

## **Staying Healthy in HONDURAS**

### **Food and Water Precautions**

“Boil it, cook it, peel it, or...forget it!”

Try to avoid unpasteurized dairy products.

Use bottled water for EVERYTHING...including brushing teeth. Beware of ice!

Carbonated beverages are safe.

### **Traveler’s Diarrhea**

30-60% of travelers will experience traveler’s diarrhea (TD).

TD is defined as 4-5 watery BM’s over a few hours...can last 3-6 days.

TD can also present with cramping, nausea, vomiting, malaise, low-grade fever, etc.,

60% of cases of TD outside the U.S. are due to bacteria.

What to do? PeptoBismal 3-4 times/day.

Imodium or Lomotil (not if bloody diarrhea)

Fluid Replacement (bottled water/Gatorade)

Bring your own antibiotics. At onset of diarrhea (not just 1 BM, but several), you can start Rx. If after 24 hours, you are back to normal, you may STOP the antibiotic. If you are still having TD, take it for 3 days. If TD persists for > 3 days on antibiotics and/or you have fever, belly pain, bloody stools), please let a medico know.

Antibiotic recommendations: ciprofloxacin (Cipro), levofloxacin (Levaquin), or azithromycin (Zithromax). Rifaximin not as effective. CDC no longer recommends Bactrim or Septra due to resistance. Doxycycline not recommended due to possible photosensitivity reaction. Antibiotics are for the treatment of TD, not prophylaxis or prevention.

### **Malaria**

Malaria is a protozoan parasite transmitted by biting female anopheline mosquitoes.

Usually feed from dusk to dawn. Causes 1 million deaths per year. 30,000 travelers are infected every year. About 2 weeks from being infected/bitten, symptoms start: fever, CHILLS, sweats, headache, bodyaches, fatigue.

Wear DEET (20-35%) on skin and permetherin on clothing. DEET does not cause seizures or cancer. “Skin-So-Soft” is “Not-So-Effective”.

Malaria Prophylaxis: No drug is 100% effective, so still wear bug spray!

Get Rx from your primary health provider for Chloroquine 500mg #4 with 1 Refill.

Take 1 pill every week. Start one week prior to departure, while there, and for 4 weeks after returning.

## **Vaccinations**

Hepatitis-A: fecal-oral transmission. A small percentage of cases are fatal.

2 doses: a shot now (month 0) and one in 6 to 12 months. Need at least one dose a month before leaving for Honduras. Protection lasts up to 20 years.

Hepatitis-B: Blood borne pathogen: via sex or contact with blood. Shots @ 0, 1 & 6 months or 0,1,2, & 12 months. You need at least 2 doses before leaving.

Combination vaccine for Hep-A & Hep-B: TwinRix.

Shots @ 0, 1, 6 months OR @ day 0, day 1, day 21, and month 12.

You need 2 doses prior to departing for Honduras.

Typhoid: salmonella enterica serotype Typhi is a SERIOUS form of enteric fever. If untreated, there is a 10% fatality rate. Transmitted thru fecally contaminated food/water and person-to-person, flies landing on food, etc., Infection presents as a persistent high fever, headache, rash, slow heart-rate. Vaccine is only 50-75% effective, so wash your hands before eating and follow the food/water precautions.

There are two Typhoid vaccines: One is oral, other is a shot.

\*Oral Typhoid Vaccine: 4 pills (\$60.00) Take 1 pill every other day on an empty stomach. Pills must be kept in the refrigerator. If you forget to take a pill, don't panic. You have 10 days to complete the series. You must finish at least one week prior to departure. You will need a booster in 5 years.

\*Intramuscular Vaccine: One shot. Only lasts 2 years. Must have this at least 2 weeks prior to departure.

Routine vaccines:

Tetanus every 10 years.

Flu vaccine is recommended this Fall.

Novel H1N1 (swine) Flu: If available, get 2 doses before traveling.

**Novel H1N1 Flu:** Spread of novel the virus is thought to be happening in the same way that seasonal flu spreads. Flu viruses are spread mainly from person to person through coughing or sneezing by people with influenza. Sometimes people may become infected by touching something with flu viruses on it and then touching their mouth or nose.

- Wash your hands often with soap and running water, especially after coughing or sneezing. Use alcohol-based hand gels (containing at least 60% alcohol) when soap is not available and hands are not visibly dirty.

- Cover your mouth and nose with a tissue when you cough or sneeze, and put your used tissue in the trash. If you don't have a tissue, cough or sneeze into your upper sleeve, not your hands.
- Avoid close contact with sick people.

### **Dengue Fever**

Mosquito bites: *Aedes aegypti* & *Aedes albopictus*.

4-14 days from infection: Fever, frontal headache, joint/muscle ache, flu-like symptoms.

Rarely fatal, but 1% of case progress to Dengue Hemorrhagic Fever.

No vaccine, no medicine except acetaminophen, rest, fluids. NO aspirin or NSAIDS.

### **Sleep Aid**

Honduras can be very noisy at night (roosters, dogs, etc.). It is recommend you bring ear plugs and sleeping pills (e.g. Ambien, Sonata, Lunesta, or even Benadryl, etc.). A good night's sleep is an essential part of staying healthy!

### **Information:**

**[www.cdc.gov/travel](http://www.cdc.gov/travel)** Click on "Destinations" and then on the map of the world, click on Honduras.

WCHS- Clinic E (Travel Clinic): 919-250-3900 10 Sunnybrook Rd; Raleigh

Duke Travel Clinic: 919-416-3853 5716 Fayetteville Rd; Durham  
<http://www.dukehealth.org/Services/TravelClinic>