TRAVEL VACCINATIONS AND MEDICATION

Listed below are brief descriptions of many common vaccinations and medications that may be recommended or required for travel to many countries outside of the United States. These will help to reduce your risk of becoming seriously ill when traveling abroad.

1. After reviewing the recommendations in the Traveler Health Report, determine which vaccines and/or malaria medication you want to receive. Review your immunization records as you may discover you have already received some of the recommended vaccines. Student Health Services only has documentation of immunizations that have been administered at our facility. If you submitted records to Student Health Services to meet Hepatitis B and MMR enrollment requirements, it was noted that you were in compliance but we do not keep those records on file.
2. If you have not already done so, call 909-869-4000 to schedule an appointment for travel immunizations as appointments are limited. Call early to secure an appointment time.
3. If you have health insurance, you may want to call them to determine if it covers the cost of travel vaccinations administered by your primary care provider's office**.**

$$: Check our website for current pricing (www.cpp.edu/~healthcounseling/immunizations/index.shtml)

A) ROUTINE VACCINATIONS

The following vaccines are generally given when you are a baby and throughout childhood and adolescence. These protect you from common diseases you are at risk for even if you do not travel outside of the United States.

$$ Measles and Rubella are transmitted by a virus causing a rash and fever.
Mumps is caused by a virus leading to painful swelling of the salivary glands.

You are generally considered immune based on one of the following:

- *Documentation of 2 doses of measles, mumps, and rubella (MMR) vaccine. These doses must be given at least 28 days apart and after 12 months of age.*
- *A blood test showing evidence of immunity*
- *Born before 1957*

Tetanus: also known as Lockjaw, is caused by bacteria that enter the body through cuts, scratches or wounds. It can cause convulsions and muscle spasms strong enough to cause bone fractures. (No charge @ Student Health Services)

Diphtheria and Pertussis (Whooping Cough) are both serious bacterial illness that can lead to breathing difficulties.

- A booster dose of the combined tetanus, diphtheria and acellular pertussis **(Tdap)** vaccine (No charge @ Student Health Services) is recommended for all individual's ages 11 to 64, regardless of when the last vaccine containing tetanus or diphtheria toxoid was given.
- After receiving a Tdap booster you should get a Td booster every 10 years.

B) RECCOMENDED/REQUIRED VACCINATIONS

$$ Hepatitis A is a disease of the liver transmitted by a virus and can occur through direct person-to-person contact or through ingestion of contaminated food or water

- 2 doses given after one year of age, 6-12 months apart provides lifetime protection

$$ Hepatitis B is a disease of the liver transmitted through exposure to blood or body fluids of a person infected with this virus. This may also occur via sexual contact, or exposure through medical treatment.

- 3 doses given over 6 months provides lifetime protection

$$ Meningococcal meningitis is an infection of the covering of the brain and spinal column. Even with early diagnosis, some people who contract this disease will die in spite of treatment or develop long-term disabilities, including hearing loss, neurological problems, mental retardation or loss of arms or legs.

- 1 dose is generally given between 11-12 years old with a booster dose at 16 years old. If initial dose is given $\geq$ 16 years old, no booster dose is necessary.
- Meningococcal vaccination is required by the government of Saudi Arabia for Hajj and Umra travelers.

$$ Polio is a disease transmitted by a virus through contaminated food and water that may cause serious illness including paralysis or even death. (Vaccine not available at Student Health Servics)

- Although Polio is part of routine childhood immunizations, 1 adult booster dose is recommended for travel to certain areas of the world.

$$ Rabies is a disease that affects the central nervous system. It is caused by a virus transmitted by the bite of an infected animal. Consider vaccination, if you might have extensive unprotected outdoor exposure in rural areas, such as might occur during camping, hiking, or bicycling, or engaging in certain occupational activities.

- 3 doses over 3-4 weeks. Vaccination does not eliminate the need for additional medical evaluation and treatment after a rabies exposure. All 3 doses must be paid for in advance and the nurse must order this vaccine series prior to your appt.

$$ Typhoid Fever is a bacterial infection that causes high fever, weakness, headache, stomach pain and sometimes a rash. It is contracted through ingesting contaminated water or food.

- 4 capsules taken every other day provide protection for 5 years or 1 injection provides protection for 2 years.
- Oral vaccine must be kept refrigerated.
- Injection must be ordered by nurse prior to appt.

$$ Yellow Fever is caused by a virus transmitted through the bite of an infected mosquito. Presently it only occurs in Sub-Saharan Africa and tropical South America. Illness ranges in severity from an influenza-like syndrome to severe hepatitis and hemorrhagic fever.

- 1 dose provides protection for 10 years

- This vaccine may be required at least 10 days prior to arrival in certain countries

Varicella (chickenpox) is caused by a virus spread by respiratory droplets; Bacterial infections commonly follow the illness. Non-immune adults are at increased risk of severe illness.

- Two doses of varicella vaccine are recommended for all children, adolescents, and adults without evidence of immunity to varicella.
- Note: This vaccine is not available at Student Health Services.

Japanese B Encephalitis - Recommended if you plan to visit rural farming areas and under special circumstances, such as a known outbreak of Japanese encephalitis.

- 2 doses over 28 days at least 10 days before departure for effective immunity
- Note: This vaccine is not available @ Student Health Services.

C) MALARIA

Malaria is a very serious illness and may even be fatal. It is always important to take malaria prophylaxis and use insect protection to decrease your risk for contracting malaria if you will be going to an area at risk. There is no vaccination available to prevent malaria but medication is available by prescription. Drug choice depends on area of travel, your medical history, side effect tolerance and the cost of the medication.

Antimalarial drugs:

Atovaquone/Proguanil (Malarone)

- Not available at Student Health Services
- Medication is taken daily beginning 1-2 days prior to travel where malaria transmission occurs and an additional 7 days after leaving area of risk.
- Cannot be used by pregnant or breastfeeding women or if you have severe kidney disease.

Side effects: This medication is very well tolerated. Side effects may include abdominal pain, nausea, vomiting, and headache. These side effects are uncommon and usually not serious enough to cause you to stop the medication.

This medication is not carried at Student Health Services but we can provide you with a prescription to take to a pharmacy off campus.

$$ Mefloquine (Lariam)

- Medication taken once a week, on the same day of the week, beginning two weeks prior to travel where malaria transmission occurs and for 4 weeks after leaving area of risk.
- Cannot be used if you have a history of depression, anxiety, major psychiatric conditions, seizures, or heart rhythm abnormalities.

Side effects: Has the potential for more serious side effects although the majority of patients tolerate it well. Side effects may include headache, dizziness, difficulty sleeping, anxiety, vivid dreams and visual disturbances. **Rarely (1:10,000) may include:** seizures, depression, and psychosis.

$$ Chloroquine (Aralen)

- Can only be used in countries where chloroquine resistance is not present.
- Medication is taken once a week, beginning one week prior to travel to malarious areas and for 4 weeks after leaving area of risk.

Side effects: Nausea/vomiting, headache, dizziness, blurred vision and itching. May worsen psoriasis. These side effects are uncommon and usually not serious enough to stop medication.

$$ Doxycycline

- Medication is taken daily starting 1-2 days prior to travel where malaria transmission occurs and for 4 weeks after leaving area of risk.
- Cannot be taken if you are pregnant.

Side effects: Increased risk of sunburn, vaginal yeast infections, nausea and stomach pain. Important to take with food and at least 8 ounces of water and not lie down within one hour of taking medication.

$$ Primaquine

- Is the most effective medicine for travel to places with more than 90% of malaria transmitted by the Plasmodium vivax parasite.
- Medication is taken daily starting 1-2 days before travel to malarious area, and for 7 days after leaving area of risk.
- Cannot be used in persons with a G6PD deficiency. Before primaquine is used, G6PD deficiency MUST be ruled out by a blood test. Cannot be used by pregnant or breastfeeding women.

Side effects: Nausea/vomiting and abdominal cramping if taken on an empty stomach.

D) MEDICATION FOR TRAVLER'S DIARRHEA

$$ Ciprofloxacin

- This is a quinolone antibiotic effective in most travel destinations. One tablet taken every 12 hours until diarrhea is resolved.

$$ Azthromycin

- This antibiotic is recommended for use in India and Thailand or if allergic to Ciprofloxacin. Four tablets taken at one time.