

Traveller's Diarrhoea

Prevention

Eating and Drinking

Boil It .. Cook It .. Peel It .. or .. Forget It ..

Most travellers usually forget the rule within a few days

Try and Eat

Foods that have been freshly cooked and served hot

Try and Avoid

Foods such as milk, ice cream, yoghurt, soft cheeses, cold meats, shellfish, salads and soft skinned fruits

Foods that have been standing at room temperature for lengthy periods

Shellfish concentrate Hepatitis A, Cholera and other diseases - don't eat them uncooked

The safest beverages are bottled or canned and aerated

Drink Safe Water

Carbonated Drinks

The process of carbonation eliminates bacteria and viruses

Heating

The safety of water is increased by boiling for ten minutes

Chemicals

There is an array of chemicals available at most adventure travel retailers

Hygiene

Handwashing with soap before meals and after using the toilet is essential

Treatment

Mild

3 unformed stools in 24 hours

Mild TD is usually self-limiting with a median duration of 3.5 days

Oral Rehydration Solution +/- Loperamide/Panadeine

Moderate

More frequent, abdominal cramping, nausea and general malaise

Oral Rehydration Solution +/- Loperamide/Panadeine + Antibiotic

Severe

The presence of fever or the passage of stool with blood indicates a severe infection and most likely a bacterium

Oral Rehydration Solution +/- Panadeine

Antibiotic +/- Medical Attention

Self-Treatment

Control Fluid Loss

Loose bowel actions occurring more frequently than three to four hours are inconvenient and justify treatment with anti-diarrhoeal agents such as Imodium and if there is cramping pain add Panadeine. Do not use these medications when there is fever (38° or higher) or blood stained stool as this can indicate the presence of a more sinister infection.

Beware of dehydration, which is the major danger associated with any episode of diarrhoea and can be especially rapid in hot and humid climates

The most important thing is to replace lost fluids, preferably with an Oral Rehydration Solution such as “Gastrolyte” dissolved in boiled water

Avoid milk or alcohol as they may worsen symptoms

Diet

Balanced carbohydrate is easier to absorb and diminishes intestinal loss – rice dishes

Medications

Self-treatment of TD with antibiotics may:

1. Reduce the severity and shorten the illness
2. Reduce the likelihood of chronic persistent diarrhea known as post infectious diarrhea

In general a 3 day course is sufficient

Ciprofloxacin

500mg twice daily for 3 days

Azithromycin

First line therapy in Southern and SE Asia

Drug of choice for children

250mg daily for 3 days

Loperamide (Imodium)

Decreases the frequency of loose bowel actions

It is not to be used as a “stopper”

Two capsules after each loose bowel action to regulate bowel actions to approximately four hourly. No more than eight capsules in a twelve hour period.

Side effects - Trying to stop diarrhoea can make the illness last longer

Paracetamol and Codeine (Panadeine)

Relieves cramping pains. Codeine is useful for slowing bowel movement.

Two tablets every four to six hours but for not more than 48 hours.

Side effects - Codeine can act as a sedative