

HEALTH

SOLUTIONS

Steering Clear of 'Tutankhamen's Curse'

Smart Travelers Use Their Heads to Avoid 'Delhi Belly' and Other Foreign Bugs

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In Mexico it is called "Montezuma's revenge" or "turista," in Egypt, "Tutankhamen's curse," in India, "Delhi belly." As experienced travelers know, a common trial of travel to developing countries is a boat with travelers' diarrhea.

Many globe-trotters have favorite remedies to head off the ailment, such as activated charcoal, over-the-counter medicines and antibiotics. Research indicates, however, that the best form of prevention is careful eating and drinking, and possibly one over-the-counter product. Travel medicine specialists recommend waiting until the first symptoms appear before taking stronger medicine.

Travelers' diarrhea, often referred to as TD, is believed to hit about a third of travelers to developing countries where sanitation systems are ineffective or nonexistent.

According to Martin S. Wolfe, a tropical medicine specialist whose Traveler's Medical Service provides immunizations and travel advice to Washingtonians, most cases are caused by food or water contaminated with *E. coli* bacteria, with a smaller number caused by other bacteria, by viruses and by parasites such as giardia.

The best form of prevention, Wolfe and other travel medicine specialists say, is to avoid food and beverages that may be contaminated, specifically tap water, uncooked meat, fruits and vegetables, and dairy products that are not pasteurized. It is usually not advisable to buy food from street vendors, but if you do, it is best to make sure it is piping hot and has not been sitting for long.

Bottled water is now available even in many remote areas of the world, although seals should be checked since some merchants may simply fill empty bottles with tap water for resale. Other widely available beverages that are generally safe are hot drinks, beer and carbonated drinks because the acidity of carbonation inhibits growth of bacteria.

Researchers have found that one over-the-counter product is somewhat effective in preventing diarrhea: bismuth salicylate, the active ingredient in Pepto-Bismol that is also sold under other names. Studies have shown that it can prevent illness 60 to 65 percent of the time.

Wolfe recommends taking two tablets four times a day as a preventive, but he cautions that it should not be taken for more than three weeks, and not at the same time as aspirin. The Centers for Disease Control and Prevention (CDC) also points out that over time, this product may cause the tongue and stools to become black temporarily. And it should not be taken by people who are al-



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lergic to aspirin, people with kidney problems or gout, those who are taking medicines chemically similar to aspirin and children under age 3.

Gregory Juckett, associate professor of family medicine at West Virginia University and a specialist in travel medicine, warned that taking bismuth salicylate may make some people think it is all right to eat anything, which could expose them to illness. But, he added, those who take it "would have

The antibiotics that seem to be most effective against many strains of bacteria that cause diarrhea are the fluoroquinolones, such as Ciprofloxacin, but Juckett warns in an article in *American Family Physician* that "multidrug-resistant shigella and salmonella strains are now so common that it is only a matter of time until they also become resistant to fluoroquinolones."

Juckett said he does recommend a short course of antibiotics for someone like a mu-

that consuming activated charcoal (sold in powdered form) has any preventive effect, the CDC says.

One over-the-counter medicine to avoid when traveling is antacids, such as Tagamet, Juckett said. He explained that many types of bacteria commonly consumed are destroyed by stomach acid. The antacid medicines, he said, "make it easier for bacteria to survive."

When diarrhea strikes despite all precautions, over-the-counter medicines and antibiotics can be helpful. But before taking any medicine, Wolfe and other doctors suggest that travelers modify their diets, and especially to replace lost fluids to avoid dehydration.

If the symptoms persist, or if a traveler is taking a long bus trip or hike with no access to bathroom facilities, over-the-counter anti-diarrhea drugs are advised. Juckett said he has found that in cases of serious diarrhea combined with vomiting, a combination of loperamide (Imodium) and one dose of a fluoroquinolone such as Cipro can often end the problem. "The Cipro kills the bacteria and the Imodium cures the symptoms," he said. Many doctors recommend that people planning to travel in developing nations take over-the-counter medications along with them.

A good way to replace the electrolytes lost because of diarrhea is to take oral rehydration salts. The salts, sold in the United States as Ceralyte and available almost everywhere in the world, must be mixed with boiled water or other safe liquid, such as a carbonated beverage. They were developed to treat children with diarrhea, which is a major cause of infant death in developing countries.

One drawback of oral rehydration salts is that many people dislike the taste. Wolfe said that sports drinks, like Gatorade, are not a good substitute, since they contain a different set of electrolytes. Juckett recommended mixing the rehydration salts with a non-caffeine, nondiet soda. If rehydration salts are not an option, a sports drink, a non-caffeine, nondiet soft drink, or plain water and salty crackers can be helpful.

Some once-popular medicines, such as paregoric, an opiate, and Entero-Vioform, are no longer recommended since they have been shown to be dangerous. Paregoric could be addictive, and Entero-Vioform is believed to have "serious neurologic side effects," according to the CDC. Entero-Vioform is not available in the United States, but can be purchased in some countries, sometimes under the names Mexaform, Intestopan and Iodoquinol.

"Avoid Entero-Vioform like the plague," Juckett said.

If the diarrhea persists with a fever, vomiting or blood in the stools, it is essential to find a doctor or other medical professional. What seems to be travelers' diarrhea could be dysentery or cholera, which must be treated by a physician.

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to ingest a lot more bacteria to get sick" than those not taking it.

What about taking antibiotics while traveling to guard against possible bacterial infections? Travel medicine specialists recommend against this increasingly popular option for several reasons.

According to the CDC, various bacteria throughout the world have developed resistance to many antibiotics, and it is difficult, if not impossible, to determine which strains one might be exposed to. Taking antibiotics also might make some travelers overconfident, and they could get sick from a virus or parasite that does not respond to antibiotics.

Some antibiotics also have side effects that, in some patients, could turn out to be worse than a bout of travelers' diarrhea.

sician or lecturer who is on a quick, tightly scheduled visit and "cannot afford to be holed up in a hotel room." He added that the same thing could be advisable for someone whose immune system is compromised by the virus that causes AIDS or a disease such as leukemia and "who might get deathly ill" from the diarrhea.

As for other popular preventive methods, the CDC says taking diphenoxylate (Lomotil) before symptoms occur can actually increase the incidence of TD. Eric Mintz, chief of diarrheal disease in the CDC's epidemiology section, said anti-diarrhea medicines slow down the digestive process, which would give any bacteria that have been ingested more time to produce toxins and make you ill. There are no data to indicate