

## **An Occasional Medical Newsletter from The Blood Care Foundation**

Dear Member,

This is the first of an occasional series of newsletters to draw your attention to items which have recently appeared in the Medical Literature and which may well have some bearing on the medical precautions you take during your travels. I have culled those facts which I believe are important, but to which you may not have had access. The source of each item is given at the end in italics.

### **Malaria**

Malaria is a serious health risk which can develop rapidly and may be fatal. In most of sub-Saharan Africa and some countries in South East Asia and South America, parasite resistance to the drug chloroquine is widespread. Six studies carried out in different geographical locations showed that mefloquine (Lariam) is effective as a prophylactic in 91 - 100% of cases. The recent media publicity about adverse reactions associated with mefloquine has raised doubts as to whether travellers to countries, where chloroquine resistance is prevalent, should continue to take it. Revised guidelines on malarial prophylaxis are due to be published by the UK Health Departments later in the year, but, in the meantime, the following advice is suggested. Remember the four cardinal rules of malaria prevention, which are:

1. Be aware of risk.
2. Take measures to avoid mosquito bites. These include the use of mosquito nets, covering up as much of the body as possible after dusk and the use of insect repellents.
3. Whatever the anti-malarial regimen chosen, take the tablets meticulously.
4. Remember that any fever can be malaria so seek prompt medical advice for any influenza-like illness.

The common side effects of mefloquine are dizziness and disturbed sleep, but about 1 in every 10,000 people taking the drug, experience serious neuropsychiatric adverse reactions. The current advice is that if you are presently taking mefloquine, and are not having any major problems, you should continue taking it. People who have a history of fits or psychiatric illness; who have a first-degree relative who has, or had, epilepsy; or are in the first three months of a pregnancy should not take mefloquine. Pregnancy should be avoided for three months after stopping taking the drug. (Chief Medical Officer's Update 10, May 1996, Current Problems, Committee on Safety of Medicine, Vol 22, July 1996 and British Medical Journal, 18 March 1995)

20 years ago malaria was virtually eradicated from Azerbaijan. Over the past 3 years there has been a 120 fold increase in its incidence, 23 cases being reported in 1993 and 2802 in 1995. (British Medical Journal, 25 May 1996)

The number of cases of malaria diagnosed in the UK rose by over 30% last year. One of the main reasons was the epidemic in Southern Africa brought on by the end of the long drought, where the worst areas are the far north-east and Natal-KwaZulu north of Durban, and in Zimbabwe, the Zambezi valley. (Hospital Doctor, 27 June 1996)

If you require more specific advice on malarial prophylaxis, you should consult your general practitioner. Your doctor can obtain the most up to date advice for specific problems by calling the Malaria Reference Laboratory on +44-171-927-2437. You can call the travellers helpline on +44-891-600350.

## **HIV and AIDS**

The occurrence of AIDS in Italy and Spain continues to rise, where nearly 70% of cases are due to injecting drugs. (British Medical Journal, 25 May 1996)

The incidence of AIDS, due to blood transfusion, in Western Europe varies by as much as 5 times, with France, Belgium and Portugal having the highest, and UK, Finland and Eire having the lowest rates. (British Medical Journal, 30 March 1996)

The President of the Russian Medical Academy, Valentin Pokrovsky, has warned that Russia is on the brink of an AIDS epidemic. The neighbouring states of Ukraine and Belarus are being blamed for the rapid increase in the number of HIV positive cases now being identified in Russia. A new sub-type of HIV-I has been identified in the Ukraine. 1021 cases were reported last year and in the first 4 months of this year 1805 new cases have been identified. It is expected that this strain will spread into Russia this autumn as Russians return from their holidays in the Crimea. In Svetlogorsk, a small town in Belarus, 158 of 1,000 known intravenous drug abusers have been found to be HIV positive. Previously only 130 people in Belarus were known to be infected with HIV. (British Medical Journal 3 August 1996)

## **Eastern Europe**

The diphtheria epidemic in the Russian Federation and the Ukraine has spread to some of the newly independent States of the former Soviet Union. (Chief Medical Officer's Update 9, February 1996)

In Russia there has been a 33% increase in the incidence of Hepatitis B and a dramatic rise in cases of polio, 17 to 154, during the last year, the occurrence of tuberculosis has risen by 40% during the past 4 years and it is now estimated that 20% of the population are infected with intestinal worms. (British Medical Journal, 25 May 1996)

If you plan to travel to countries in the former Soviet Union, you should ensure that you are immunised against diphtheria, and also, if you are travelling in Russia, against Hepatitis B, polio and tuberculosis. If you are in any doubt as to your status, you should consult your doctor.

## **Herbal Medicines and Stimulants**

There has been a mini-epidemic of podophyllum poisoning in Hong Kong, Taipei and Kuala Lumpur due to contamination of the herbal remedy Wai-Ling-Sin. Symptoms include severe vomiting and diarrhoea and in a few cases, neuropathy and encephalopathy. Whilst precautions have been taken in the centres mentioned above to remove the contaminated remedy, samples of Wai-Ling-Sin may have been exported to other countries. (British Medical Journal, 13 July 1996)

15 deaths have recently been reported in the USA amongst people using the herbal stimulant ephedra, also known as Ma Huang, Herbal Ecstasy, Cloud 9 and Ultimate Xphoria. This has been widely advertised on the Internet as a safe and legal alternative to Ecstasy and other street drugs. (British Medical Journal, 8 June 1996)

Just to show that the news about herbal remedies is not all bad, it has recently been reported that artemether, the active ingredient in the traditional Chinese remedy Qinghaosu, is as effective as quinine in the treatment of chloroquine resistant cerebral malaria. (New England Journal of Medicine 1996;335:69-83)

### **Meningitis**

An outbreak of cerebrospinal meningitis has been reported in the Cabo Delgado province in northern Mozambique. At present the outbreak is confined, but the Ministry of Health is worried that the outbreak could spread if containment measures fail. (British Medical Journal 3 August 1996)

### **Creutzfeldt-Jacob Disease (CJD)**

There is no evidence that CJD can be transmitted by blood, blood products or organ transplantation. Potential blood or organ donors who might have been exposed to CJD, such as people who have been treated with human growth hormone, are excluded from donation as a precautionary measure. There is no evidence that CJD can be transmitted from mother to child during pregnancy or by breast feeding and there is no risk of spread within family groups. No Bovine Spongiform Encephalopathy (BSE) infectivity has ever been found in the milk of clinically infected cows, so milk and dairy products can be safely consumed. There is no evidence that BSE infectivity is transmitted in gelatin. (Chief Medical Officer's Newsletter, 1 July 1996)

### **Schistosomiasis (Swimmer's Itch)**

The Hospital for Tropical Diseases in London has recently reported an 8 fold increase in the number of cases of Schistosomiasis due to *S.haematobium*. This is the species which causes urinary and bladder problems and which can lead to cancer and cirrhosis of the liver. Many of the patients were travellers whose only fresh water exposure was swimming in Lake Malawi, which had been, until recently, believed to be free from schistosomiasis. (British Medical Journal 3 August 1996)

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