SORRENTO TRAVEL CLINIC FACT SHEET

TRAVELLERS DIARRHOEA

The cause is contaminated food and water. There are three types of problems, and these are important to distinguish because they have different causes and different treatments.

- ◆ Common travellers diarrhoea. This is the one most travellers to developing countries experience sooner or later, with watery diarrhoea and sometimes vomiting. It is caused by bacteria, such as E.coli, Campylobacter, Salmonella and Shigella. It is treated with rehydration, and if persistent, with quinolone antibiotics such as ciprofloxin or norfloxacin.
- ◆ Giardia. This parasite is found in tap water in many cities around the world, as well as river water and contaminated food. It gives trouble that can drag on and on, sometimes long after returning home. It causes cramping stomach pain, bloating, belching and wind. It requires treatment with a different antiparasite preparation such as metronidazole (Flagyl) or tinidazole (Fasigyn).
- ◆ Dysentery. This is the severe end of the spectrum, with blood or mucus in the motions. Bacterial dysentery will usually improve with norfloxacin. Amoebic dysentery will not respond to quinolones but may respond to metronidazole/tinidazole. Dysentery can be a real medical emergency while travelling, and needs medical follow up on return home.

TREATMENT FOR ADULTS

All travellers to higher risk destinations are advised to take treatment for traveller's diarrhoea with them. A good kit will contain the following treatments:

- ◆ Rehydration is the most important thing. The last thing you want to do is to end up on a drip in hospital, so you must replace the fluids and salts that you lose. Not eating for a day does not matter so much, but if you do not drink you can become very unwell quickly, especially in a hot country. Drink at least 3 litres of fluid a day. The ideal fluid is bottled water with ORS (Oral Rehydration Salts) such as Hydralyte correctly added.
- ◆ Antibiotics. Norfloxacin or tinidazole depending on the type and duration of symptoms. (See The Diarrhoea Treatment Chart in the packs available from the clinic) These are very useful as they actually treat the cause of the problem, i.e. the infection.
- ◆ Loperamide. This is simply a 'stopper'...a sort of pharmacological cork. It may be convenient to use if you are about to get on a train or plane or give an important presentation, but it is not a treatment, and it is not generally recommended. Loperamide keeps the infection in the body, which means you will have the infection for, longer. Imodium, Lomotil, Codeine and other 'stoppers' all do the same thing.
- Nausea treatments. Common brands are Stemetil and Maxolon. These come in tablets, suppositories or injections and can help with nausea and vomiting.
 * Food. If you are hungry, eat a little. There is no need to 'rest the stomach', but try bland foods initially, especially carbohydrates such as rice, pasta, biscuits, bread or potato. Avoid too much dairy food, alcohol, fatty or spicy food while recovering.

TREATMENT FOR CHILDREN

Children under 12 pose a particular problem because they tend to become dehydrated more easily. Unfortunately, many of the treatments that are used in adults cannot be used in children. Nausea medication such as Stemetil can give children muscle spasms. Norfloxacin is not recommended for use in children under 18.

Loperamide may be used in a lower dose to 'buy time' if there are no toilet facilities, but it is not encouraged since it just keeps the infection in and must not be given to children under 12 years of age. **The mainstay of treatment in children is rehydration.** If the child is vomiting, give little sips of fluid given as often as possible. The ideal fluid is bottled water with Hydralyte (ORS) correctly added. If the child is hungry they may be allowed to eat. Limit dairy products and fruit juices, as these may not be well absorbed during recovery. Giardia can cause symptoms that drag on and on and in children it is usually treated with a course of metronidazole, which comes in syrup.