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Health Travel Tips



Headache Cold, Fever Sore Throat

THE PLANET TRAVELLER...TRAVEL TIPS

FEVER AND THE TRAVELLERS

Most international travellers who develop fever have localised symptoms that help the physician to focus on the probable cause. We, at The Planet Traveller have listed down some guidelines to help you evaluate the symptoms and signs of:

Headache

If you are unable to touch your chin to your chest (this is called neck rigidity), seek immediate medical help to exclude meningitis. If you have no neck rigidity and no sinus tenderness (tap forehead and cheeks with middle finger) or earache, take 2 paracetamol tablets and repeat in 6 hours. If fever persists for more than 2 days, seek medical help.

Earache with ear discharge

* Otitis media (inflammation of the middle ear) is the most likely cause. Consult a doctor for antibiotic treatment.

*Sinusitis

Pain can be elicited by tapping the forehead or cheeks. Consult a doctor for antibiotic treatment.

Common cold

If you have running nose, sneezing and generalised body aches, take 2 paracetamol tablets and an antihistamine. Symptoms usually persist for 2 to 5 days.

Sore throat

If you have no fever and tonsils are not enlarged, treat with lozenges. It is probably due to viral infection and hence antibiotic treatment is ineffective. If you have fever and enlarged tonsils, seek medical help. Penicillin V 500mg four times a day for ten days is the treatment of choice for tonsillitis*.

Cough with yellow sputum, chest pain when coughing or breathing and fever

Seek medical attention to exclude the possibility of pneumonia. This is best revealed by a chest X-ray.

Abdominal pain and fever

There may be associated vomiting, diarrhoea or constipation. Seek medical attention promptly. Abdominal tenderness suggest conditions such as appendicitis.

***Important notes:** Travellers with a history of recurrent upper respiratory tract infections, such as **otitis media**, **sinusitis** and **tonsillitis** can sometimes be treated presumptively with antibiotics if they are visiting remote area.

Fever, chills and rigours, headache, severe muscle aches

If you have been in a malarious area and if you suffer the above symptoms more than one week after potential mosquito exposures, seek medical help promptly. Malaria has to be excluded by doing blood smears. Fever that occurs at intervals of 48 to 72 hours is suggestive of malaria due to Plasmodium vivax or Plasmodium malariae.

If you have been suffering the above and exposed to freshwater activities such as swimming or hiking or have been in rural areas in Southeast Asia, seek medical help immediately. Possible cause include leptospirosis and scrub typhus.

If you have not been in malarious areas or have not been exposed to freshwater, you may have dengue fever. This viral infection is transmitted by mosquitoes. There is usually an associated generalised rash lasting 3 to 5 days. Bleeding and shock are likely complications.

Fever, muscle aches and dark (tea) coloured urine

These symptoms suggest hepatitis A or E. Both types have incubation periods of 14 to 21 days. Transmission by contaminated food and water. Seek medical attention. Gamma globulin or hepatitis A vaccine will prevent hepatitis A. There is no vaccine available for hepatitis E currently.

Penile discharge (thick pus) with burning on micturition

This occurs 2 to 10 days after sexual exposure, likely to be gonorrhoea. Treat it with a single dose of ciprofloxacin 500mg or ofloxacin 400mg. It would be wise to check for HIV (Human Immunodeficiency Virus) antibody 3 months after sexual exposure. If penile discharge is thin and watery 7 to 20 days after exposure, you most likely have nongonococcal urethritis caused by Chlamydia trachomatis. Seek medical attention.

Fever, burning on micturition with or without loin pain

These symptoms suggest urinary tract infection. Seek medical treatment. A course of antibiotics should subside the symptoms in 48 hours.

***Important notes:** Women with a history of recurrent urinary tract infections should be advised to carry treatment doses of an appropriate antibiotic in their medical kit.

