Letter to the Editor

Travel Medicine

The word travel literally means to go from one place to another. As our ancestors developed, they began travelling over longer ranges for their living, thus necessitating the invention of energy-saving devices. These included such items as sleds, rafts, canoes, animal-powered carriages, and later more powerful crafts, such as steamships, motor vehicles, electric trains, and other high-technology craft, including present-day spaceships.

Travel medicine in the early days of international travel was a branch of preventive medicine or curative medicine, acquiring medical knowledge regarding health risks to travelers while they were visiting different parts of the world. The key aspect was the know-how of physicians so that they could provide travelers with some protection against key diseases endemic in the host country, and be prepared if health problems did arise that needed treatment. Such arrangements were made mostly for persons moving from developed and industrialized countries to developing countries, and thus especially concerned a few diseases such as malaria, infectious diarrhea, and certain tropical diseases.

Nowadays, the phenomena of globalization and modern transportation have led to an enormous expansion of tourism, overseas vacations, leisure, and travel for educational and business purposes. Persons from developed countries also make visits to locations considered exotic by his or her own country's standards. Thus, a problem faced by host countries includes not only the necessity of being able to care for travelers, but also to address the impact on the local health scene as well as on carriers of certain infectious diseases back home. Therefore, current travel medicine requires physicians to be well versed in the knowledge of epidemiology, preventive and social medicine, as well and curative medicine. These aspects justify the identification of travel medicine as a distinct branch of medicine, one that is concerned with diseases and injuries related to travel, both internationally and domestically. From the economic perspective, travel medicine has become a crucial part of the tourism industry. No traveler would like to go to a country that is not safe.

The most important information in travel medicine is derived from epidemiological data on existing, emerging and re-emerging diseases around the world. Risk factors should be made known to travelers, such as the existence of rabid animals, poisonous animals and plants, dangerous diets, and all forms of hazardous pollution. Visitors need to be informed of ecological and climatic factors, such as the frequency of devastating storms, forest fires, active volcanoes, etc.

The definition of travel medicine includes not only illnesses that occur during the travel itself but also health condition related to preparations for international travel, i.e., the ill-health effects or the side-effects of vaccination or prophylaxis.

Full immunization nowadays is not considered cost-beneficial. Only selective immunization is recommended in official guidelines. For instance, enterotoxigenic *Escherichia coli* (ETEC) vaccine may be necessary for travelers in order to prevent one of the main causes of travelers' diarrhea, whereas other vaccines, prescribed and compulsory in the past, are no longer prescribed. As for the present, COVID-19 vaccination is mandatory in several countries, including Thailand.

Elderly travelers and those with underlying illnesses (particularly cardiovascular, chronic respiratory and mental diseases) are vulnerable to the development of medical problems while traveling. Thus, special plans must be arranged before travel.

Air travel is not always the comfortable experience depicted in advertisements. Increased incidence of deep venous thrombosis associated with immobility during long-haul flights in persons with poor blood circulation has been documented (it is popularly referred to as the "economy class syndrome"). Exhaustion

from long trips is a usual phenomenon, and it may have effects on the traveler's physical and mental health. Recently, it was reported that *Mycobacterium tuberculosis* can be spread among passengers in an airplane. It is certainly a potential cause of travel-related illness.

Properly prepared for the prevention of common travelers' diseases, the average traveler may assume that his or her trip will represent a truly healthful experience. In addition, in terms of preparation, an important issue is the identification of reliable physicians and services specializing in travel medicine in the host countries of developing and developed regions. This is part of health education, which is the best preventive measure for travelers; awareness of risks and hazards in the country to be visited would enable self-protection and as previously mentioned, in addition to identification of reliable physicians and medical services.

Currently, it is unfortunate that validation of skills in travel medicine is still lacking for physicians in both developing and developed countries. Clients need to understand that they should be prepared for travel and also know where to go to if they fall ill. Therefore, travel medicine practitioners must be provided with a compendium of information and advice. Informed physicians, alert to the health implications of globalization, will be well prepared to recognize and respond to future threats to personal and community health that are inevitable consequence of modern life.

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Documents Used for Editing

- 1. Mahapol N, Patarakulvanij S, Bovornkitti S. Travel Medicine. J Pub Hlth Sci. 2000;9:607-609.
- 2. Bovornkitti S. Travel Medicine in Thailand. Siriraj Med Gaz. 2001;53:694-702.
- 3. Srissamran K, Bovornkitti S. Travel Medicine: Concepts and implementation. *Travel Med J.* 2001; 3:1-3.
- 4. Bovornkitti S, Mahapol N. Health Resort and Hot Spring. J Pub Hlth Sci. 2003;12:465-474.
- 5. Bovornkitti S, Looareesuwan S, Wilairat P. Travel and Health Impacts. In: Bovornkitti S, Wilairat P, Looareesuwan S. Travel Medicine. Krungdhebvejsarn Publishing Co. 2004, pg. 5-25.