

# Travellers Diarrhoea

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## What is Travellers Diarrhoea?

Travellers' diarrhoea is the most common illness affecting travellers. It can be caused by many different bacteria, viruses and parasites, many of which are widespread worldwide.

## Which countries are affected?

The risk is worldwide; however, high risk areas include most of Asia, the Middle East, Africa, Mexico, and Central and South America.

## What is my risk?

Travellers' diarrhoea occurs in 20%-60% of travellers. Destination is the most important influence on risk. Travelling "rough" and being more adventurous in eating habits may increase the risk. The standard of hygiene in cafes, restaurants and bars may also contribute to diarrhoea risk. The very young, the elderly and those with special health needs can become seriously unwell if the diarrhoea is not treated promptly.

## How is it spread?

Eating and drinking contaminated food and liquids are the main ways of acquiring travellers' diarrhoea. Most episodes of diarrhoea have an infectious cause. However, changes in bowel habit can be caused by a number of factors including stress, unfamiliar food and increased alcohol consumption.

## Signs and Symptoms:

Travellers' diarrhoea is usually a short illness only lasting a few days. It usually occurs during the first week of travel and is often self-limiting, lasting three to four days. It is described as passing three or more loose stools in a 24-hour period or any number of unformed stools accompanied by abdominal pain, fever, nausea or vomiting. In a small number of travellers, diarrhoea may persist for longer than a month.

## Prevention:

Following common sense guidelines on food and water hygiene may help reduce the risk of travellers' diarrhoea.

## Foods prone to contamination include:

- Foods grown in soil and/or washed in local water such as salads, uncooked/unpeeled fruits and vegetables
- Food left standing e.g. buffets at room temperature and open to flies
- Unpasteurised dairy products e.g. cheeses, ice cream and milk
- Raw or undercooked seafood
- Food from street traders, unless it is served freshly prepared and hot on clean crockery

## "Boil it, cook it, peel it, leave it"

**Water** needs to be clean or purified. Water may be purified by:

- Boiling
- Chemical disinfection
- Filtering combined with chemical disinfection

Avoid ice in drinks and do not drink from tap water. This includes brushing teeth. Excess alcohol should be avoided, and unfamiliar foods sampled in moderation, as both of these can contribute to diarrhoea.

## Is there a vaccine?

There is no vaccine available in the UK for travellers' diarrhoea. There are vaccines for other faecal-orally transmitted organisms such as typhoid, poliomyelitis, hepatitis A, and cholera.

However, the cholera vaccine is only recommended for high risk travellers such as aid workers assisting in disaster relief or refugee camps or more adventurous backpackers who do not have access to medical care. The cholera vaccine should not be used to prevent travellers' diarrhoea.

## Treatment of Travellers Diarrhoea

**Medical care is a necessary if diarrhoea is associated with high fever or blood and mucous in the bowel movements.**

**These symptoms could also be a sign of malaria so seek medical advice promptly.**

**Medical attention must be sought earlier for older people or those with pre-existing medical conditions and immediately for children with bloody diarrhoea, dehydration, persistent vomiting or fever.**

### 1. Diet and Fluids:

The most important issue with diarrhoea is to drink enough safe fluids.

Oral rehydration powders should be mixed with clean drinking water to restore electrolyte balance. Travellers may prepare their own salt and sugar solution of half a teaspoon of salt and eight level teaspoons of sugar to a litre of clean water. Breastfeeding should be continued for affected infants.

**Safe fluids are usually all that is needed for most cases of mild, self-limiting diarrhoea.**

As improvement occurs, bland foods such as bread, cereals, potatoes, soup, rice, bananas or chicken, can be introduced. Milk and dairy products should be avoided for several days after recovery.

### 2. Loperamide

Loperamide, is a drug that relieves the symptoms of diarrhoea and may be used for occasions when frequent diarrhoea is inconvenient, for example, long journeys.

**Loperamide should be used with caution.**

- It should **not** be taken by people with active inflammatory bowel diseases like ulcerative colitis or if fever or bloody diarrhoea is present.
- It is licensed for children and adults age four years and older, but is **not** suitable for very young children.

### 3. Antibiotics

A short course of antibiotics may be considered for the treatment of moderate to severe travellers' diarrhoea for those unable to obtain medical attention promptly. Studies show that the use of antibiotics to treat acute diarrhoea in travellers has significant benefits, with sufferers having shorter period of diarrhoea, being less unwell and usually being cured within 72 hours.

However, antibiotics will not cure all forms of diarrhoea e.g. diarrhoea caused by viruses such as norovirus.

Travellers should seek prompt medical care if they have taken antibiotics and symptoms do not improve within a day or two.