Stay healthy when travelling

Vodafone
Power to you
## Introduction

International travellers are subject to a variety of physical and psychological challenges, such as jet lag, poor local infrastructure, pollution, language difficulties and social isolation. When you or your staff are on a short business trip or taking up an international posting, adapting to different climates, cultures, religions, political regimes and social customs can be demanding. As well as the normal job hazards, additional factors may need to be considered such as local working conditions, local infections at the destination, different healthcare arrangements and personal security. For some destinations, travellers should also know the arrangements for emergency medical evacuation.

A little time spent on preparation is worthwhile. We have designed this to help you ensure you get the best from your business travel or assignment by remaining in the best of health.

---

**Matt Rae**  
Global Director of Health, Safety & Wellbeing

**Richard Spearman**  
Group Corporate Security Director

---

### Contents

<table>
<thead>
<tr>
<th>Sources of Travel Information</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Before you go</strong></td>
<td>5</td>
</tr>
<tr>
<td>When should you have a health assessment?</td>
<td></td>
</tr>
<tr>
<td>Are you fit to travel?</td>
<td></td>
</tr>
<tr>
<td>- Travel health assessments</td>
<td></td>
</tr>
<tr>
<td><strong>Manager’s responsibilities</strong></td>
<td></td>
</tr>
<tr>
<td>- Security and safety considerations</td>
<td></td>
</tr>
<tr>
<td><strong>Traveller’s responsibilities</strong></td>
<td></td>
</tr>
<tr>
<td>- Documentation</td>
<td></td>
</tr>
<tr>
<td>- Packing</td>
<td></td>
</tr>
<tr>
<td>- Safety and security</td>
<td></td>
</tr>
<tr>
<td>- Preparing for healthy travel</td>
<td></td>
</tr>
<tr>
<td>- Health matters</td>
<td></td>
</tr>
<tr>
<td>- Immunisations</td>
<td></td>
</tr>
<tr>
<td><strong>During the trip</strong></td>
<td>12</td>
</tr>
<tr>
<td>Flying</td>
<td></td>
</tr>
<tr>
<td>- Common medical problems of flying</td>
<td></td>
</tr>
<tr>
<td>- Are you fit to fly?</td>
<td></td>
</tr>
<tr>
<td>- Medical issues</td>
<td></td>
</tr>
<tr>
<td>- In-flight</td>
<td></td>
</tr>
<tr>
<td><strong>On arrival</strong></td>
<td></td>
</tr>
<tr>
<td>The hotel</td>
<td></td>
</tr>
<tr>
<td><strong>Traveller’s thrombosis</strong></td>
<td>16</td>
</tr>
<tr>
<td><strong>Looking after your health while you are away</strong></td>
<td>18</td>
</tr>
<tr>
<td>Food hygiene</td>
<td></td>
</tr>
<tr>
<td>Traveller’s diarrhoea</td>
<td></td>
</tr>
<tr>
<td>Prickly heat</td>
<td></td>
</tr>
<tr>
<td>Insect bites</td>
<td></td>
</tr>
<tr>
<td>Sun and swimming</td>
<td></td>
</tr>
<tr>
<td>Avoiding skin cancer</td>
<td></td>
</tr>
<tr>
<td>- Who is at risk?</td>
<td></td>
</tr>
<tr>
<td>- Preventing skin cancer</td>
<td></td>
</tr>
<tr>
<td>Cold climates</td>
<td></td>
</tr>
<tr>
<td>If you become ill abroad</td>
<td></td>
</tr>
<tr>
<td><strong>Managing jet lag</strong></td>
<td>22</td>
</tr>
<tr>
<td>What to do if you become ill on your return</td>
<td>24</td>
</tr>
<tr>
<td>Malaria and rabies</td>
<td>26</td>
</tr>
<tr>
<td>Immunisation record</td>
<td>28</td>
</tr>
<tr>
<td>Self-medication</td>
<td>29</td>
</tr>
</tbody>
</table>
When should you have a health assessment?

To ensure that you are fit to travel, it is best to have a health check at least two-yearly, especially if you have any medical problems, have had a recent operation, suffer from a blood disorder or are pregnant.

Assessment of fitness to travel and work overseas should take account of the nature of the trip and the work environment, and personal health. Any necessary immunisations, travel medicine advice and the supply of Medical Kits can be discussed prior to the trip.

There may be exposure to extremes of temperature and humidity, environmental pollutants, poor hygiene and disease-carrying insects. Social and cultural isolation may precipitate emotional instability, stress or alcohol abuse.

Contact your own doctor for medical advice on suitability to fly and work overseas before travel or job transfer, or when there is a higher risk because of travel frequency, exotic destinations, infectious diseases or if you have any concerns regarding fitness for travel.

Sources of travel information

<table>
<thead>
<tr>
<th>Resource</th>
<th>Internet site</th>
</tr>
</thead>
</table>
| Fit For Travel — to identify vaccinations required for each country and general advice | • www.fitfortravel.nhs.uk  
• www.nhs.uk/livewell/travelhealth/pages/travelhealthkit.aspx |
| MASTA — vaccination advice  
Boots travel clinics | • www.masta.org to find a travel clinic  
• www.boots.com/en/Pharmacy-Health/Health-shop/Travel-health/Travel-vaccinations-and-advice/ |
| Foreign and Commonwealth Office – UK travel and security advice | • www.fco.gov.uk |
| International SOS Worldwide Emergency Medical or Security Assistance for Vodafone people in the event of accidents, illnesses or security emergencies and evacuations abroad. | Tel: +44 7557 100300 |
| CWT last minute changes to travel bookings | Tel: +44(0)208 757 9000  
(Out of hours emergencies only. Each call charged at €20) |
| WHO International Travel and Health WHO book updated annually. Useful for certificate and malaria requirements | • www.who.int/ith |
| WHO Disease outbreak news | • www.who.int/csr/don/en |
| Health Protection Agency Malaria Reference Laboratory Reports of the UK Advisory Committee on Malaria Prevention | • www.malaria-reference.co.uk |
| British Airways Health and Wellbeing | • www.ba.com/health |
Are you fit to travel?

Travel health assessments

The content and frequency of travel health assessments should be risk-based for each individual. The assessment aims to:

- Identify any medical history relevant to your health and safety while working abroad (e.g. skin problems, depression, immune system problems, diabetes, heart disease, allergies, chronic back problems, gastric and bowel conditions, etc)
- Identify medical vulnerabilities and risks in relation to travel (e.g. recent surgery, DVT risk, jet lag) and/or working overseas (immunisations, stress, depression, sunlight, food hygiene, fluid intake, sexually transmitted diseases, notification of pregnancy, alcohol misuse)
- Warn of specific hazards or vulnerabilities (endemic diseases, environmental risks, etc)
- Determine fitness for work
- Ensure the availability of treatment/ screened blood overseas, if appropriate

Change of health during employment – a Health assessment is recommended for employees with concerns about fitness to work overseas, including those who have been taken ill abroad

Post-travel screening – it is unlikely that you will become ill after return. If you do, by far the commonest complaints are diarrhoea, coughs and colds and skin ailments. You should report any illness to your doctor and/or Occupational Health, but treat the symptoms in the normal way

For those returning with problems from destinations considered high risk in terms of intestinal and other pathogens, you should consider a consultation with your doctor. This will vary dependent on the locations visited, but may include some blood or stool tests e.g. eosinophil count, sedimentation rate, faecal microscopy for parasites, liver function tests and other specific serology

Manager’s Responsibilities

Before a member of their team travels, managers should:

- Carry out an appropriate risk assessment for the trip with the traveller
- Ensure travellers receive details of company travel and health insurance guidelines before departure
- Ensure travellers are medically fit before their journey
- Direct travellers to this website before travel/assignment

Risk assessment

This should include consideration of personal, social or medical vulnerabilities when selecting staff for travel/assignment and the assessment of risks at, and en route to, the overseas location.

The manager and the individual should consider:

- Duration of stay and frequency of travel
- Nature of the job, e.g. requirement for manual handling, working at heights, driving, etc
- Environment within which work is undertaken, e.g. local working conditions, any local epidemics, exposure to extremes of temperature and humidity, environmental pollutants, poor hygiene, disease carrying insects, infections, etc
- Provision of safe accommodation with regard to safety, hygiene and insect borne diseases
- Local arrangements for medical care – what to do if the traveller becomes ill
- Plans for emergency evacuation
- Personal, social or medical vulnerabilities, e.g. impact of social and cultural isolation causing changes in emotional stability, stress, or alcohol use
- Personal safety and security.

More detail

Background information:

- Area and site
  - location
  - access
  - communications
- Nature of the project - numbers of staff
- National and local political situation
- Emergency plans
- Climate and local environment
- Available medical facilities

Local assessment:

- Workplace health and safety
- Accommodation and domestic issues
  - sanitation
  - hygiene
  - availability of water
  - catering
- Transport to the workplace or hotel
- General health risks
- Specific infective health risks – endemic conditions and seasonal epidemics
- Local arrangements for medical care and availability of treatment
- Leisure
Before you go

Local healthcare assessment:

• First medical point of contact
• Primary/secondary hospital
  - specialist medical staff availability
  - facilities and standards
• Medical repatriation arrangements

- availability of medicines
- availability of screened blood
- sterilisation facilities

International SOS who provide Vodafone’s Worldwide Medical Emergency Assistance can advise on hospitals and clinics, security and safety considerations.

Consideration should be given to the security status of the destination to be visited. Areas where relevant Government agencies advise caution should be considered as ‘high risk’. This may be due to reasons of political instability, war, heightened security risk due to terrorism, hi-jacking or high crime rates. Useful agency contact details are www.fco.gov.uk CWT travel, and www.fitfortravel.nhs.com

In the event of travel to a ‘high risk’ area, greater care, protection and contingency planning will be required involving liaison with Vodafone’s travel, security and insurance departments. See the Security portal https://workspace2.vodafone.com/global/Security/VodafoneProtectAndSecure/Pages/default.aspx for more information on how to work securely on the move and when travelling for business.

Traveller’s Responsibilities

All business travellers have a duty to ensure they are fully aware of the health and security risks in countries they intend to visit, and take appropriate action. Government agencies provide advisory information for every country of the world, which includes visa entry requirements, currency, regulations, unusual health conditions, current crime and security situations, political disturbances, areas of instability, and special information about driving and road conditions. They also provide addresses and emergency telephone numbers for embassies and consulates.

As part of Vodafone’s commitment to your safety and security the Group Corporate security team operate a 24 x 7 x 365 emergency assistance line in case you get into any difficulties – the number is - +44 7557100300. This will take you straight to an emergency security control room. As part of the on-going support to high risk locations, the security team will request further information when you book these trips. This all happens pretty quickly and is of benefit to you as a traveller and the security and HS&W teams in case you get into difficulty. Should you have any concerns or questions around the security of your planned destination please don’t hesitate to contact the Group Corporate Security team for further support and advice.

Infections are the commonest illnesses affecting travellers. Injuries caused by accidents, violence or by excessive exposure to sun, heat or cold are also important and are the principal cause of death in working age travellers (heart disease claims most lives in older age). Travel to certain countries can also result in a ‘culture shock’ for even the most experienced travellers, causing feelings of loneliness, guilt and isolation.

When travelling to unfamiliar places, you should consider in advance how you will travel from the airport to your destination. The use of taxis when overseas is generally recommended for security reasons. Only licensed taxi companies are to be used. Your host or hotel should be able to advise on recommended companies to use at the airport and from your hotel. If arrangements have been made for you to be collected, ensure that you are clear how to identify the greeter.

Documentation – don’t leave home without it

All travellers should ensure they have:

• A valid passport (some countries do not accept entry on passports with less than six months to run) plus a photocopy of the relevant pages
• Any necessary visas
• All necessary tickets and hotel confirmations
• Destination emergency contact details – a copy of these should also be left with a colleague or partner

Packing

Be careful not to pack anything prohibited by airport authorities, airlines or country regulations (for instance, ephedrine found in many decongestants is not permitted in Japan). For security, ensure that any visible baggage tags show only a contact telephone number to maintain anonymity. Full name and address details should be fixed to the inside of your case.

Keep a change of clothing, toiletries, medicines and essentials in your hand luggage in case of lost luggage. If possible, do not put anything in the hold. It will delay you and there is a chance of it going missing.
Safety and security

The journey – Prepare carefully for immigration and arrival formalities. Complete immigration and customs forms clearly and accurately, answer immigration and customs officials politely and truthfully and ensure passports, luggage tabs and travel tickets are ready for checking.

Ensure you are clear about the identity of any greeter and use only official taxis. Travellers are more vulnerable to opportunistic crime when in unfamiliar surroundings. This is not the time to be macho, but rather to be safe!

Driving – Road traffic accidents are the most common cause of death and injury to travellers. Consider alternative modes of transport. If car travel is best, consider the route and, if it is appropriate, hire a local driver who will be more familiar with the roads.

Personal – You should be sensitive to cultural differences or religious practices to ensure that your behaviour is appropriate and does not offend. It is best to try to blend in and avoid standing out as a visitor. This extends to style of dress, jewellery, taking photographs and the use of mobile phones in public.

Valuables – Only essential valuables should be carried. Have a copy of your passport and insurance documents in case of loss. Important contact numbers should be available at all times including the local Vodafone or client office, travel insurers, local Consulate/Embassy, Credit Card Company, etc.

Preparing for healthy travel

You should aim to ensure that you are aware of health risks and how to manage them. Areas covered should include:

• Location-specific hazards e.g. disease outbreaks, impact of seasons on disease risk, environmental risks
• Health education – food hygiene, infectious hepatitis, sunlight, fluid intake, fresh water swimming, sexually transmitted diseases and self-care, e.g. of traveller’s diarrhoea
• General travel topics – jet lag, sleep and work schedules, road safety (the commonest cause of trauma) and deep venous thrombosis prevention
• Review of immunisations and malaria prevention required
• Equipment – sun creams, insect repellents and nets, emergency dental kits, first aid, self-treatment, and needles as appropriate
• Medication supplies and authorising letter
• Advance preparation for good dental health

Health matters

Before travel

• All medicines should be carried in hand luggage and kept in the original packaging
• Carry proof of prescribed medicines such as a signed letter on headed note paper from the physician
• If taking regular medication, take more than is necessary for the trip in case you have to extend your stay
• Take a spare pair of glasses and sunglasses
• Traveller’s medical kits should be considered by all overseas travellers

Immunisations

Immunisations protect against infections. Those recommended will depend on the country and area being visited. The duration of cover for the principal vaccines:

<table>
<thead>
<tr>
<th>Duration</th>
<th>Vaccines</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 years</td>
<td>Tetanus, Polio, Hepatitis A, Diphtheria courses and Yellow Fever</td>
</tr>
<tr>
<td>5 years</td>
<td>Hepatitis B courses</td>
</tr>
<tr>
<td>3 years</td>
<td>Meningitis A and C, Rabies and Typhoid</td>
</tr>
<tr>
<td>1-3 years</td>
<td>Japanese B encephalitis and Tick borne encephalitis</td>
</tr>
</tbody>
</table>

Advice for vaccinations may be obtained at www.fitfortravel.nhs.uk. You can get immunisation from your own GP or a travel centre e.g. Masta Travel Health Clinics www.masta-travel-health.com
During the trip

General
- Use a trolley rather than carry luggage
- Wear loose, comfortable clothing
- Balance relaxation and work during the journey
- Take a nap if you are tired – it helps
- Follow the airline’s advice on in-flight exercises to avoid ‘Traveller’s thrombosis’
- Eat light meals
- Take alcohol and caffeine only in moderation – drink plenty of water
- Remove contact lenses before sleeping
- Use moisturiser to help prevent your skin and lips becoming dry

Flying

Common medical problems of flying
The reduced air pressure in the aircraft cabin does not cause problems for most passengers, but may aggravate chronic heart or lung conditions. Travellers with sinus or ear disorders may also have problems due to cabin pressure. The cabin air is relatively dry leading to a dry mouth.

Are you fit to fly?
Commercial airlines cruise with a cabin altitude equivalent to between 4000 and 8000 feet. This means a reduction in pressure of about 20% compared with sea level and a reduction in blood oxygen saturation of about 10%. Consideration must be given therefore to the effects of this relative lack of oxygen. Any trapped gas will expand by up to 30%. If the Eustachian tubes are blocked by untreated respiratory infection this can cause pain and perforation of the ear drum, or it can cause stretching of suture lines following recent abdominal surgery. If someone is unable to walk a distance greater than 50 metres without becoming short of breath, it is likely that they will be unable to tolerate a pressurised cabin. More specific information can be gained, if necessary, from knowledge of the passenger’s blood gas levels and oxygen saturation.

Traveller’s thrombosis is a risk on long haul routes. See the Section on ‘Traveller’s thrombosis’.
In addition to the effect of a medical condition upon the sick passenger, account should be taken of the potential effect on other passengers or crew members. Filters for re-circulating cabin air remove bacteria and most viruses, so the risk of transmission of infection in the cabin is remote.

Regulations state that an individual should not fly during the infectious stage of any contagious disease!
During the trip

Pre-flight evaluation should focus on the passenger’s medical condition with consideration of infectivity, dosage/timing of medication (e.g. insulin) and the need to request special assistance.

Travelers should take life-line medication in their hand luggage.

Examples of conditions requiring particular evaluation include cardiovascular disease, deep vein thrombosis, respiratory tract disease, e.g. sinusitis, asthma, chronic obstructive airways disease, emphysema, recent surgery, cerebro-vascular disease, unstable psychiatric illness, diabetes and infectious diseases. Such conditions should be notified to the airline medical department.

Medical issues

- Check with your medical adviser if you suffer from heart, lung or other chronic medical problems, have had a recent operation, suffer from a blood disorder or are pregnant
- Travel sickness can be helped with an anti-sickness tablet
- Lowered humidity in the aircraft cabin
  - wear glasses in preference to contact lenses which will dry out and cause discomfort. If you are wearing contact lenses, remove them before sleep
  - use a moisturiser to refresh your skin and lips
- Ears and sinuses
  - pressure changes in the aircraft cabin (particularly on descent) can cause discomfort and pain. Repeated swallowing can help clear the middle ear passage. Alternatively, a decongestant can help if used one hour before descent
- In-flight exercises – avoid traveller’s thrombosis (DVT)
  - stand in your seat area and stretch your arms and legs every couple of hours and walk around the cabin whenever you can
  - follow the airline’s recommended in-flight exercises
- It is best to carry written confirmation of non-infectivity if you are jaundiced or suffering from a visible rash

In-flight

- Wear loose comfortable clothing
- Take a nap if you are tired – it helps!
  - read the advice on ‘Managing jet lag’
- Eat light meals
- Moderate your alcohol and caffeine intake

During the trip

- Drink plenty of water
- Move around the cabin and move your legs – see ‘Traveller’s thrombosis’

On arrival

Travelling can be physically and psychologically demanding. Simple actions can avoid problems. See ‘Looking after your health while you are away’.

- Take a gentle walk to stimulate circulation
- Allow time for relaxation
- Crossing multiple time zones will leave you with the effects of jet lag. Plan your business schedule carefully – see ‘Managing jet lag’
- Avoid drug and alcohol misuse – penalties can be high
- Avoid putting yourself at risk of sexually transmitted diseases
- Take precautions against heat and sun – see ‘Care in the sun’
- Use sun block
- Wear suitable clothing and sunglasses
- Avoid the hottest hours 11am-3pm
- Drink plenty of water
- Take care when eating and drinking
  - use bottled water
  - avoid ice cubes
  - ensure food is well cooked and at the right temperature
- Avoid putting yourself at risk of insect or animal bites – see ‘Malaria and rabies’

The hotel

See document ‘Travelling safely and securely’.

- Avoid rooms on the ground floor, near lifts or close to the housekeeping corridor, if possible
- On arrival, familiarise yourself with the emergency procedures and the location of fire exits
- Keep your room locked at all times
- Leave a light and the television on when you go out
- When answering the door, use the door viewer and confirm the identity of the visitor before opening the door. If you do not know them do not open the door
- Use the room or hotel safe for all valuables
Traveller’s thrombosis

Background
Deep venous thrombosis (DVT) describes the development of blood clots, usually in the lower legs. There is an association between long journeys and DVT, with thromboses being reported after car, bus, rail or air travel. The risk increases over age 40. 75% of DVTs occur in passengers who already had at least one other risk factor:

- Previous personal or family history of DVT
- Abnormality of blood clotting
- Heart disease
- History of malignant disease
- Hormone treatment including oral contraceptives and oestrogen containing hormone replacement therapy
- Pregnancy
- Recent major surgery or injury, particularly affecting the lower limbs or abdomen
- Recent immobilisation for a day or more

Research has also suggested an added risk from smoking, obesity and varicose veins.

Avoiding traveller’s thrombosis

- Wear loose fitting comfortable clothes when travelling
- Drink adequate fluids but avoid beverages which contain alcohol and/or caffeine before and during the flight
- Avoid smoking
- Avoid crossing legs when seated
- Walk around the cabin whenever you can
- Stand up in your seat area and stretch your arms and legs
- Carry out alternating stretching and flexing foot and leg exercises
- Consider traveller’s stockings
- Consider low dose Aspirin or other anticoagulant measures before the flight if you have any of the risk factors listed above

After the journey

- Take a gentle stroll to stimulate your circulation
- Allow time for relaxation
- Jet lag
  - crossing time zones means that you will be trying to sleep at times when your body would normally be awake
  - try taking a nap if you are tired – any sleep is better than none
  - see the advice on ‘Managing jet lag’

What to look out for
DVT is most common in the lower limbs and may occur without any obvious signs or symptoms. The symptoms are pain, swelling and discolouration of the affected limb. The leg may also feel warm and there may be congestion of the superficial veins.

Pulmonary embolism
The danger of DVT is that, in some cases, small pieces of clot detach and are carried in the blood stream to the lungs causing a pulmonary embolus. This usually occurs some hours or days after the formation of the clot. It may result in serious consequences including chest pain, shortness of breath and even sudden death.
Looking after your health while you are away

Food hygiene
- Many diseases are transmitted by eating contaminated food
- Eat only food that is hot
- Avoid salads, fruit you can’t peel, cold dishes, dairy products, fish, and ice in drinks
- Avoid eating in places with doubtful hygiene standards

**Remember – peel it, cook it or boil it. If not, don’t eat it.**

Traveller’s diarrhoea is very common
- Drink only bottled water
- Use bottled water for cleaning teeth
- If you develop diarrhoea
  - drink plenty of fluids
  - plain fluids can be supplemented with salt and sugar sachets (e.g. Dioralyte)
  - avoid anti-diarrhoeal medication unless the symptoms are debilitating
  - if symptoms persist for more than 2 days, your stools are bloody or you feel weak, seek urgent medical attention

**Note – diarrhoea and vomiting both decrease the effectiveness of the oral contraceptive pill.**

Prickly heat
- a skin condition associated with excessive sweating in hot climates
- Wear loose fitting cotton garments
- Drink plenty fluids
- Calamine lotion will be soothing

Insect bites
- Wear long sleeves and trousers, especially after dark. Avoid dark colours
- Always wear shoes
- Mosquitoes commonly bite between dusk and dawn
- Use insect repellents during the day in areas where dengue is known to exist
- Use air conditioners at night. Keep doors and windows shut. If necessary use a mosquito net treated with Permethrin and tuck the net into the mattress
Looking after your health while you are away

Sun and swimming

• Cover up
  - wear loose cotton clothing
  - wear good UV protective sunglasses
  - wear a wide brimmed hat
  - use a sunscreen with Sun Protection Factor of at least 15
• Don’t swim in fresh water rivers or lakes in tropical or sub-tropical countries unless they are known to be free from Bilharzia (Schistosomiasis – caused by parasitic worms)

Avoiding skin cancer

Exposure to the sun’s ultraviolet (UV) rays is an important factor in developing skin cancer – a largely preventable disease if sun protective practices are used consistently. UV rays from artificial sources such as tanning and sun lamps are as dangerous and should be avoided.

Who is at risk?

Anyone can develop skin cancer, but certain risk factors increase the susceptibility, including:

• Light skin, hair, or freckles
• A previous personal or family history of skin cancer
• A history of chronic exposure to the sun
• A history of sunburn early in life
• Certain types of moles and/or a large number of moles

Preventing skin cancer

There are a number of easy steps to protect against the sun’s UV rays. These are important all year round and during all outdoor activities – not just when at the beach or the pool.

Seek shade – Because UV rays are strongest and do the most damage around midday, outdoor activities should be avoided at this time. Finding shade is a practical way to protect the skin.

Cover up – A long sleeved shirt/blouse and long trousers are good choices. A typical shirt has a sun protection factor (SPF) rating lower than the recommended SPF15, so it is wise to increase protection by using sunscreen with SPF of at least 15 and staying in the shade whenever possible.

Wear a hat – The head and neck are common sites for skin cancer so wear a hat to shade the face, ears, scalp and neck from the sun.

Wear shades – Sunglasses protect the sensitive skin around the eyes and reduce the risk of developing cataracts. Choose sunglasses that block both UVA and UVB rays.

Use sunscreen – These absorb, reflect or scatter the sun’s rays on the skin. The higher the SPF, the greater the protection. Ensure you use a sunscreen with an SPF of at least 15 that protects against both UVA and UVB rays.

To be effective, sunscreen needs to be applied 30 minutes before going outdoors and re-applied every 1½ hours. Sunscreens are available in many forms – ointments, creams, gels etc., and the type you use is down to individual choice. Chemical free sunscreens contain titanium oxide and/or zinc oxide and reflect both UVA and UVA and are useful if you are allergic to chemical sunscreens but they may limit your ability to perspire effectively.

Advice about cold climates

• Be aware of the effects of cold
• Consult the locals on suitable clothing
• Wear thermally insulated clothing when necessary or wear suitable clothing using natural fibres that trap air and seal in body warmth
• Food and warm drinks give energy
• Activity may also help to increase body warmth
• Alcohol worsens the effects of cold

If you become ill abroad

The first thing is to work out what treatment you need and where you are going to get it. Useful contacts locally may be the people you are visiting or connecting with, or the hotel. For professional advice and authorisation of treatment call International SOS at any time on +44 7557 100300

The international operations centre can advise on treatments and speak with the hospital or doctor to ensure that their treatment plan is appropriate for your symptoms.
Jet lag describes symptoms after flying across multiple time zones (fatigue, sleep disturbance, altered appetite, difficulty sleeping, poor concentration and general malaise). Its severity depends on the number of time zones crossed rather than the length of the flight. The symptoms occur when our body clock is not synchronised with the time zone we are in.

Our body clock takes about one day to fully adjust for every one-hour time zone we cross. Light exposure, sleep and social factors such as meal times may influence the rate of adjustment. The symptoms of jet lag will be noticeable during the first few days after a long haul flight. As the days pass, these symptoms lessen but there may still be times when they are worse.

Jet lag reduces intellectual and physical performance. Memory, communication skills, and decision making deteriorate, particularly if prolonged effort or concentration is required. You need to take this into account if making critical decisions.

Most travellers sleep less than when at home, but you need just as much sleep wherever you are. You should try to get as much sleep each day during the trip as you would at home.

Jet lag reduces intellectual and physical performance. Memory, communication skills, and decision making deteriorate, particularly if prolonged effort or concentration is required. You need to take this into account if making critical decisions.

Reducing the effects of jet lag

Develop a regular pre-sleep routine – Educate your body that it is time to sleep by developing a regular routine prior to bed, e.g. reading, taking a warm bath, listening to relaxing music.

Manage your sleep environment – On the plane, dress in layers so you can keep a comfortable temperature. Use ear plugs to block noise. Before you sleep, divert calls to voice mail and use an eye shade to darken the room if the curtains do not do this. Keep the room cool rather than warm.

Napping – If you feel sleepy, you are! Take a short nap if you can – any sleep is better than none. If you are going to nap during the day, limit it to 45 minutes and you shouldn’t wake up feeling groggy. Avoid longer naps because you will sleep more deeply, which means when you wake you will feel disorientated – this is called sleep inertia. Also, a long nap will make it more difficult for you to have a good sleep at night.

Caffeine – Stimulates so use it strategically. It takes about 30 minutes to work, lasting about four hours. Avoid caffeine before bedtime. Coffee has more caffeine than tea and cafetiere coffee more than instant. Some cola also contains caffeine. Before bed, use decaffeinated drinks.

Alcohol – Avoid drinking more than one or two units of alcohol as this can reduce the amount of beneficial dreaming sleep you have and will also produce disturbed sleep during the night.

Diet – Foods do not affect jet lag, but your digestive system will not be adapted to local time, so you feel hungry at times which are not meal times and vice versa. In the days after travel you should eat when hungry and gradually align your eating pattern with the local time. Don’t eat a large meal just before bed time as this may make sleep difficult.
What to do if you become ill on your return

If you become ill on your return

- Continue taking any anti-malarial or other medication for the prescribed period following your return
- Report any illness to your physician and/or Occupational Health on your return and remember to tell them:

When did you travel?
As some illnesses for example rabies, hepatitis and tuberculosis may have long incubation periods you may also have to mention previous trips.

Where did you go?
Many infections are regional and/or seasonal. Tell the doctor which countries you have visited, and be specific about the area and time of year/season.

How long were you away?
The risk of infection is often related to duration of exposure. The likely cause of illness is dependent on the incubation period and how long you had been in the country. For instance, malaria can be excluded if you developed fever only one day after arriving in a malarious area.

Doctors undertaking post-travel consultations and screening must have a thorough knowledge of the geographic distribution of exotic diseases and their incubation periods.

How did you travel?
Most business travellers stay in safe hotels, eat safe food and participate in safe activities. However, travellers may visit sites well away from urban centres on business or in leisure time. Tell the doctor of any such activities — particularly if you went swimming in fresh water rivers or lakes.

What vaccinations have you had?
Give the doctor a list of your vaccinations together with reasons why any recommended vaccines were not administered.

Did you take malaria prophylaxis?
Which drug and anti-mosquito precautions did you use? Did you follow the dosage and duration?

Did you take any other medicines?
Tell the doctor if you take any regular medication or took any other medicines whilst away.

Did you eat any unusual food?
Tell the doctor if you ate any unusual food overseas, particularly if it was raw or semi-raw.

Were you bitten by any insects or animals?

Were you ill during your trip?
Give details of any illness or treatment and contact details of any treating doctor. Bring back your X-rays, lab reports, etc.
Malaria

Malaria is a parasitic infection of red blood cells occurring throughout tropical regions. It is passed to humans by mosquito bites and produces symptoms similar to severe 'flu – high fevers with profuse sweating alternating with shivering and chills. The incubation time is at least seven days from being bitten before you experience any illness, but it can take up to three months and sometimes even a year - so be aware! Obtain advice immediately if you develop symptoms.

Obtain advice immediately if you develop symptoms.

Rabies

Rabies is a brain infection after a bite, scratch or, uncommonly, a lick from an infected animal. It is a world-wide infection, with the exception of a handful of countries such as Australia, New Zealand, the UK and Japan, Thailand and India, in particular, present a significant risk. The incubation period ranges from a week to a year or more, but is usually less than 2 months.

What to do in the event of a bite

- Record details of the animal, i.e. wild or domestic and its behaviour and condition
- Bleed the wound by squeezing the affected area immediately
- Wash the wound as soon as possible with running water for at least 5 minutes
- Seek urgent local medical attention in order to obtain essential treatment

If you become ill on your return, always tell your doctor you have been in a malarious area. Your chances of being bitten by an infected mosquito depend on your destination. Whilst some cities in tropical countries may be free of malaria, the surrounding countryside is not. The most effective protection against malaria is to avoid mosquito bites, but you will also need the extra protection of anti-malarial tablets. Start taking anti-malarials before you go, continue during your visit and for a period following your return. The exact timescales will depend on the medication being used. The extra weeks after your return are important to ensure that any parasites in your body are prevented from multiplying. The tablets you need depend on the country and region being visited. The tablets do not provide 100% protection. It is also important to:

- Wear long sleeves and trousers especially after dark. Avoid dark colours. Always wear shoes
- Avoid going out between dusk and dawn when mosquitoes commonly bite
- Use insect repellents during the day in areas where dengue is also known to exist
- Use air conditioners at night. Keep doors and windows shut. If necessary use a mosquito net treated with Permethrin and tuck the net into the mattress

Pregnant women should not visit malarial areas unless it is unavoidable. If they do have to travel, they and their unborn child are vulnerable as malaria can pass across the placental barrier. It is therefore especially important for pregnant women to practise full anti-malarial precautions, including the use of prophylactic drugs.
# My immunisation record

<table>
<thead>
<tr>
<th>Type</th>
<th>Date</th>
<th>Date</th>
<th>Date</th>
<th>Any reaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hep A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hep B</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yellow Fever</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polio</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tetanus</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diphtheria</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cholera</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Typhoid</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If you have any feedback or further queries please contact

tessa.rome@vodafone.com

Your input is greatly valued.