Risk areas for travelers' diarrhea

Travelers' diarrhea — what does it mean?

Traveler's diarrhea is the most frequent cause of travel-related infectious diseases. Each year approximately 40 million people worldwide contract the disease. Travelers' diarrhea can manifest itself in any country. The highest risk-destinations are Central America, North Africa, tropical Africa, or South Asia (especially India).

The cause for an infection with travelers' diarrhea is often due to the consumption of contaminated food or beverages as well as differences in hygiene standards between the home country and country of destination. Additionally, individuals with reduced gastric acid secretion (e.g., people taking a gastric acid blocker such as Pantoprazol) are at greater risk.

How does travelers' diarrhea develop?

Travelers' diarrhea can be caused by bacteria, viruses, or intestinal parasites. The intake of diarrhea-causing pathogens occurs through the consumption of contaminated food or beverages or via unwashed hands. The pathogen causes an inflammation of the intestinal mucosa. Due to this inflammation, the intestine secretes a higher amount of water and salts, which results in the occurrence of diarrhea. Depending on the pathogen and degree of contamination, symptoms can vary in severity. They may also be accompanied by other signs such as vomiting and fever.

What are the different phases of travelers' diarrhea?

The disease is characterized by three or more unformed stools within a period of 24 hours and is often accompanied by other signs and symptoms such as stomach pains, nausea, and/or vomiting. The majority of cases involve mild diarrhea that occurs during the first week of travel and usually resolve spontaneously within three to five days without the need for drug therapy. In the case of certain pathogens or when high-risk individuals are affected (e.g., infants, eldery, those with chronic conditions), the disease may take a more severe course. Additionally, diarrhea can lead to dangerous fluid loss, especially among infants, toddlers, and the elderly.

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Travelers' diarrhea - what can I do?

In principle, precaution (common hygiene measures, food hygiene) is better than aftercare. However, even when conforming to all hygienic rules, the occurrence of travelers' diarrhea cannot always be avoided. The first and most important measure then to be taken is to restore the fluids lost and, if necessary, the minerals (e.g. through sweetened tea or broth).

In the case of the eldery, pregnant women, chronically ill people, infants, or toddlers, a physician should be consulted. The same holds true for very pronounced signs and symptoms (more than 3 stools within a period of 8 hours, fever >38,5°C, bloody diarrhea), if signs and symptoms persist for more than 5 days, if adequate fluid intake is not possible, or if there is a deterioration in general condition (e.g., dehydration, low blood pressure, tendency to collapse).