

## Traveler's Diarrhea

### Guide to Self-management for Adult Travelers

The information herein applies to healthy adult travelers. Consult your health care provider for recommendations for children, pregnant or lactating women and travelers with chronic illnesses.

#### Prevention:

- Follow food and water precautions in your Travel Planner booklet and discussed by the travel nurse.
- Preventive drug treatment is not generally recommended for most otherwise healthy persons because acute treatment is quickly effective and there can be side effects associated with drug treatment.
- Discuss preventive drug treatment with your health care provider if you:
  - have insulin dependent diabetes
  - take a proton pump inhibitor like Prilosec<sup>®</sup>, Prevacid<sup>®</sup>, Nexium<sup>®</sup>, Aciphex<sup>®</sup>, or Protonix<sup>®</sup>
  - are immunosuppressed
  - have an intestinal problem like Crohn's disease, ulcerative colitis, ileostomy

#### Treatment:

##### ◆ Follow flow chart on reverse side.

##### ◆ Replace fluids and salts

- Increase intake of nonalcoholic, noncaffeinated beverages or soups made with "safe" water.
- Fluids should be consumed at a rate to reduce thirst and maintain a pale color of urine.
- In severe diarrhea, the World Health Organization recommends oral rehydration salts solution (ORS). ORS powder packets to mix with water are available in Campus Health OTC Pharmacy and in many pharmacies overseas. ORS solution should be consumed or discarded within 12 hours if at room temperature or 24 hours if refrigerated.
- If ORS is not available, a similar solution can be prepared by alternating glass #1 [8oz fruit juice (orange juice should be diluted), ½ tsp honey or sugar or corn syrup, a pinch of salt] and glass #2 [8oz water, ¼ tsp baking soda].

##### ◆ Change Diet

- Suggested foods include: boiled starches/cereals (potatoes, noodles, rice, wheat, oatmeal) with some salt, salted crackers, tortillas, bananas, soup and boiled vegetables can also be used.
- Dairy products aggravate diarrhea in some people and should be avoided.
- When stools are formed, diet may return to normal as tolerated.

##### ◆ Drug Treatment

Follow flow chart on reverse side.

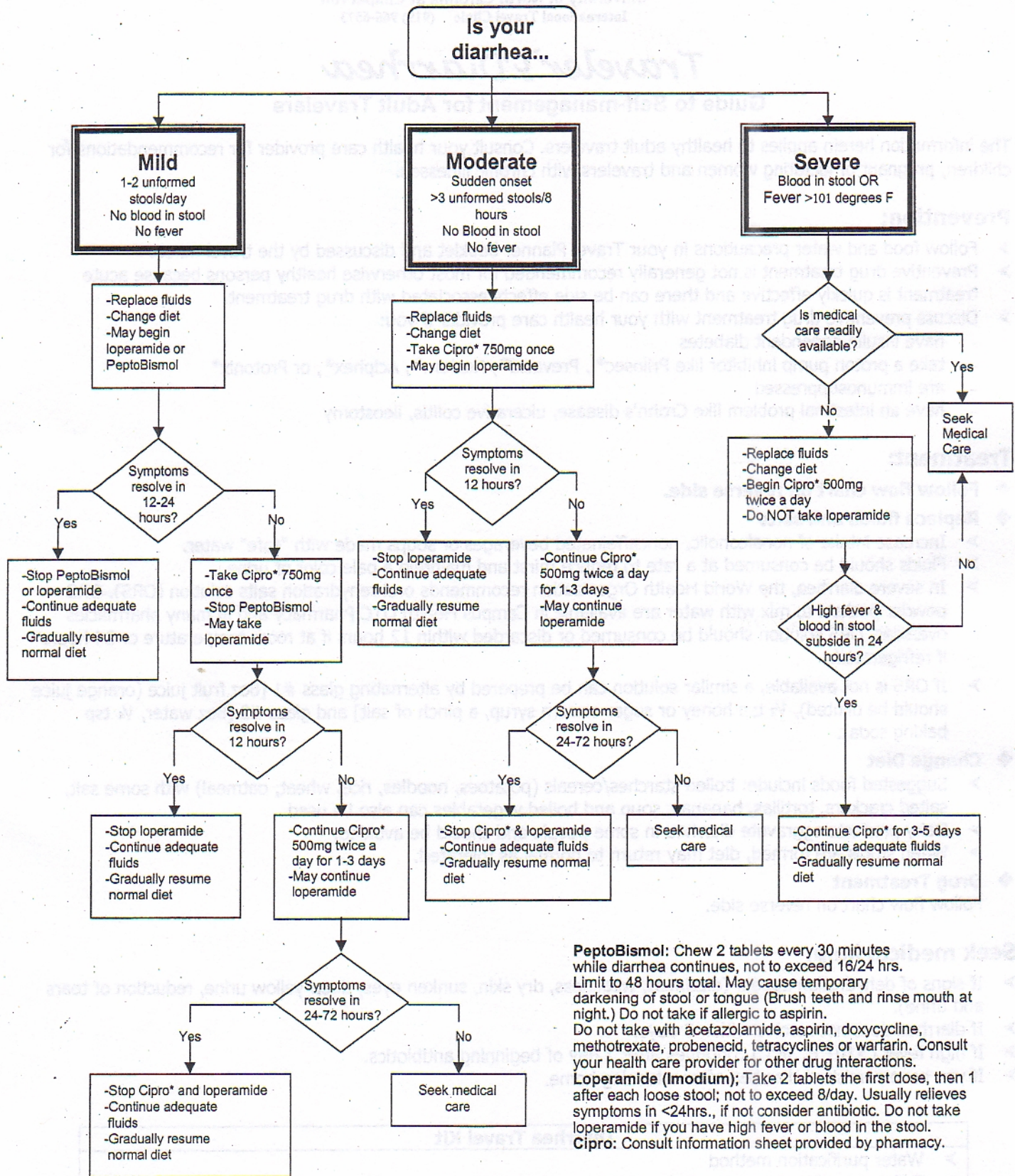
#### Seek medical help:

- If signs of dehydration appear (dizziness, weakness, dry skin, sunken eyes, deep-yellow urine, reduction of tears and urine).
- If diarrhea does not resolve within 3 days.
- If high fever (>101°F, 38°C) continues after 1 day of beginning antibiotics.
- If you have persistent diarrhea after returning home.

#### Diarrhea Travel Kit

- Water purification method
- Toilet paper/tissues and/or baby wipes
- Thermometer
- PeptoBismol<sup>®</sup>
- Loperamide (Imodium<sup>®</sup>)
- Supply of antibiotic (Cipro<sup>®</sup> or alternative)
- Oral rehydration salts solution packets, especially if access to medical care is limited

# Traveler's Diarrhea Flow Chart for Drug Treatment for Adults



**PeptoBismol:** Chew 2 tablets every 30 minutes while diarrhea continues, not to exceed 16/24 hrs. Limit to 48 hours total. May cause temporary darkening of stool or tongue (Brush teeth and rinse mouth at night.) Do not take if allergic to aspirin. Do not take with acetazolamide, aspirin, doxycycline, methotrexate, probenecid, tetracyclines or warfarin. Consult your health care provider for other drug interactions.

**Loperamide (Imodium):** Take 2 tablets the first dose, then 1 after each loose stool; not to exceed 8/day. Usually relieves symptoms in <24hrs., if not consider antibiotic. Do not take loperamide if you have high fever or blood in the stool.

**Cipro:** Consult information sheet provided by pharmacy.

\*Azithromycin 1gm as a single dose or 500mg/day for 3 days is an alternative antibiotic for patients who cannot take Cipro™ (ciprofloxacin). Azithromycin is preferred only for travelers to areas with a high prevalence of quinolone (Cipro™, etc.) resistant *Campylobacter*, such as Thailand.