

TRAVAX® Provider Health Report

HEALTH CONCERNS SUMMARY

The following may pose a risk or require preventive measures based on this itinerary. See the report sections below for details.

- **Vaccine-Preventable Diseases:** cholera, hepatitis A, hepatitis B, influenza, Japanese encephalitis, polio, rabies, typhoid
- **Malaria**
- **Other Diseases:** arboviral infections, avian influenza, dengue fever, leishmaniasis, rickettsial infections, schistosomiasis, traveler's diarrhea, tuberculosis

YELLOW FEVER SUMMARY

Based on a Round Trip with United States as the Home Country

| Yellow Fever Requirement Summary | | | | |
|----------------------------------|--------------|------------------|-----------------|----------|
| Country | Transm. Risk | Required From | For Age & Older | See Note |
| UNITED STATES | No | None | None | |
| THAILAND | No | Ctry w/ Tr. Risk | 9 mos. | |
| BANGLADESH | No | Ctry w/ Tr. Risk | 1 yr. | |

Requirement: Official certification of vaccination **is not required for entry** with this itinerary sequence. Health-related requirements for a **visa** may be different; if a visa is necessary, be sure to inquire when applying (up-to-date requirements are not always listed on forms or web sites).

Recommendation: Yellow fever vaccination **is not needed** for health protection when visiting countries on this itinerary.

Practical Requirement Information

- **Bangladesh, Thailand**
 - required for travelers coming from countries with risk of yellow fever transmission.

OTHER IMMUNIZATION RECOMMENDATIONS

- **Hepatitis A**
 - **Bangladesh, Thailand**
 - *Recommended for:* all travelers.
- **Typhoid**
 - **Bangladesh, Thailand**
 - *Recommended for:* all travelers.
- **Hepatitis B**
 - **Bangladesh, Thailand**
 - *Recommended for:* prolonged stays; frequent short stays in this or other high risk countries; adventure travelers; the possibility of acupuncture, dental work, or tattooing; all health care workers; the possibility of a new sexual partner during stay; and travelers with high potential to seek medical care in local facilities. Consider for short stays in travelers desiring maximum pre-travel preparation. Increased awareness is recommended regarding safe sex and body fluid/blood precautions.
- **Japanese encephalitis**
 - **Bangladesh**
 - Significant risk exists in rural areas throughout the country. Transmission occurs from May to October. *Recommended for:* prolonged stays or frequent short stays in risk areas; shorter rural visits by those with extensive outdoor exposure, such as hikers and adventure travelers; and all long-term urban expatriates due to the likelihood of occasional rural travel. Not recommended for urban areas or short visits to usual rural tourist sites. Evening and nighttime insect precautions are recommended.
 - **Thailand**
 - Significant risk exists in rural areas throughout the country, with much higher risk in the north (Chiang Mai Valley). In northern portions of mainland Thailand, transmission occurs from May to October with epidemic peaks normally in July. In the southern mainland and the isthmus, transmission may occur throughout the year. Sporadic cases

are reported from the suburbs of Bangkok. *Recommended for:* prolonged stays or frequent short stays in risk areas; shorter rural visits by those with extensive outdoor exposure, such as hikers and adventure travelers; and all long-term urban expatriates due to the likelihood of occasional rural travel. Not recommended for urban areas (including Chiang Mai city) or short visits to usual rural tourist sites. Evening and nighttime insect precautions are recommended.

- **Rabies**

- **Bangladesh**

- Risk occurs in most parts of the country. *Recommended for:* prolonged stays with priority for young children. Also recommended for shorter stays at locations more than 24 hours' travel from a reliable source of human rabies immune globulin and rabies vaccine for postexposure treatment; occupational exposure; all adventure travelers, hikers, cave explorers, and backpackers. Consider for risk-averse travelers desiring maximum pre-travel preparation. All dog bites or scratches while in this country should be taken seriously and post-exposure prophylaxis sought even in those already immunized.

- **Thailand**

- High risk occurs in most parts of the country with higher risk in central areas. *Recommended for:* prolonged stays with priority for young children. Also recommended for shorter stays at locations more than 24 hours' travel from a reliable source of human rabies immune globulin and rabies vaccine for postexposure treatment; occupational exposure; all adventure travelers, hikers, cave explorers, and backpackers. Consider for risk-averse travelers desiring maximum pre-travel preparation. All dog bites or scratches while in this country should be taken seriously and post-exposure prophylaxis sought even in those already immunized.

- **Cholera**

- **Bangladesh, Thailand**

- *Recommended for:* aid and refugee workers only. Vaccine is available in many countries, but not in the U.S.

- **Influenza**

- **Bangladesh, Thailand**

- Flu (including 2009 H1N1) is transmitted throughout the year in the tropics, and all travelers are at increased risk. *Recommended for:* all travelers. Consider a standby treatment course of oseltamivir for unvaccinated travelers, especially those who are at high risk for complications from influenza.

- **Routine vaccinations (adults only)**

- **Tetanus/diphtheria/pertussis** (all countries)—Adequate primary series plus booster within the last 10 years (Tdap or Td). Those who have not received a previous dose of an acellular pertussis-containing vaccine in adulthood should receive a one-time dose of Tdap vaccine, regardless of interval since last tetanus/diphtheria-containing vaccine.
- **Measles/mumps/rubella**
 - **Bangladesh, Thailand**
 - Indicated for those born in 1957 or later (1970 or later in Canada) without a history of disease, laboratory evidence of disease, or of 2 adequate doses of live vaccine at any time during their life. Many countries (including the U.K.) recommend that adults need to have had only 1 countable dose at any time during their life.
- **Pneumococcal** (all countries)—All adults over 65 and those with chronic disease or compromising conditions.
- **Polio**
 - **Bangladesh**
 - Adequate primary series and 1 adult dose.
 - **Thailand**
 - Adult polio boosters are unnecessary for travel to this country.
- **Varicella** (all countries)—Indicated for all persons born outside the U.S. or born in the U.S. after 1979, except not indicated for persons with an adequate vaccination history (2 lifetime doses), reliable evidence of previous infection, or laboratory confirmation of immunity.

MALARIA

Malaria Information

- **Bangladesh**

- **General information:** predominantly *P. falciparum*. Transmission occurs throughout the year.
- **Protective recommendations:**
 - *Chemoprophylaxis is recommended for all travelers:* throughout the division of Sylhet; certain districts (see map) in the divisions of Rangpur, Dhaka, and Chittagong; all cities and towns within these areas.
 - *Chemoprophylaxis is recommended for certain travelers (see Issues to Consider inset):* certain districts (see map) in the divisions of Rangpur, Dhaka, Chittagong, and Khulna; all cities and towns within these areas.
 - *Insect precautions only are recommended (negligible transmission is reported):* all other areas not mentioned above except the city of Dhaka.
 - *No protective measures are necessary (no evidence of transmission exists):* the city of Dhaka.

- **Thailand**

- **General information:** approximately equal *P. falciparum* and *P. vivax*. Transmission occurs throughout the year, and is

highest from May through October.

o **Protective recommendations:**

- *Chemoprophylaxis is recommended for all travelers:* throughout the provinces of Mae Hong Son, Tak, Chanthaburi [13], Trat, Chumphon, Ranong, Yala, and Narathiwat; forested areas in the provinces of Surat Thani and Phangnga (see map); the islands of Ko Chang and Ko Kut; forested areas along the borders with Burma, Laos, and Cambodia; all cities and towns within these areas.
- *Chemoprophylaxis is recommended for certain travelers (see Issues to Consider inset):* rural areas of Phuket and southern Phangnga provinces, excluding usual tourist resorts
- *Insect precautions only are recommended (negligible transmission is reported):* the islands of Ko Phangan, Ko Phi Phi, Ko Lanta, and all other islands not mentioned above or below; all other mainland areas not mentioned above, including all cities and towns in these areas except Bangkok, Pattaya, Chiang Mai, Chiang Rai, Phuket, and Phangnga.
- *No protective measures are necessary (no evidence of transmission exists):* the islands of Ko Samui and Ko Samet; the cities of Bangkok, Pattaya, Chiang Mai, Chiang Rai, Phuket, and Phangnga.

Malaria Prophylaxis

Drug choice depends on personal factors discussed between the traveler and medical provider. No preventive measure is 100% effective. Immediate medical attention is necessary for fever or flu-like illness within 3 months after travel in a malaria risk area. Include mention of travel history.

- **Thailand**

- o **Protective measures:** Evening and nighttime insect precautions are essential in areas with any level of transmission. Atovaquone/proguanil (Malarone) and doxycycline are protective in this country.

- **Bangladesh**

- o **Protective measures:** Evening and nighttime insect precautions are essential in areas with any level of transmission. Atovaquone/proguanil (Malarone), doxycycline, and mefloquine are protective in this country.

Issues for Medical Providers to Consider

Factors favoring chemoprophylaxis

- ◆ Adventure travel
- ◆ Risk-averse travelers
- ◆ Vulnerable travelers
- ◆ Immigrants visiting friends and relatives
- ◆ Flexible itineraries
- ◆ Travel longer than 1 month
- ◆ Unreliable medical expertise and/or treatment drugs at destination

Factors against chemoprophylaxis

- ◆ Air-conditioned hotels only
- ◆ Urban areas only
- ◆ Non-transmission season
- ◆ Minimal nighttime exposure
- ◆ Travel shorter than 3 days

See the *Technical Explanation of Malaria Mapping* document for more information.

PROVIDER SUMMARY BY COUNTRY

BANGLADESH

Bangladesh is a developing nation in the lowest 25% of the world's economies. Located between India and the Bay of Bengal in southern Asia, its climate is tropical, with mild winters, hot, humid summers, and a warm, rainy monsoon season.

TRAVELER'S DIARRHEA

- High risk throughout the country including deluxe accommodations in major cities. Food and beverage precautions are essential in order to reduce chance of illness.
- Travelers should carry loperamide and/or a quinolone antibiotic for presumptive self-treatment of diarrhea if it occurs.

OTHER CONCERNS

- **Current Health Concern - posted November 25, 2011**

Chikungunya: According to Bangladeshi health authorities, 46 confirmed cases of chikungunya fever have been reported in Dohar near Dhaka city (31), Chapai Nawabganj District in the Rajshahi Division (12), and Dhaka city (3) so far this year. These are the first reported chikungunya cases in Bangladesh since 2009. Chikungunya is an arboviral infection, transmitted by mosquitoes. Travelers are advised to practice daytime and nighttime insect precautions.

- **Tuberculosis** is common in all developing countries. However, this country has an incidence of over 100 cases per 100,000 population, the highest risk category. Travelers planning to stay more than 1 month should have pre-departure PPD skin test status documented. Travelers should avoid crowded public places and public transportation whenever possible. Domestic help should be screened for TB.

- **Dengue** fever presents significant risk in urban and rural areas including Dhaka. The highest number of cases is reported from June to December. Daytime insect precautions are recommended.
- **Leishmaniasis** (visceral), transmitted by sandflies, occurs. Evening and nighttime insect precautions are recommended.
- **Chikungunya fever**, an arboviral infection transmitted by mosquitoes, occurs. Daytime and nighttime insect precautions are recommended.
- **Avian influenza H5N1**, excreted in large amounts in the droppings of infected birds, is endemic. Sporadic human cases acquired by direct contact with poultry are reported in this country. The last human case was reported in March 2011. The last case in birds was reported in June 2011. Although risk to travelers is minimal, avoid places where direct contact with birds and/or their secretions may occur, such as live animal markets and poultry farms. Well-cooked chicken is safe to eat. Current influenza vaccines are not protective. Oseltamivir is effective.
- **Arsenic contamination**: Due to widespread arsenic contamination, well water should be avoided.
- **Security**
 - *Consular Travel Warning*: Due to ongoing security concerns and political instability, a Canadian consular warning currently advises against all travel to the Chittagong Hill Tracts region. Other governments advise against all non-essential travel to the Chittagong Hill Tracts, excluding the city of Chittagong.
 - *Important Issues*: Avoid all public demonstrations and gatherings as these may suddenly turn violent. Enforced general strikes ("hartals") may shut down all commerce and transportation and provoke attacks on those not complying.
 - *Aviation Assessment*: The FAA (U.S.) has determined that the civil aviation authority of this country does not oversee its air carriers in accordance with minimum international safety standards.

MEDICAL CARE

- Medical care is substandard throughout the country including Dhaka. Adequate evacuation insurance coverage for all travelers is a high priority. In the event of a serious medical condition, medical evacuation to Bangkok (Thailand) is likely to be necessary. Hospital accommodations are inadequate throughout the country and advanced technology is lacking. Shortages of routine medications and supplies may be encountered.
- For emergency services, call 999 (Dhaka Metro Police Exchange). English may not be spoken. Outside of Dhaka, dial 02-999.
- Ambulance service is limited.
- Cash payment may be required prior to treatment. Because this is primarily a cash economy, credit cards may not be accepted for medical care.
- Rh-negative blood may be difficult to obtain; the blood type of the general Asian populace is Rh positive.

THAILAND

Thailand is a developing nation but is in the upper half of the world's economies. Located in Southeast Asia, it has a tropical, monsoonal climate.

TRAVELER'S DIARRHEA

- High risk throughout the country including deluxe accommodations in major cities. Food and beverage precautions are essential in order to reduce chance of illness.
- Travelers should carry loperamide and/or azithromycin for presumptive self-treatment of diarrhea if it occurs.

OTHER CONCERNS

- **Current Health Concern - updated November 16, 2011** (posted October 31, 2011)
Flood relief work: Heavy rains since August 2011 have resulted in extensive flooding in many areas of the country, primarily in the central provinces north of and surrounding Bangkok. Increased disease risk (gastrointestinal, chikungunya, and dengue fever) in the ongoing aftermath of the flooding is possible. Travelers should avoid exposure to or consumption of non-potable water and practice diligent insect precautions.
- **HIV**: 5% of sex workers in the capital city are estimated to be HIV positive. Travelers should clearly understand STD concepts and risks for HIV transmission.
- **Tuberculosis** is common in all developing countries. However, this country has an incidence of over 100 cases per 100,000 population, the highest risk category. Travelers planning to stay more than 1 month should have pre-departure PPD skin test status documented. Travelers should avoid crowded public places and public transportation whenever possible. Domestic help should be screened for TB.
- **Dengue** fever presents significant risk in urban and rural areas including Bangkok. The highest number of cases is reported from May to September. Daytime insect precautions are recommended.
- **Chikungunya** fever, an arboviral infection transmitted by mosquitoes, occurs. In 2008-09, the most affected provinces were in the southernmost part of the country, and included Narathiwat, Songkhla, Pattani, and Yala. Daytime and nighttime insect precautions are recommended.
- **Rickettsial** disease, including scrub typhus and murine typhus, occurs. Personal protective measures are recommended against exposure to mites in moist rural areas and fleas in areas with where rodents are common.

- **Avian influenza H5N1**, excreted in large amounts in the droppings of infected birds, is endemic. Sporadic human cases acquired by direct contact with poultry are reported in this country. The last human case was reported in September 2006. The last case in birds was reported in November 2008. Although risk to travelers is minimal, avoid places where direct contact with birds and/or their secretions may occur, such as live animal markets and poultry farms. Well-cooked chicken is safe to eat. Current influenza vaccines are not protective. Oseltamivir is effective.
- **Parasites**: a number of tissue parasites contracted through eating uncooked reptiles, amphibians, or snails are present. Avoid eating this type of meal.
- **Monkey bites** occur among tourists. Monkeys may transmit a number of diseases, including rabies and herpes B. Avoid feeding monkeys; if bitten, immediately soak and scrub the bite for at least 15 minutes, and seek urgent medical consultation.
- **Marine hazards** may include jellyfish, coral, and sea urchins. Dangerous (potentially deadly) jellyfish are present year-round, but particularly during the rainy season. Children are especially at risk, and adults wading, launching boats, or fishing.
- **Security**
 - *Consular Travel Warning*: Due to ongoing violence, civil unrest, and military conflict, a Canadian consular warning currently advises against all travel to the provinces of Narathiwat, Pattani, Yala, and Songkhla (including the city of Hat Yai), all travel to the area between Preah Vihear Province in Cambodia and Sisaket Province in Thailand, and all non-essential travel to border areas in the Thai provinces of Tak and Mae Hong Son. Other governments warn against all travel to the provinces of Yala, Pattani, Narathiwat, and Songkhla and all non-essential travel to areas surrounding the Preah Vihear, Ta Kwai, and Ta Muen Thom temples on Thai-Cambodia border.
 - *Important Issues*: The border area with Preah Vihear Province in Cambodia is disputed. The political situation is unpredictable and sometimes volatile.
 - *Aviation Assessment*: The FAA (U.S.) has determined that the civil aviation authority of this country oversees its air carriers in accordance with minimum international safety standards.
- **Safety Bulletin - Posted November 29, 2011**
Floodwater from the north is slowly being conveyed by a series of barriers, dikes, and canals through Bangkok en route to the Gulf of Thailand; breaches of these structures have occurred and remain a risk to central Bangkok, although the risk is decreasing. Flooding is widespread in the outer Bangkok metropolitan area but is generally receding throughout the country. Travelers should monitor the situation through local media, be prepared for transportation disruption and reduced availability of basic supplies, and exercise caution in all flood-affected areas. Bangkok's main international airport, Suvarnabhumi, and most tourist destinations, such as Phuket and Chiang Mai, are unaffected by the current flooding.

MEDICAL CARE

- A high level of medical care comparable to that in other industrialized countries is available in Bangkok. Adequate medical care is available in the rest of the country but is not up to the standards of industrialized countries.
- For emergency services, dial 191.
- Congested roads and a scarcity of ambulances can make receiving timely medical attention difficult. Injured or seriously ill travelers may prefer to take a taxi or private vehicle to the nearest major hospital rather than wait for an ambulance.
- Recompression chambers are located near popular dive sites in Koh Tao, Koh Samui, Phuket, Pattaya, and Bangkok. Before diving, check that facilities are operational.
- Hospitals may require guarantee of payment prior to treatment. Although credit cards are widely accepted in the general economy, there is no clear information as to whether credit cards are accepted for medical care.
- Rh-negative blood may be difficult to obtain; the blood type of the general Asian populace is Rh positive.

Shoreland's recommendations, which focus primarily on the risk to the individual traveler, reflect a synthesis and reconciliation of available authoritative advice from CDC, WHO, and other global authorities as well as ongoing surveillance and the published literature. These recommendations may differ from those of individual countries' public health authorities. Furthermore, Travax country-specific recommendations pertain to healthy adult travelers. Guidance regarding pediatric and special needs travelers can be found under the relevant topic in the Travax information library.