* 2015;33:1419-1421.
Interesting clinical question. Read the article and make your own decision?
33. Jelinek T, Burchard GD, Dieckmann S et al. Short-term immunogenicity and safety of an accelerated pre-exposure prophylaxis regimen with Japanese encephalitis vaccine in combination with a rabies vaccine: a phase III, multicenter, observer-blind study. *J Travel Med* 2015;22:225-231.
Complete JEV and rabies vaccination in ~8 days? A must read if you ever had the need for accelerated vaccination.
34. Theeten H, Van Herck K, Van Der Meeren O et al. Long-term antibody persistence after vaccination with a 2-dose Havrix™ (inactivated hepatitis A vaccine): 20 years of observed data, and long-term model-based predictions. *Vaccine* 2015;33:5723-5727.
Great vaccine. Protects a long time.
35. Paulke-Korinek M, Kollaritsch H, Kundi M et al. Persistence of antibodies six years after booster vaccination with inactivated vaccine against Japanese encephalitis. *Vaccine* 2015;33:3600-3604.
How soon do I need to repeat the JEV vaccine? This papers helps address the question.

36. Myers AL, Christenson JC. Approach to immunization for the traveling child. *Infect Dis Clin North Am.* 2015;29:745-757.
Updated review on travel vaccines for pediatric travelers.
37. Taddio A, McMurtry CM, Shah V et al. Reducing pain during vaccine injections: clinical practice guideline. *CMAJ* 2015;187:975-982.
Nice review on the topic. Basic solid article.
38. van der Maas NAT, Woudenberg SJ, Nicoline AT et al. Tolerability of early measles-mumps-rubella vaccination in infants aged 6–14 months during a measles outbreak in The Netherlands in 2013–2014. *J Infect Dis* 2016;213:1466-1471.
In case you were wondering. MMR is well tolerated in young infants starting at 6 months of age.
39. Butler S, Sutter D, Maranich A. Tolerability of Japanese encephalitis vaccine in pediatric patients. *J Pediatr Infect Dis Soc* 2017;6:149-152.
Good, needed data on the safety of JEV vaccine in children.
40. Olivera-Botello G, Coudeville L, Fanouillere K et al. Tetravalent dengue vaccine reduces symptomatic and asymptomatic dengue virus infections in healthy children and adolescents aged 2–16 years in Asia and Latin America. *J Infect Dis* 2016;214:994-1000.
More on dengue vaccine, specific for children.
41. Lammert SM, Rao SR, Jentes ES et al. Refusal of recommended travel-related vaccines among US international travellers in Global TravEpiNet. *J Travel Med* 2016;24:open access.
Lack of concern is currently the most common reason for vaccine refusal. Also in travel medicine.
42. Dubischar KL, Kadlecck V, Sablan Jr B, et al. Safety of the inactivated Japanese Encephalitis Virus vaccine IXIARO® in children – an open-label, randomized, active-controlled, phase 3 study. *Pediatr Infect Dis J* 2017;36:889-897.
Important information on JEV vaccine use in children.
43. Casey RM, Harris JB, Ahuka-Mundeke S, et al. Immunogenicity of fractional-dose vaccine during a yellow fever outbreak-final report. *N Engl J Med* 2019;381:444.
Important paper in the presence of large outbreaks around the world and shortage of yellow fever vaccine.
44. Jelinek T, Cromer MA, Cramer JP et al. Safety and immunogenicity of an inactivated Vero cell derived Japanese encephalitis vaccine (IXIARO®, JESPECT®) in a pediatric population in JE non-endemic countries: A uncontrolled, open-label phase 3 study. *Travel Med Infect Dis* 2018;22:18-24.
Vaccine is immunogenic in children. Safe as in adults.

45. Walker WL, Hills SL, Miller ER, Fischer M, Rabe IB. Adverse events following vaccination with an inactivated, Vero cell culture-derived Japanese encephalitis vaccine in the United States, 2012-2016. *Vaccine* 2018; 36:4369-4374.
Safe vaccine, especially in children.
46. Nelson NP, Link-Gelles R, Hofmeister MG et al. Update: recommendations of the Advisory Committee on Immunization Practices for use of hepatitis A vaccine for postexposure prophylaxis and for preexposure prophylaxis for international travel. *MMWR* 2018;67:1216-1220.
While many pediatric travel medicine specialists have been recommending it for a while, ACIP recommends using HAV for infants as young as 6 months of age when traveling to high-risk areas. No interference with MMR vaccination.
47. Vaccines for travelers. *Med Lett Drugs Ther* 2018;60:185-192.
Nice short updated review.
48. Casey RM, Harris JB, Ahuka-Mundeke S et al. Immunogenicity of fractional-dose vaccine during a yellow fever outbreak-final report. *N Engl J Med* 2019;381:444-454.
The future for yellow fever vaccine dosing? Useful for outbreak control. Pre-travel vaccination next?
49. Hills SL, Walter EB, Atmar RL, Fischer M. Japanese encephalitis vaccine: recommendations of the Advisory Committee on Immunization Practices. *MMWR* 2019;68(RR-2):1-33.
Newer recommendations on the use of JEV vaccine. You must read this one.
50. Shakya M, Colin-Jones R, Theiss-Nyland K et al. Phase 3 efficacy analysis of a typhoid conjugate vaccine trial in Nepal. *N Engl J Med* 2019;381:2209-2218.
Highly effective vaccine. Future use in young travelers?
51. Hyle EP, Rao SR, Bangs AC et al. Clinical practices for measles-mumps-rubella vaccination among US pediatric international travelers. *JAMA Pediatr* 2020;174:E194515.
This study demonstrates an undervaccinated group of travelers. Missed opportunities or misinformation? Perhaps both.
52. Domingo C, Fraissinet J, Ansah PO et al. Long-term immunity against yellow fever in children vaccinated during infancy: a longitudinal cohort study. *Lancet Infect Dis* 2019;19:1363-1370.
Young infants appear to lose their protection quickly. It appears that boosters are necessary.
53. Kareko BW, Booty BL, Nix CD et al. Persistence of neutralizing antibody responses among yellow fever virus 17D vaccines living in a nonendemic setting. *J Infect Dis* 2020;221:2018-2025.
~20% of vaccinees are unprotected 10 years postvaccination.

54. Furuya-Kanamori L, Dutton P, Leeb A et al. Adverse events following with combined vs concurrent monovalent hepatitis A and typhoid vaccines in children. *J Pediatr Infect Dis Soc* 2021;10:192-195.
This vaccine is commercially available in Australia. Appears to be safe.
55. Lopez-Medina E, Biswal S, Saez-Llorens X et al. Efficacy of a dengue vaccine candidate (TAK-003) in healthy children and adolescents 2 years after vaccination. *J Infect Dis* 2022;225:1521-1532.
Good protection against dengue, but some reduction in efficacy during second year.
56. Juan-Giner A, Kimathi D, Grantz KH et al. Immunogenicity and safety of fractional doses of yellow fever vaccines: a randomized, double-blind, non-inferiority trial. *Lancet* 2021;397:119-127.
Non-inferior to standard dosing. Good seroconversion following vaccination. A future option?
57. Vijayan V. Vaccines for international pediatric travelers. *Pediatr Clin N Am* 2022;69:171-184.
A comprehensive review.
58. Bangs AC, Gastañaduy P, Neilan AM et al. The clinical and economic impact of measles-mumps-rubella vaccinations to prevent measles importations from US pediatric travelers returning from abroad. *J Pediatr Infect Dis Soc* 2022;11:257-266.
Pretravel MMR vaccination of infant travelers is highly beneficial. Here is the evidence.
59. Rao AK, Briggs D, Moore SM et al. Use of modified preexposure prophylaxis vaccination schedule to prevent human rabies: Recommendations of the Advisory Committee on Immunization Practices-United States, 2022. *MMWR* 2022;71:619-627.
Useful breakdown of recommendations based on risk. There is a section that pertains to travelers who may be at risk.
60. Kling K, Domingo C, Bogdan C et al. Duration of protection after vaccination against yellow fever - systematic review and meta-analysis. *Clin Infect Dis* 2022;75:2266-2274.
After yellow fever vaccination, how long protection lasts? Perhaps boosters are not a bad idea, especially for the young ones.
61. Collins JP, Ryan ET, Wong KK et al. Cholera vaccine: recommendations of the Advisory Committee on Immunization Practices, 2022. *MMWR* 2022;71, 30 September 2022.
Recommendations for recently approved cholera vaccine in the US.
62. Hicken A, Jones P, Menon A, Rozek LS. Can endorsement by religious leaders move the needle on vaccine hesitancy? *Vaccine* 2024;42:918-923.
Very interesting paper. In summary, medical practitioners remain the best combatants against vaccine hesitancy.

63. Ouzounidou Z, Maltezou HC, Chrysoula K et al. Knowledge and attitudes of healthcare personnel about vaccinations of migrant and refugee children and adolescents. *J Migr Health* 2024;9:100219.
Vaccination of migrant and refugee children is important. We need to be familiar with guidelines.
64. Goujon C, Gougeon ML, Tondeur L et al. CHRONOVAC VOYAGEUR: A study of the immune response to yellow fever vaccine among infants previously immunized against measles. *Vaccine* 2017;6:6166-6171.
Yellow fever and measles-containing vaccine administered 1-27 days between each immunization did not interfere with immune response.
65. Freedman DO. A new non-live chikungunya vaccine for travellers. *J Travel Med* 2025;32:taaf039.
A much improved vaccine. Younger children now included.
66. Quach HQ, Ovsyannikova IG, Poland GA, Kennedy RB. Measles immunity gaps: Distinct serological profiles from the United States and India. *J Travel Med* 2025;32:taaf043.
A comparison of immunity profiles between two countries. Interesting perspective on risks.
67. Rodriguez-Valero N, Fletcher R, Simons H et al. UK healthcare worker hesitancy on the use of yellow fever vaccine in "precautionary groups." *J Travel Med* 2025;32:taaf030.
Survey suggests that some practitioners are nervous about giving yellow fever vaccine to travelers in the "precaution" groups.
68. Muruganandah V, Mills DJ, Lau CL, Furuya-Kanamori L. Barriers and enablers of pre-travel Bacillus Calmette Guèrin [[BCG] vaccination among Australian children. *J Travel Med* 2026;33:1,taaf125.
Cost, accessibility, availability and safety concerns influence high-risk children receiving the BCG vaccine. Same issues in the US and other countries.

Injury Prevention

1. Committee on Injury, Violence, and Poison Prevention, American Academy of Pediatrics. Child passenger safety. *Pediatrics* 2011;127:e1050-e1066.
Technical report on child passenger safety from the AAP. Specific recommendations on car seat use. In addition, there is a section pertaining to safety of children on commercial airlines.
2. Bahari M, Prunty N, Molloy EJ. Parent's attitudes towards infant safety during air travel. *Arch Dis Child* 2011;96:701.
Will parents pay for safety? Interesting survey results from Ireland. I wonder if the results would be different in other countries.
3. Baldwin A, Harris T, Davies G. Look right! A retrospective study of pedestrian accidents involving overseas visitors to London. *Emerg Med J* 2008;25:843-846.
Excellent study. Frequently mentioned at meetings.

4. Alves PM, Nerwich N, Rotta AT. In-flight injuries involving children on commercial airline flights. *Pediatr Emerg Care* 2019;35:687-691.
Important article. Another good reason for not allowing children sit on the aisle seats.
5. Russell K, Selci E, Piotrowski CC et al. Child injuries in land vehicles that do not require restraints. *Int J Inj Contr Saf Promot* 2020 Jun 15;1-8.
Serious injuries are preventable if restraints are available.
6. Jacob-Leonce M, Leonce JG. Analysis of the non-natural deaths of US citizen while abroad. *J Travel Med* 2026;33:1,taaf063.
Very comprehensive analysis. Vehicular deaths are top of the list. Others are quiet telling as well. Must read article.

Insect Bite Prevention

1. Goodyear LI, Croft AM, Frances SP et al. Expert review of the evidence base for arthropod bite avoidance. *J Travel Med* 2010;17:182-192.
Good summary of the existing data for the prevention of arthropod bites.
2. Katz TM, Miller JH, Hebert AA. Insect repellents: historical perspectives and new developments. *J Am Acad Dermatol* 2008;58:865-871.
A good discussion of the various types of insect repellents.
3. Schreck CE, Haile DG, Kline DL. The effectiveness of permethrin and DEET, alone or in combination, for protection against *Aedes taeniorhynchus*. *Am J Trop Med Hyg* 1984;33:725-730.
Permethrin + DEET are highly effective in preventing mosquito bites, and is frequently recommended by us. This is a core study in which the recommendation is based.
4. Goodyer L, Song J. Mosquito bite-avoidance attitudes and behaviors in travelers at risk of malaria. *J Travel Med* 2014;21:33-38.
While this article provides insights into the attitudes and behaviors of adults regarding bite-protection, it provides some eye-opening information that benefits us all.
5. Revay EE, Junnila A, Xue RD et al. Evaluation of commercial products for personal protection against mosquitoes. *Acta Trop* 2013;125:226-230.
Do clip-on diffusers, wristbands and patch work? Some interesting answers.
6. McGready R, Hamilton KA, Simpson JA et al. Safety of the insect repellent N, N-diethyl-M-toluamide (DEET) in pregnancy. *Am J Trop Med* 2001;65:285-289.
With the interest in Zika virus infections and the potential effect on the fetus, a very "timely" paper. Deserves reviewing again.
7. Alpern JD, Dunlop SJ, Dolan BJ, Stauffer WM, Boulware DR. Personal protection measures against mosquitoes, ticks, and other arthropods. *Med Clin N Am* 2016;100:303-316.

Nice review.

8. The Medical Letter on Drugs and Therapeutics. Insect repellents. JAMA 2016;316:766-767.
Nice table with pricing information. Quick reference.
9. Sluydts V, Durnez L, Heng S et al. Efficacy of topical mosquito repellent (picaridin) plus long-lasting insecticidal nets versus long-lasting insecticidal nets alone for control of malaria: a cluster randomised controlled trial. Lancet Infect Dis 2016;16:1169–77.
Pretty comprehensive study with a large number of subjects. Picaridin need not work. Poor compliance was major reason for failure.
10. Leal WS, Barbosa RMR, Zeng F et al. Does Zika virus infection affect mosquito response to repellents? Sci Rep 2017;7:42826.
Does DEET offer better protection than picaridin against mosquitoes carrying Zika virus?
11. Goodyer L, Schofield S. Mosquito repellents for the traveler: does picaridin provide longer protection than DEET. J Travel Med 2018;25 (suppl 1):S10-S15.
Very important article describing the "performance" of picaridin compared to DEET.
12. Prose R, Breuner NE, Johnson TL, Eisen RJ, Eisen L. Contact irritancy and toxicity of permethrin-treated clothing for *Ixodes scapularis*, *Amblyomma americanum*, and *Dermacentor variabilis* ticks (Acari: Ixodidae). J Med Entomol 2018;55:1217-1224.
Permethrin prevents tick bites.

International adoption

1. Sweet K, Sutherland W, Ehresmann K, Lynfield R. Hepatitis A infection in recent international adoptees and their contacts in Minnesota, 2007-2009. Pediatrics 2011;128:e333-e338.
Along with pertussis, hepatitis A infection has been associated with contact with international adoptees. This article summarizes the experience in Minnesota.
2. Staat MA, Rice M, Donauer S et al. Intestinal parasite screening in internationally adopted children: importance of multiple stool specimens. Pediatrics 2011; 128:e613-e622.
Why do we always ask for multiple stool specimens when looking for intestinal parasites? This paper demonstrates why.
3. Akmatov MK, Kimani-Murage E, Pessler F et al. Evaluation of invalid vaccine doses in 31 countries of the WHO African Region. Vaccine 2015;33:892-901.
Intervals between doses of vaccines are too short in many children. This affects effectiveness. Check those dates on the vaccine records.
4. Eckerle JK, Bresnahan MM, Kroupina M et al. International adoption: A review and update. Pediatr Rev 2021;42:245-257.
Excellent review

5. Liu Y, Phares CR, Logan P et al. Tuberculosis disease and infection in US-bound international adoptees: 2016 to 2023. *Pediatrics* 2026;157:e2025073442.
Not much difference in prevalence of TB in refugees, immigrants and adoptees.

Malaria

1. Faucher J-F, Binder R, Missinou MA et al. Efficacy of atovaquone/proguanil for malaria prophylaxis in children and its effect on the immunogenicity of live oral typhoid and cholera vaccines. *Clin Infect Dis* 2002;35:1147-1154
No concerns of interactions when prescribing atovaquone/proguanil in a traveler receiving oral typhoid vaccine.
2. Kochar DK, Tanwar GS, Khatri PC et al. Clinical features of children hospitalized with malaria—a study from Bikaner, Northwest India. *Am J Trop Med Hyg* 2010;83:981-989.
Plasmodium vivax infections were just as serious as those caused by P. falciparum. Mortality rates were similar.
3. Stauffer WM, Cartwright CP, Olson DA et al. Diagnostic performance of rapid diagnostic tests versus blood smears for malaria in US clinical practice. *Clin Infect Dis* 2009;49:908-913.
Evidence that rapid diagnostic tests are superior to blood smears for the detection of malaria.
4. d'Acremont V, Malila A, Swai N et al. Withholding antimalarials in febrile children who have a negative result for a rapid diagnostic test. *Clin Infect Dis* 2010;51:506-511.
RDT are sensitive. Decisions regarding treatment, especially withholding, can be made based on their results.
5. Schwartz E, Parise M, Kozarsky P, Cetron M. Delayed onset of malaria—implications for chemoprophylaxis in travelers. *N Engl J Med* 2003;349:1510-1516.
Not all malaria is preventable, even after taking appropriate chemoprophylaxis. While most cases of malaria present within the first 30 days after return, many present later.
6. Bardají A, Siguaque B, Sanz S et al. Impact of malaria at the end of pregnancy on infant mortality and morbidity. *J Infect Dis* 2011;203:691-699.
Malaria is an important cause of infant mortality, morbidity and disability. A must read for all practitioners that are involved in global health.
7. Douglas NM, Nosten F, Ashley EA et al. *Plasmodium vivax* recurrence following falciparum and mixed species malaria: risk factors and effect of antimalarial kinetics. *Clin Infect Dis* 2011;52:612-620.
Very interesting article. No reason for people to have only one species of malaria at a time. This happens to have implications on the prevention and management of malaria among refugees, immigrants and travelers.

8. Tan KR, Magill AJ, Parise ME, Arguin PM. Doxycycline for malaria chemoprophylaxis and treatment: report from the CDC Expert Meeting on Malaria Chemoprophylaxis. *Am J Trop Med Hyg* 2011;84:517-531.
Everything you need to know about doxycycline as an antimalarial agent.
9. Barber BE, William Y, Jikal M et al. *Plasmodium knowlesi* malaria in children. *Emerg Infect Dis* 2011;17:814-820.
One of the few articles detailing the clinical features of this pathogen in children.
10. Kantele A, Jokiranta TS. Review of cases with the emerging fifth human malaria parasite, *Plasmodium knowlesi*. *Clin Infect Dis* 2011;52:1356-1362.
A nice concise review.
11. Hickey PW, Cape KE, Masouka P et al. A local, regional, and national assessment of pediatric malaria in the United States. *J Travel Med* 2011;18:153-160.
Important review defining the current shortcomings of our malaria prevention strategies.
12. Venturini E, Chiappini E, Mannelli F et al. Malaria prophylaxis in African and Asiatic children traveling to their parents' home country: a Florentine Study. *J Travel Med* 2011;18:161-164.
High-risk VFR children need our attention. Malaria is preventable.
13. Hagmann S, Schlagenhauf P. Prevention of imported pediatric malaria – travel medicine misses the bull's eye. *J Travel Med* 2011;18:151-152.
A must-read editorial.
14. Bulterys PL, Chao A, Dalai SC et al. Placental malaria and mother-to-child transmission of human immunodeficiency virus-1 in rural Rwanda. *Am J Trop Med Hyg* 2011;85:202-206.
Interesting finding. Placental malaria appears to be associated with early infant HIV infection. Another reason to prevent/treat malaria in mothers.
15. Huynh BT, Fievet N, Gbaguidi G et al. Influence of the timing of malaria infection during pregnancy on birth weight and on maternal anemia in Benin. *Am J Trop Med Hyg* 2011;85:214-220.
Malaria is not good for the mother or the baby. Anemia and low birth weight are common problems. Preventing malaria during pregnancy is key.
16. Poespoprodjo JR, Fobia W, Kenangalem E et al. Highly effective therapy for maternal malaria associated with a lower risk of vertical transmission. *J Infect Dis* 2011;204:1613-1619.
Congenital malaria is responsible for infant morbidity. Artemisinin-combination therapy reduces the vertical transmission of malaria. Good read.
17. Schlagenhauf P, Adamcova M, Regep L et al. Use of mefloquine in children—a review of dosage, pharmacokinetics and tolerability data. *Malaria J* 2011;10:292.
Mefloquine can still be a useful antimalarial agent in children. This is a good review.

18. Taylor SM, van Eijk AM, Hand CC et al. Quantification of the burden and consequences of pregnancy-associated malaria in the Democratic Republic of the Congo. *J Infect Dis* 2011;204:1762-1771.
Pregnancy-associated malaria is a serious problem in DRC.
19. The RTS, S Clinical Trials Partnership. First results of phase 3 trial of RTS,S/AS01 malaria vaccine in African children. *N Engl J Med* 2011;365:1863-1875.
A must read study. The prevention of malaria through a vaccine may have arrived.
20. Senn N, Rarau P, Manong D et al. Rapid diagnostic test-based management of malaria: an effectiveness study in Papua New Guinean infants with *Plasmodium falciparum* and *Plasmodium vivax* malaria. *Clin Infect Dis* 2012;54:644-651.
This study demonstrates the utility of RDTs in the diagnosis and treatment of infants with malaria in high endemic region.
21. Steinhardt L, Magill AJ, Arguin PM. Review: malaria chemoprophylaxis for travelers to Latin America. *Am J Trop Med Hyg* 2011;85:1015-1024.
Important review on the topic. A must read.
22. Wilson ML. Malaria rapid diagnostic tests. *Clin Infect Dis* 2012;54:1637-1641.
Good comprehensive review on the topic.
23. Nayyar GML, Breman JG, Newton PN, Herrington J. Poor-quality antimalarial drugs in southeast Asia and sub-Saharan Africa. *Lancet Infect Dis* 2012;12:488-496.
Most travel medicine specialists recommend that travelers do not purchase antimalarial medications while traveling in developing countries. This papers shows why.
24. John GK, Douglas NM, von Seidlein L et al. Primaquine radical cure of *Plasmodium vivax*: a critical review of the literature. *Malaria J* 2012;11:280.
Everything you wanted to know about primaquine for terminal prophylaxis.
25. The RTS,S Clinical Trials Partnership. A phase 3 trial of RTS,S/AS01 malaria vaccine in African infants. *N Engl J Med* 2012;367:2284-2295.
See No. 19 above as well. A malaria vaccine demonstrated protection against clinical and severe malaria in young infants.
26. Maltha J, Gillet P, Heutmekers M et al. Self-diagnosis of malaria by travelers and expatriates: assessment of malaria rapid diagnostic tests available on the internet. *PLoS One* 2013;8:e53102.
Reliability of RDTs may not be as optimal as desired for routine use.
27. Adachi K, Coleman MS, Khan N et al. Economics of malaria prevention in US travelers to West Africa. *Clin Infect Dis* 2014;58:11-21.
Malaria prophylaxis is medically-beneficial; and cost-effective too. Perhaps, healthcare payers need to pay for it.

28. Leshem E, Meltzer E, Stienlauf S et al. Effectiveness of short prophylactic course of atovaquone-proguanil in travelers to sub-Saharan Africa. *J Travel Med* 2014;21:82-85.
Is this the future dosing for atovaquone-proguanil? If you prescribe this agent, you must read this article.
29. Mosha D, Mazuguni F, Mrema S et al. Safety of artemether-lumefantrine exposure in first trimester of pregnancy: an observational cohort. *Malar J* 2014;13:197.
Artemether-lumefantrine appears to be safe in early pregnancy.
30. Grynberg S, Lachish T, Kopel E et al. Artemether-lumefantrine compared to atovaquone-proguanil as a treatment for uncomplicated *Plasmodium falciparum* malaria in travelers. *Am J Trop Med Hyg* 2015;92:13-17.
Artemether-lumefantrine is better than atovaquone-proguanil. Should be our preferred agent.
31. Meltzer E, Morrison L, Stienlauf S, Schwartz E. Primaquine dosing errors: the human cost of a pharmaceutical anachronism. *Am J Trop Med Hyg* 2015;93:123-124.
If you prescribe primaquine, this is a must-read article.
32. Evans AB, Kulik D, Baneji A et al. Imported pediatric malaria at the Hospital for Sick Children, Toronto, Canada: a 16 year review. *BMC Pediatrics* 2014;14:251.
A very comprehensive description of the problem at a large children's hospital.
33. Kaser AK, Arguin PM, Chiodini PL et al. Imported malaria in pregnant women: a retrospective pooled analysis. *Travel Med Infect Dis* 2015;13:300-310.
Important problem. Important paper. Very useful information to better understand the magnitude of the problem.
34. Stoney RJ, Chen LH, Jentes ES et al. Malaria prevention strategies: adherence among Boston area travelers visiting malaria-endemic countries. *Am J Trop Med Hyg* 2016;94:136-142.
This is a must-read paper. Discusses the many issues surrounding adherence to malaria chemoprophylaxis. Well-done prospective cohort study.
35. Cullen KA, Mace KE, Arguin PM. Malaria surveillance in the United States-2013. *MMWR CDC Surveill Summ* 2016;65:1-22.
Imported malaria into the US is increasing. Old challenges remain. Most cases are in VFRs. Chemoprophylaxis and preventive measures are not being followed.
36. Tsuchido Y, Nakamura-Uchiyama F, Toyoda K et al. Case report: development of delayed hemolytic anemia after treatment with oral artemether-lumefantrine in two patients with severe falciparum malaria. *Am J Trop Med Hyg* 2017;96:1185-1189.
An adverse reaction similar to what is observed with artesunate?
37. Dellicour S, Sevene E, McGready R et al. First-trimester artemisinin derivatives and quinine treatments and the risk of adverse pregnancy outcomes in Africa and Asia: A meta-analysis of observational studies. *PLoS Med* 2017;14:e1002290.

This study suggests that artemisinin use in the first trimester is not associated with an increase in embryopathy.

38. Kolifarhood G, Raeisi A, Ranjbar M et al. Prophylactic efficacy of primaquine for preventing *Plasmodium falciparum* and *Plasmodium vivax* parasitaemia in travelers: A meta-analysis and systematic review. *Trav Med Infect Dis* 2017;17:5-18.
Well done analysis. Underutilized prophylactic agent for P falciparum?
39. Angelo KM, Libman M, Caumes E et al. Malaria after international travel: A GeoSentinel analysis, 2003-2016. *Malaria J* 2017;16:293.
This paper provides information on 325 pediatric travelers with malaria.
40. Yavne Y, Leshem E, Paran Y et al. *Plasmodium malariae* in Israeli travelers: a nationwide study. *Clin Infect Dis* 2017;65:1516-1522.
An important paper. The "forgotten" malarial pathogen?
41. Tickell-Painter M, Saunders R, Maayan N et al. Deaths and parasuicides associated with mefloquine chemoprophylaxis: a systematic review. *Travel Med Infect Dis* 2017;20:5-14.
While not truly a pediatric problem, the issue comes up for discussion when potential side effects of mefloquine are discussed.
42. Nunes JM, Santareno S, Guerreiro L, Margalho AF. Lyell's syndrome and antimalarials: A case report and clinical review. *J Global Infect Dis* 2017;9:23-30.
Caution when using sulfa agents to treat malaria.
43. Tickell-Painter M, Maayan N, Saunders R, Pace C, Sinclair D. Mefloquine for preventing malaria during travel to endemic areas. *Cochrane Database Syst Rev* 2017 October 30;10:CD006491.
Outstanding review on the use of mefloquine for prophylaxis. A must read.
44. Kafai NM, John ARO. Malaria in children. *Infect Dis Clin N Am* 2018;32:189-200.
Nice review
45. Shellvarajah M, Hatz C, Schlagenhaut P. Malaria prevention recommendations for risk groups visiting sub-Saharan Africa: a survey of European expert opinion and international recommendations. *Travel Med Infect Dis* 2017;19:49-55.
An interesting study involving an online questionnaire of travel medicine experts regarding choice of antimalarial prophylaxis. Some of the cases are pediatric.
46. Savelkoel J, Binnendijk KH, Spijker R et al. Abbreviated atovaquone-proguanil prophylaxis regimens in travellers after leaving malaria-endemic areas: a systematic review. *Travel Med Infect Dis* 2018;21:3-20.
It is time to shorten duration of atovaquone-proguanil prophylaxis? Perhaps you should read this review first.

47. Ballard SB, Salinger A, Arguin PM, Desai M, Tan KR. Updated CDC recommendations for using artemether-lumefantrine for the treatment of uncomplicated malaria in pregnant women in the United States. *MMWR* 2018;67:424-431.
WHO endorsed, and now CDC, for the treatment of uncomplicated malaria in the second and third trimester of pregnancy. First trimester soon?
48. Kloprogge F, Workman L, Borrmann S et al. Artemether-lumefantrine dosing for malaria treatment in young children and pregnant women: A pharmacokinetic-pharmacodynamic meta-analysis. *PLoS Med* 2018;156:e1002579.
A very important paper. New dosing parameters for A-L down the road?
49. Yerlikaya S, Campillo A, Gonzalez IJ. A systematic review: performance of rapid diagnostic tests for the detection of *Plasmodium knowlesi*, *Plasmodium malariae*, and *Plasmodium ovale* mono-infections in human blood. *J Infect Dis* 2018;218:265-276.
Nice review.
50. Rajapakse S, Rodrigo C, Fernando SD. Tafenoquine for preventing relapse in people with *Plasmodium vivax* malaria. *Cochrane Database of Systematic Reviews* 2015, Issue 4. Art. No.: CD010458. DOI:10.1002/14651858.CD010458.pub2.
Recently approved for terminal prophylaxis in persons >16 years of age. Shorter course than primaquine. Hemolysis still a problem.
51. Grigg MJ, William T, Barber BE et al. Age-related clinical spectrum of *Plasmodium knowlesi* malaria and predictors of severity. *Clin Infect Dis* 2018;67:360-369.
More severe disease in adults, more anemia in children. Low parasitemia was not always good.
52. Kafai NM, Odom John AR. Malaria in children. *Infect Dis Clin N Am* 2018;32:189- 200.
Nice updated review.
53. Cheaveau J, Nguyen H, Chow B et al. Clinical validation of a commercial LAMP test for ruling out malaria in returning travelers: a prospective diagnostic trial. *Open Forum Infect Dis* 2018 5(11):ofy260.doi:10.1093/ofid/ofy260.
Always in need for technology with high sensitivity and specificity, and cost-effective and easy to perform.
54. Llanos-Cuentas A, Lacerda MVG, Hien TT et al. Tafenoquine versus primaquine to prevent relapse of *Plasmodium vivax* malaria. *N Engl J Med* 2019;380:229-241.
Just as effective and safe as primaquine as radical cure of P vivax.
55. Lacerda MVG, Llanos-Cuentas A, Krudsood S et al. Single-dose tafenoquine to prevent relapse of *Plasmodium vivax* malaria. *N Engl J Med* 2019;380:215-228.
Significantly lower risk of P vivax recurrence than placebo.
56. Gaillard T, Briolant S, Madamet M, Pradines B. The end of a dogma: the safety of doxycycline use in young children for malaria treatment. *Malar J* 2017;16:148.
Doxycycline can be used in children in all age groups to the treatment of malaria.

57. Andrejko KL, Mayer RC, Kovacs S et al. The safety of atovaquone-proguanil for the prevention and treatment of malaria in pregnancy: a systematic review. *Travel Med Infect Dis* 2019;27:20-26.
While some of the data looks promising, more data is needed.
58. Enane LA, Sullivan KV, Spyridakis E, Feemster KA. Clinical impact of malaria rapid diagnostic testing at a US children's hospital. *J Pediatr Infect Dis Soc* 2020;9:298-304.
Quicker diagnosis and initiation of antimalarial therapy. There is a role of RDTs, even at a large children's hospital.
59. Walz EJ, Volkman HR, Adedimeji AAE et al. Barriers to malaria prevention in US-based travelers visiting friends and relatives abroad: a qualitative study of West African immigrant travelers. *J Travel Med* 2019 Feb 1;26(2).pii:tay163.
An assessment of pre-travel care barriers for VFR travellers.
60. Mayer RC, Tan KR, Gutman JR. Safety of atovaquone-proguanil during pregnancy. *J Travel Med* 2018;1-4, doi: 10.1093/jtm/tay138.
Is atovaquone-proguanil safe in pregnancy? The jury is still out. More data is needed.
61. Cheaveau J, Marasinghe D, Akakpo S et al. The impact of malaria on liver enzymes: a retrospective cohort study (2010-2017). *Open Forum Infect Dis* 2019 May 16;6(6):ofz234.
Total bilirubin can be elevated, but liver enzymes are normal. Important observation.
62. Moyo QM, Besser M, Lynn R, Lever AML. Persistence of imported malaria into the United Kingdom: an epidemiological review of risk factors and at-risk groups. *Clin Infect Dis* 2019;69:1156-1162.
How to get chemoprophylaxis to those at risk? A challenge remains.
63. Wangdahl A, Wyss K, Saduddin D et al. Severity of *Plasmodium falciparum* and non-*falciparum* malaria in travelers and migrants: A nationwide observational study over 2 decades in Sweden. *J Infect Dis* 2019;220:1335-1345.
Severe malaria comes in various flavors.
64. Roussel C, Ndour PA, Kendjo E et al. Intravenous artesunate for the treatment of severe imported malaria: implementation, efficacy and safety in 1391 patients. *Clin Infect Dis* 2021;73:1795-1804.
Highly effective agent against severe malaria. However, watch for hemolysis.
65. Abanyie F, Acharya SD, Leavy I et al. Safety and effectiveness of intravenous artesunate for treatment of severe malaria in the United States-April 2019 through December 2020. *Clin Infect Dis* 2021;73:1965-1972.
Important article as artesunate has become the drug of choice for severe malaria in the US.

66. Gaudinski MR, Berkowitz NM, Idris AH et al. A monoclonal antibody for malaria prevention. *N Engl J Med* 2021;385:803-814.
The future of malaria prevention for travelers?
67. Comelli A, Guarner ME, Tomasoni LR et al. Severe imported *Plasmodium falciparum* malaria in children: characteristics and useful factors in the risk stratification. *Travel Med Infect Dis* 2021;44:102196.
Can you identify high-risk patients?
68. Forgie EME, Brooks HM, Barton M, Hawkes MT. Pediatric malaria. Global and North America perspectives. *Pediatr Clin N Am* 2022;69:47-64.
A nice comprehensive review.
69. Garcia Ruiz de Morales A, Morcate C, Isaba-Ares E et al. High prevalence of malaria in a non-endemic setting among febrile episodes in travellers and migrants coming from endemic areas: a retrospective analysis of a 2013–2018 cohort. *Mal J* 2021;20:449.
Malaria remains a common illness among febrile migrants coming from the tropics.
70. Paradkar KA, Wolf M, Mosser-Goldfarb J. Doxycycline phototoxicity: A cautionary tale for travelers. *J Pediatr* 2022;244:243-245.
Nice photos. Good reminder of the potential side effects.
71. Chamma-Siqueira NN et al. Higher-dose primaquine to prevent relapse of *Plasmodium vivax* malaria. *N Engl J Med* 2022;386:1244-1253.
Higher dose of primaquine appears more effective. More effective than tafenoquine?
72. ACCESS-SMC Partnership. Effectiveness of seasonal malaria chemoprevention at scale in west and central Africa: an observational study. *Lancet* 2020;396:1829-1840.
Seasonal malaria chemoprevention effectively reduces morbidity and mortality. Seems appropriate for some of our long-stay travelers?
73. Forgie EME, Brooks HM, Barton M, Hawkes MT. Pediatric malaria. Global and North American perspectives. *Pediatr Clin N Am* 2022;69:47-64.
A nice comprehensive review
74. Schultz JS, Mace KE, Tan KR. Return to travel in the COVID-19 pandemic recovery period and implications for imported malaria: Reinforcing prevention, early diagnosis, and appropriate treatment of malaria. *Clin Infect Dis* 2023;76:1161-1163.
Increase in travel post COVID-19. More malaria? Be prepared.
75. Bird C, Hayward GN, Turner PJ et al. A diagnostic accuracy study to evaluate standard rapid diagnostic test [RDT] alone to safely rule out imported malaria in children presenting to UK emergency departments. *J Pediatr Infect Dis Soc* 2023;12:290-297.
Do not throw away your microscope just yet. However, RDTs are still helpful.
76. Kontoni VS, Goetghebuer T, Hainaut M et al. Imported malaria in children. A study over an 11-year period in Brussels. *Pediatr Infect Dis J* 2023;42:733-738.

A good analysis of cases in children.

77. Drysdale M, Tan L, Martin A et al. *Plasmodium vivax* in children: Hidden burden and conspicuous challenges, a narrative review. *Infect Dis Ther* 2023;12:33-51.
P vivax is a serious pathogen. Do not underestimate it.
78. Rent S, Bauserman M, Laktabai J, Tshetu AK, Taylor SM. Malaria in pregnancy: Keypoints for the neonatologist. *NeoReviews* 2023;24:e539-e552.
Nice, comprehensive review. Succinct.
79. Linares-Rufo M, Bermudez-Marval H, García-Bertolín C et al. Perspectives of primary care physicians in Spain on malaria: a cross-sectional survey and retrospective review of cases. *Malar J* 2024;23:7.
Knowledge of malaria is critical for all practitioners. Education by travel and infectious diseases specialists will be critical.
80. Mitchell CL, Kennar A, Vasquez Y et al. Increases in imported malaria cases-Three Southern US Border jurisdictions, 2023. *MMWR* 2024;73:417-419.
*A different kind of traveler. An increase in imported malaria cases have been reported in Arizona [Pima], California [San Diego], and Texas [El Paso]. Plasmodium vivax was the most common species. 91% of those affected were hospitalized. ~68% of patients had transited through one or more country with endemic malaria. **See refugees-immigrants' section for related article.***
81. Bird C, Hayward GN, Turner PJ et al. Infections diagnosed in children and young people screened for malaria in UK emergency departments: a retrospective multi-centre study. *Paediatr Int Child Health* 2024;44:1-7.
Not everyone coming from the tropics has malaria but a third from sub-Saharan Africa do.
82. Satarvandi D, van der Werff SD, Nauc er P et al. Scoring systems for prediction of malaria and dengue fever in non-endemic areas among travellers arriving from tropical and subtropical areas. *Emerg Med J* 2024;41:242-248.
Is it dengue? Is it malaria? A scoring system may help.
83. Mayhew JA, Alali M, Enane LA, Kirkpatrick LM, John CC. *Plasmodium ovale* malaria in travelers and immigrants to the United States: A case series. *Am J Trop Med Hyg* 2024;published ahead of print.
Beware. Screening for P ovale may be difficult at time. It can also cause severe disease.
84. Sundararaman SA, Roper B, Davis AKF et al. Malaria in children at 9 US Hospitals: 2016-2023. *Pediatrics* 2026;157:e2025073556.
A must read article. Need to educate our peers. Delayed diagnosis of travel-associated malaria continues to be problems.

Parasitic Infections

1. Keiser J, Utzinger J. Food-borne trematodiasis. Clin Microbiol Rev 2009;22:466-483.
Nice comprehensive review.
2. Feldmeier H, Keyzers A. Tungiasis-a Janus-faced parasitic skin disease. Travel Med Infect Dis 2013;11:357-365.
Everything you want to know about tungiasis. A must read.
3. Abrahams-Sandí E, Retana-Moreira L, Castro-Castillo A, Reyes-Batlle M, Lorenzo-Morales J. Fatal meningoencephalitis in child and isolation of *Naegleria fowleri* from hot springs in Costa Rica. Emerg Infect Dis 2015;21:382-384.
Another good reason to stay away from fresh water.
4. Shatat IF. Case report: A child with gross hematuria and the importance of travel history. Front Pediatr 2018;6:14.
A nice illustrative case. Travel history is key.
5. Rabinowicz S, Leshem E, Schwartz E. Acute schistosomiasis in pediatric travelers and comparison with their companion adults. J Travel Med 2021;taaa238. Online.
Important comparison. Greater risk in children?
6. Coyle CM. The returned traveler with neurologic manifestations: could my patient have a parasite? Curr Opin Infect Dis 2021;34:245-254.
Nice review
7. Bustamante J, Sainz T, Ara-Montojo MF et al. Screening for parasites in migrant children. Trav Med Infect Dis 2022;47:102287.
Parasitosis is not uncommon among migrant children. Screening for eosinophilia alone may miss cases.
8. Bustamante J, Sainz T, Perez S et al. Toxocariasis in migrant children: A 6 years' experience in a reference pediatric unit. Trav Med Infect Dis 2022;47:102288.
Similar findings as in reference 7 above.
9. Biber A, Petersil N, Naaman E, Neuberger A, Schwartz E. Unusual and severe complications of acute schistosomiasis in travelers. Open Forum Infect Dis 2022;https://doi.org/10.1093/ofid/ofac443.
Young adults with unusual complications.
10. Comelli A, Genovese C, Gobbi F et al. Schistosomiasis in non-endemic areas: Italian consensus recommendations for screening, diagnosis and management by the Italian Society of Tropical Medicine and Global Health (SIMET), endorsed by the Committee for the Study of Parasitology of the Italian Association of Clinical Microbiologists (CoSP-AMCLI), the Italian Society of Parasitology (SoIPa), the Italian Society of Gastroenterology and Digestive Endoscopy (SIGE), the Italian Society of Gynaecology and Obstetrics (SIGO), the Italian Society of Colposcopy and Cervico-Vaginal Pathology (SICPCV), the Italian Society of General Medicine and Primary Care (SIMG), the Italian Society of Infectious and Tropical Diseases (SIMIT), the Italian Society

of Pediatrics (SIP), the Italian Society of Paediatric Infectious Diseases (SITIP), the Italian Society of Urology (SIU). Infection 2023;51:1249-1271.
A very comprehensive assessment of schistosomiasis in non-endemic areas.

Pharmacology & Medications

1. Strom BL, Schinnar R, Apter AJ et al. Absence of cross-reactivity between sulfonamide antibiotics and sulfonamide nonantibiotics. N Engl J Med 2003;349:1628-1635.
Common question: can we give acetazolamide to a traveler with a history of hypersensitivity to trimethoprim-sulfamethoxazole?
2. Kelesidis T, Falagas ME. Substandard/counterfeit antimicrobial drugs. Clin Microbiol Rev 2015;28:443-464.
This article is an excellent of the problem. A must read.
3. Matta K, Zusterzeel R, Pilli NR et al. Effect of sunscreen application under maximal use conditions on plasma concentrations of sunscreen active ingredients. A randomized clinical trial. JAMA 2019;321:2082-2091.
Interesting study. Associated toxicity? More studies needed. However, sun protection is still essential.

Pre-Travel Evaluation and Counseling

1. Stauffer W, Christenson JC, Fischer PR. Preparing children for international travel. Travel Med Infect Dis 2008;6:101-113.
Good review article on pre-travel risk-assessment, vaccines, and education.
2. Canadian Paediatric Society. Air travel and children's health issues. Paediatr Child Health 2007;12:45-50.
Should young infants travel? Should children with certain medical conditions delay travel? An excellent review that addresses these issues.
3. Hendel-Paterson B, Swanson SJ. Pediatric travelers visiting friends and relatives (VFR) abroad: illnesses, barriers and pre-travel recommendations. Trav Med Infect Dis 2011;9:192-203.
The focus of this review article is the pediatric VFR. This is always useful information.
4. Neumann K. Family travel: an overview. Travel Med Infect Dis 2006;4:202-217.
A very comprehensive review. Among topics discussed: avoiding diarrhea, use of infant car seat restraints during air travel, and waterfront safety.
5. LaRocque RC, Rao SR, Ansdell V et al. Global TravEpiNet: A national consortium of clinics providing care to international travelers-analysis of demographic characteristics, travel destinations, and pretravel healthcare of high-risk US international travelers, 2009-2011. Clin Infect Dis 2012;54:455-462.
National consortium of 18 US clinics describe the epidemiology of travelers visiting high-risk regions of the world.

6. Maltezou HC, Pavli A, Spilioti A et al. Paediatric international travellers from Greece: characteristics and pre-travel recommendations. *Travel Med Infect Dis* 2012;10:135-139. *The experience in Greece is similar to that of other countries. Very few seek pre-travel services before departure.*

7. Rossi IA, Genton B. The reliability of pre-travel history to decide on appropriate counseling and vaccinations: a prospective study. *J Travel Med* 2012;19:284-288. Read editorial at: Zimmer R. The pre-travel visit should start with a "risk conversation". *J Travel Med* 2012; 19:277-280. *Risk assessment is key for every pre-travel visit.*

8. Caillet-Gossot S, Laporte R, Noël G et al. Family compliance with counseling for children traveling to the tropics. *J Travel Med* 2013;20:171-176. *Nice prospective study assessing compliance to travel recommendations.*

9. Hagmann S, LaRocque RC, Rao SR et al. Pre-travel health preparation of pediatric international travelers: analysis from the Global TravEpiNet Consortium. *J Pediatr Infect Dis Soc* 2013;2:327-334. *Our colleagues provide an important view of the challenges associated with the pediatric traveler.*
[See editorial in same journal: Omer SB, Orenstein WA. Vaccine refusal among pediatric travelers. *J Pediatr Infect Dis Soc* 2013;2:335-336.]

10. Kogelman L, Barnett ED, Chen LH et al. Knowledge, attitudes, and practices of US practitioners who provide pre-travel advice. *J Travel Med* 2014;21:104-114. *Study demonstrates that practitioners who have an ISTM or ASTMH certificate are more knowledgeable about travel vaccines and recommendations.*

11. Starr M. Paediatric travel medicine: vaccines and medications. *Br J Clin Pharmacol* 2012;75:1422-1432. *Nice comprehensive review.*

12. Sommet J, Missud F, Holvoet L et al. Morbidity among child travelers with sickle-cell disease visiting tropical areas: an observational study in a French tertiary care centre. *Arch Dis Child* 2013;98:533-536. *Salmonella infections in patients with SS is associated with high morbidity.*

13. Mutie M, Cooper G, Kyle G et al. Travelling with medications and medical equipment across international borders. *Travel Med Infect Dis* 2014;12:505-510. *Can the traveler bring medications on a trip? Ask the country of destination.*

14. Hochberg NS, Barnett ED, Chen LH et al. International travel by persons with medical comorbidities: understanding risks and providing advice. *Mayo Clin Proc* 2013;88:1231-1240. *While not a pediatric study, much of the findings have implications to the pediatric traveler with medical conditions.*

15. Hagmann SHF, Leshem E, Fischer PR, Stauffer WM, Barnett ED, Christenson JC. Preparing children for international travel: need for training and pediatric-focused research. *J Travel Med* 2014;21:377-383.
Results of survey sent to members of ISTM Pediatric Interest Group. Interesting results.
16. Steffen R, Behrens RH, Hill DR et al. Vaccine-preventable travel health risks: what is the evidence-what are the gaps? *J Travel Med* 2015;22:1-12.
An important review article for those of us who counsel travelers about the risk of vaccine preventable diseases.
17. Sainato RJ, Ottolini MG, Hickey PW, Rajnik M. Preparing families with children for international travel. *Curr Probl Pediatr Adolesc Health Care* 2015;45:215-230.
Concise review. Good read.
18. Vetter-Laracy, Osona B, Peña-Zarza JA, Gil JA, Figueroa J. Hypoxia challenge testing in neonates for fitness to fly. *Pediatrics* 2016;137:e20152915.
Healthy neonates with corrected gestational age of >39 weeks of age can fly.
19. Ma XW, Pell LG, Akseer N et al. Characteristics and pre-travel preparation of travelers at a Canadian pediatric tertiary care travel clinic: a retrospective analysis. *Travel Med Infect Dis* 2016;14:148-154.
Nice comprehensive study
20. Ducrocq C, Sommet J, Levy D et al. Children with chronic health disorders travelling to the tropics: a prospective observational study. *Arch Dis Child* 2016;101:1032-1036.
A must needed study. Good clinical data to have.
21. Freedman DO, Chen LH, Kozarsky PE. Medical considerations before international travel. *N Engl J Med* 2016;375:247-260.
Nice comprehensive review. Some pediatric aspects are addressed [tables].
22. Loo S, Campbell A, Vyas J, Pillarisetti N. Case report of a hypobaric chamber fitness to fly test in a child with severe cystic lung disease. *Pediatrics* 2017;140:e20162376.
Can children with cystic lung disease fly? The authors report the use of hypobaric chamber. Nice report.
23. Mahadevan SV, Strehlow MC. Preparing for international travel and global medical care. *Emerg Med Clin N Am* 2017;35:465-484.
Nice comprehensive review. Covers many environmental exposure topics.
24. Al-Tawfiq JA, Gautret P, Memish ZA. Expected immunizations and health protection for Hajj and Umrah 2018-An overview. *Travel Med Infect Dis* 2017;19:2-7.
Key recommendations for persons traveling to Saudi Arabia.

25. Nadine S, Brian B, Dheeraj G et al; on behalf of the Global TravEpiNet Consortium. Potentially serious drug interactions resulting from the pretravel health encounter. *Open Forum Infect Dis* 2018;5(11):ofy266.
Important article. More and more of our travelers have other medical conditions and are taking medications that may interact with travel-related medications. Beware.

26. Ashley DP, Fraser J, Yun H et al. A comparison of pretravel health care, travel-related exposures, and illnesses among pediatric and adult US military beneficiaries. *Am J Trop Med Hyg* 2019;100:1285-1289.
Nice comparison of adult and pediatric travelers. Covering pre- and post-travel.

27. Kohl SE, Barnett ED. What do we know about travel for children with special health care needs? A review of the literature. *Travel Med Infect Dis* 2020;34:101438.
An essential review for those counseling families with children with special needs. Nicely done.

28. Virk A, Jayawant M, Springer DJ, Kasten MJ. Electronic consultations with video supported PowerPoint versus in-clinic face-to-face travel consultations: A single-centre, comparative analysis. *Travel Med Infect Dis* 2020;33:101556.
The future of pre-travel consultation?

29. Shaban RZ, Sotomayor-Castillo CF, Malik J, Li C. Global commercial passenger airlines and travel health information regarding infection control and the prevention of infectious disease: What's in a website? *Travel Med Infect Dis* 2020;33:101528.
An underutilized site for valuable information?

30. Molitor-Kirsch SA, Leshem E, Fischer PR, Christenson JC, Kohl S, Mackell S, Starr M, Haggmann SHF. Caring for the child traveler: Results of a practice gaps and educational needs survey. *Travel Med Infect Dis* 2020 Nov-Dec;38:101763. doi: 10.1016/j.tmaid.2020.101763.
Data will help focus, plan and support key educational goals for pediatric travel medicine.

31. Chehab H, Fischer PR, Christenson JC. Preparing children for international travel. *Pediatr Rev* 2021;42:189-202.
Updated review on travel recommendations for children.

32. Blakemore S, Hofto ME, Shah N et al. Travel histories in children: how well do interns and medical students do? *South Med J* 2020;113:432-437.
We got work to do. To improve history-taking once people graduate and are in practice, we should start early.

33. Greenby D, Gillepsie S, Levine A, Murray B. The utility of a travel screen at triage in pediatric emergency medicine. *Pediatr Emerg Care* 2020;36:384-388.
This can be a very useful tool if obtained and used appropriately.

34. Campbell JI, Alonso A, Cuttin K et al. A primary care-based quality improvement initiative to increase identification of pediatric international travelers. *Am J Trop Med Hyg* 2020;102:1016-1021.
To be able to prepare children for international travel, we must first identify who they are and get into our clinics.
35. Imbert P, Grondin-Mounier C, Faye A, Duron-Martinaud S, RESETROP Group. Reasons for seeking care and adherence to pretravel preparation in expatriate or long-term travelers children in the tropics: a French prospective study. *Travel Med Infect Dis* 2021;23:102184.
Important analysis of a specific at-risk group.
36. Wong JK, Nashid N, Pell LG et al. Pretravel plans and discrepant trip experiences among travelers attending a tertiary care centre family travel medicine clinic. *PLoS ONE* 2022;17:e0262075.
Authors document that completed travel experiences among travelers may differ from their stated travel itineraries. These discrepancies may alter the traveler's health risks. Alternative counseling may be necessary.
37. Coker RK, Armstrong A, Church AC et al. BTS Clinical Statement on air travel for passengers with respiratory disease. *Thorax* 2022;77:329–350.
Important review for those evaluating and counseling travelers with chronic lung disease.
38. Piché-Renaud PR, Nguyen JH, Pell LG et al. Underestimation of travel-associated risks by adult and paediatric travellers compared to expert assessment: A cross-sectional study at a hospital-based family pre-travel clinic. *Trav Med Infect Dis* 2022;47:102315.
A not-uncommon problem.
39. Wendt S, Beier D, Paquet D et al. Medical advice for travelers. *Dtsch Arztebl Int* 2021; 118: 349–56.
Nice, comprehensive review.
40. Hyle EP, Le MH, Rao SR et al. High-risk US international travelers seeking pretravel consultation during the COVID-19 pandemic. *Open Forum Infect Dis* 2022, <https://doi.org/10.1093/ofid/ofac399>.
Young travelers, VFR travelers, and prolonged stays remained high-risk during the pandemic COVID-19 "era". Our challenge remains.
41. Hall MT, Do TA, Shusko MP. The value of pre-exposure prophylaxis: a case Series of US Marines infected with leptospirosis. *Trav Med Infect Dis* 2022; <https://doi.org/10.1016/j.tmaid.2022.102523>.
Pre-exposure prophylaxis does work. Highly relevant for pediatric travelers participating in high-risk activities.
42. Hanna TA, Ahmed A, Vincent R et al. Gaps in knowledge and practices of malaria

prevention in Francophone African immigrants in Metropolitan Edmonton. *Mal J* 2022;21:197.

Many factors influence compliance with preventive measures. Good lesson comes from this article.

43. Kern LD, Chnag Renolds C. Pre-travel health preparation in primary care general pediatrics compared to pediatric tavel medicine. *J Travel Med* 2026;33:1,taaf116. *Great paper. With preparation and accessibility to vaccines, travel medicine can be practiced in the general pediatric setting.*

Refugees and Immigrants

1. Chaves NJ, Gibney KB, Leder K et al. Screening practices for infectious diseases among Burmese refugees in Australia. *Emerg Infect Dis* 2009;15:1769-1772. *If you care for Burmese refugees, this is a must-read article.*
2. Barnett ED, Weld LH, McCarthy AE et al. Spectrum of illness in international migrants seen at GeoSentinel clinics in 1997-2009, Part 1: US-bound migrants evaluated by comprehensive protocol-based health assessment. *Clin Infect Dis* 2013;56:913-924. *Must-read article for clinicians caring for refugees and immigrants.*
3. McCarthy AE, Weld LH, Barnett ED et al. Spectrum of illness in international migrants seen at GeoSentinel clinics in 1997-2009, Part 2: Migrants resettled internationally and evaluated for specific health concerns. *Clin Infect Dis* 2013;56:925-933. *Must-read article for clinicians caring for refugees and immigrants.*
4. Travassos MA. The threat of outbreaks in the US Border Patrol Detainment Centers. *Pediatrics* 2019;144:e20190206. *A reminder that influenza is a virus known to cause significant morbidity and mortality.*
5. Dawson-Hahn EE, Pidaparti V, Hahn W, Stauffer W. Global mobility, travel and migration health: clinical and public health implications for children and families. *Paediatr Int Child Health* 2021;41:3-11. *Clinicians will provide better care to refugees and immigrant children if they have a better understanding of the health problems faced by this community.*
6. Fredericks K, Stein F. Care of the immigrant child. *Pediatr Rev* 2022;43:16-27. *Nice comprehensive review*
7. Bustamente J, Garcia Lopez-Hortelano M, Barcia C et al. Eosinophilia in migrant children. How should we proceed. *Pediatr Infect Dis J* 2022;41:102-107. *Helminths are a common cause. Unknown causes at a high percent too.*
8. Toizumi M, Horikoshi Y. Imported infectious diseases, tropical diseases and local endemic infectious diseases in Japan. *Pediatr Infect Dis J* 2022;online March 23, 2022. *Good historical review.*

9. Eisen S, Williams B, Cohen J. Infections in asymptomatic unaccompanied asylum-seeking children in London 2016–2022. *Pediatr Infect Dis J* 2023;42:1051-1055.
This article describes the infections seen in ~1000 children arriving in London.
10. Khamly P, Kapadia N, Umali-Wilcox M et al. *Plasmodium vivax* infections among immigrants from China traveling to the United States. *Emerg Infect Dis* 2024;30[7].
See malaria section to review related article. *"Preaching to the choir": Another example of the country of origin of the traveler is important, but the countries they have traveled through before reaching their destination are just as important.*
11. Gressick K, Nham A, Filardo TD et al. Measles outbreak associated with a migrant shelter-Chicago, Illinois, February-May 2024. *MMWR* 2024;73:424-429.
Unvaccinated or undervaccinated person against measles pose a risk to others, in this case a shelter, and to the community. Screening and vaccination are key. Most of those infected came from South America.
12. Wiltz P. Identifying and managing vector-borne diseases in migrants and recent travelers in the emergency department. *Curr Emerg Hosp Med Rep* 2023;11:58-65.
Emergency rooms need to consider internationally-acquired illnesses when evaluating febrile illness in migrants and recent travelers. Clinicians need to be familiar with the epidemiology of these infectious conditions.

Respiratory Infections

1. Waitumbi JN, Kuypers J, Anyona SB et al. Short report: outpatient upper respiratory tract viral infections in children with malaria symptoms in western Kenya. *Am J Trop Med Hyg* 2010;83:1010-1013.
Influenza A and other viral respiratory pathogens are common in regions with high-endemicity of malaria. Not all febrile illnesses in children are caused by malaria.
2. Hirve S, Newman LP, Paget J et al. Influenza seasonality in the tropics and subtropics-when to vaccinate? *PLoS One* 2016;11:e0153003.
Interesting data on the seasonality of influenza throughout the world. Helps to determine formulation of vaccine needed for travelers.
3. Goeijenbier M, van Genderen P, Ward BJ et al. Travellers and influenza: risks and prevention. *J Travel Med* 2017 Jan 11;24(1):taw078. doi: 10.1093/jtm/taw078. Print 2017 Jan.
Must read recommendations
4. Hertzberg VS, Weiss H, Elon L et al. Behaviors, movements, and transmission of droplet-mediated respiratory diseases during transcontinental airline flights. *PNAS* 2018, Latest articles. www.pnas.org/cgi/doi/10.1073/pnas.1711611115.
Forget the cabin air, worry about the person sitting next to you.
5. Wood S, Telu K, Tribble D et al. Influenza-like illness in travelers to the developing world. *Am J Trop Med Hyg* 2018;99:1269-1274.

Influenza-like illnesses are common among travelers.

6. Biscayart C, Angeleri P, Lloveras S et al. The big threat to global health? 2019 novel coronavirus (2019-nCoV): What advice can we give to travellers? – Interim recommendations January 2020, from the Latin-American Society for Travel Medicine (SLAMVI). *Travel Med Infect Dis* 2020;33:101567.
Many of the recommendations are still relevant ~3 months into the pandemic.
7. Lovey T, Hasler R, Gautret P, Schlagenhauf P. Travel-related respiratory symptoms and infections in traveller (2000-22): A systematic review and meta-analysis. *J Travel Med* 2023:1-14.
Not a surprise to anyone, respiratory infections are not uncommon in travellers.

Special needs travelers

1. Afif IY, Manik AR, Munthe K et al. Physiological effect of deep pressure in reducing anxiety of children with ASD during traveling: A public transportation setting. *Bioengineering* 2022;9:157.
Interesting research that may be beneficial for children with autistic spectrum disorders.
2. Kosaka M, Murata N, Kaneda Y et al. Challenges when going on excursions with children with medical complexity in Japan. *Pediatr Int* 2022 Nov 1;e15403. doi: 10.1111/ped.15403. Online ahead of print.
Children with medical conditions can also travel.
3. Wasserman RI. Traveling with primary immunodeficiency. *Ann Allergy Asthma Immunol* 2022; online ahead of print.
An important article since travelers with underlying immunodeficiencies are traveling.

Travel-Related Medical Problems (Including Post-Travel)

1. Newman-Klee C, D'Acromont V, Newman CJ et al. Incidence and types of illness when traveling to the tropics: a prospective controlled study of children and their parents. *Am J Trop Med Hyg* 2007;77:764-769.
Comprehensive description of travel-related illnesses observed in pediatric travelers; with a comparison to adults.
2. Hagmann S, Neugebauer R, Schwartz E et al. Illness in children after international travel: analysis from the GeoSentinel Surveillance Network. *Pediatrics* 2010;125:e1072-e1080.
One of the few papers that exists describing the epidemiology of travel-related illnesses in children; largest number of pediatric travelers described so far.
3. van Rijn SF, Driessen G, Overbosch D et al. Travel-related morbidity in children: a prospective observational study. *J Travel Med* 2012;19:144-149.
Skin ailments and abdominal problems are common among pediatric travelers. Read all about it.

4. Herbinge KH, Drerup L, Alberer M et al. Spectrum of imported infectious diseases among children and adolescents returning from the tropics and subtropics. *J Travel Med* 2012;19:150-157.
Younger travelers are more likely to acquire an infectious diseases while traveling.
5. Hunziker T, Berger C, Staubli G et al. Profile of travel-associated illness in children, Zürich, Switzerland. *J Travel Med* 2012;19:158-162.
Diarrhea, respiratory tract ailments and febrile illnesses are frequent causes for emergency care among children returning from travel.
6. Naudin J, Blondé R, Alberti C et al. Aetiology and epidemiology of fever in children presenting to the emergency department of a French paediatric tertiary care centre after international travel. *Arch Dis Child* 2012;97:107-111.
While malaria is an important cause of fever in the returning traveler, cosmopolitan infections are more common.
7. Flores-Figueroa J, Okhuysen PC, von Sonnenburg F et al. Patterns of illness in travelers visiting Mexico and Central America: The GeoSentinel experience. *Clin Infect Dis* 2011;53:523-531.
Even if not pediatric-specific, very important epidemiologic information is provided within this publication.
8. Lortholary O, Charlier C, Lebeaux D et al. Fungal infections in immunocompromised travellers. *Clin Infect Dis* 2013;56:861-869.
Good succinct review.
9. Fox TG, Manaloor JJ, Christenson JC. Travel-related infections in children. *Pediatr Clin N Am* 2013;60:507-527.
Nice, simple review
10. Leder K, Torresi J, Libman MD et al. GeoSentinel surveillance of illness in returned travelers, 2007-2011. *Ann Intern Med* 2013;158:456-468.
As stated by authors, data collected from this surveillance may assist in preparing more efficient pretravel educational strategies.
11. Matteelli A, Schlagenhauf P, Carvalho ACC et al. Travel-associated sexually transmitted infections: an observational cross-sectional study of the GeoSentinel surveillance database. *Lancet Infect Dis* 2013;13:2-5-213.
A very important health care problem if caring for adolescents.
12. Sommet J, Missud F, Holvoet L et al. Morbidity among child travellers with sickle-cell disease visiting tropical areas: an observational study in a French tertiary care centre. *Arch Dis Child* 2013;98:533-536.
Travel to tropical areas can be high-risk for patients with sickle cell anemia.

13. Peterson DC, Martin-Gill C, Guyette FX et al. Outcomes of medical emergencies on commercial airline flights. *N Engl J Med* 2013;368:2075-2083.
While the focus of this article is not pediatric-related, it is still a very important and revealing article. An interesting read.
14. Meltzer E, Stienlauf S, Leshem E et al. A large outbreak of *Salmonella* paratyphi A infection among Israeli travelers to Nepal. *Clin Infect Dis* 2014;58:359-364.
Careful where you eat.
15. Halbert J, Shingadia D, Zuckerman JN. Fever in the returning child traveller: approach to diagnosis and management. *Arch Dis Child* 2014;99:938-943.
Nice, easy-reading review. Several illustrative cases.
16. Cooper EC, Ratnam I, Mohebbi M, Leder K. Laboratory features of common causes of fever in returned travelers. *J Travel Med* 2014;21:235-239.
Nice observation of the utility of laboratory tests in the diagnosis of pathogens associated with fever and travel.
17. Bosilkovski M, Rodriguez-Morales AJ. Brucellosis and its particularities in children travelers. *Recent Pat Antiinfect Drug Discov* 2014;9:164-172.
An important, but rarely discussed clinical problem.
18. Herbinger KH, Alberer M, Berens-Riha N et al. Spectrum of imported infectious diseases: a comparative prevalence study of 16,817 German travelers and 977 immigrants from the tropics and subtropics. *Am J Trop Hyg* 2016;94:757-766.
Type of travel influences the spectrum of infectious diseases in travelers and immigrants.
19. Thwaites GE, Day NP. Approach to fever in the returning traveler. *N Engl J Med* 2017;376:548-560.
Not peds-specific, but good review and diagnostic-management algorithm.
20. Rabinowicz S, Schwartz E. Morbidity among Israeli paediatric travellers. *J Travel Med* 2017;24, November-December [issue 6]:1-7.
Gastrointestinal, febrile and dermatologic illnesses are important cause of morbidity in pediatric travelers. Nice paper.
21. Cingi C, Emre IE, Muluk NB. Jetlag related sleep problems and their management: A review. *Travel Med Infect Dis* 2018;24:59-64.
Good review on the topic.
22. Rubio E, Alejo-Cancho I, Aylagas C et al. Diagnostic value of platelet and leukocyte counts in the differential diagnosis of fever in returning traveler. *Am J Trop Med Hyg* 2019;100:470-475.
WBC and platelet counts can be valuable tests when ruling out malaria and arbovirus infections in returning febrile travelers.

23. Ashley DP, Fraser J, Yun H et al. A comparison of pretravel health care, travel-related exposures, and illnesses among pediatric and adult US military beneficiaries. *Am J Trop Med Hyg* 2019;100:1285-1289.
Nice comparison of adult and pediatric travelers. Covering pre- and post-travel.
24. Martin-Gill C, Doyle TJ, Yealy DM. In-flight medical emergencies. A review. *JAMA* 2018;320:2580-2590.
While not completely relevant to Pediatrics, gives a good summary of medical problems encountered on-board flights.
25. Rotta AT, Alves PM, Nerwich N, Shein SL. Characterization of in-flight medical events involving children on commercial airline flights. *Ann Emerg Med* 2020;75:66-74.
A review of in-flight medical events involving children. Very useful article.
26. Chong CH, McCaskill ME, Britton PN. Pediatric travelers presenting to an Australian emergency department (2014-2015): A retrospective, cross-sectional analysis. *Trav Med Infect Dis* 2019;31:101345.
A center's experience with children with travel-related problems.
27. Walker DM. Recognition and management of pediatric travel-associated infectious diseases in the emergency department. *Pediatr Emerg Med Pract* 2021;18:1-32, epub November 2.
Good discussion on common travel-associated infections seen in the ED.
28. Edis AW. Hints for travelling, in case of children. *Br Med J* 1881;20:149-150.
Interesting read. Look at the date. Interesting concerns of the era.
29. Dickinson JE. Remarks on travelling in India, and the influence it has on the health of young children. *Ind Med Gaz* 1866;1:290-291.
Another "oldie". Historical for sure.
30. Greenky D, Linam M, Yaffee A et al. Triage travel screening in the pediatric emergency department: A cross-sectional analysis to evaluate current use and effectiveness in identifying travel related illness. *Am J Emerg Med* 2022;56:113-116.
Improved history taking may help identify travel-related illnesses.
31. Wiltz P. Identifying and managing vector-borne diseases in migrants and recent travelers in the emergency department. *Curr Emerg Hosp Med Rep* 2023;11:58-65.
ED physicians need to consider vector-borne disease in febrile migrants and travelers. Sadly, not always the case.
32. Piyaphanee W, Stoney RJ, Asgeirsson H et al. Healthcare seeking during travel: An analysis by the GeoSentinel surveillance network of travel medicine providers. *J Travel Med* 2023;30:1-9.
Not a surprise to any of us, adherence to preventive measures is beneficial in so many ways.

33. Mazzocato P, Leder K, Deng L, Britton PN. Travel-associated illness in pre-pandemic Western Sydney, 2018-2020. *Public Health Res Pract* 2024;34:3432422.
This paper must be read by everyone caring for pediatric travelers. A lot of important findings. Cosmopolitan infections remain common. VFR are high-risk travelers who frequently receive no pretravel health advice.
34. Fonseca S, Pereira S, Martins A et al. Travel-related diseases and injuries in children and adolescents: A post-travel surveillance questionnaire assessment. *Acta Med Port* 2022;35:816-822.
Interesting data showing a fair number of pediatric travelers are reported to have a disease or injury. Good news is that hospitalizations are rare. Good read.

Venomous Animals

1. Junghanss T, Bodio M. Medically important venomous animals: biology, prevention, first aid, and clinical management. *Clin Infect Dis* 2006;43:1309-1317.
A good review on the topic.
2. Casale TB, Burks AW. Hymenoptera-sting hypersensitivity. *N Engl J Med* 2014;370:1432-1439.
Comprehensive review of the topic.

VFR Traveler (Pediatric)

1. Valerio L, Roure S, Sabrià M et al. Epidemiologic and biogeographic analysis of 542 VFR traveling children in Catalonia (Spain). A rising new population with special needs. *J Travel Med* 2011;18:304-309.
Not much is written about the pediatric VFR traveler. This article from Catalonia provides some very useful observations.
2. Hendel-Paterson B, Swanson SJ. Pediatric travelers visiting friends and relatives (VFR) abroad: illnesses, barriers and pre-travel recommendations. *Travel Med Infect Dis* 2011;9:192-203.
An excellent pediatric-specific VFR article.
3. Han P, Yanni E, Jentes ES et al. Health challenges of young travelers visiting friends and relatives compared with those traveling for other purposes. *Pediatr Infect Dis J* 2012; 31:915-919.
Another excellent paper from Boston. Should we train healthcare providers to travel advice to parents of VFR children?