

# CLINIC CARE

Your health is our priority | Issue 5

**TRAVEL TIPS**

**WHAT IS A MIGRAINE**

**ZIKA VIRUS**



COMPLIMENTARY COPY  
International SOS Clinic Magazine

**Kids'  
Activities  
Inside**

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# LETTER FROM THE EDITOR

We are celebrating the 5<sup>th</sup> edition of our Clinic Care Magazine with plenty of interesting topics for any age. In this edition we focus on travelling and health tips that will equip you at home, during your travels and business trips. We touch on aspects such as migraines, nutrition-on-the-go and gastroenteritis ... aspects associated with travelling to different countries and across time zones.

We provide you with relevant information on the latest emerging disease, the Zika virus, which has already caused many deaths. During the week of the 5th February 2016, the World Health Organization declared the Zika virus as a public health emergency, triggering global coordination efforts to fight and contain the virus. It's only the third time since 2007 that a disease has reached this level. We pose the question, what are organisations doing to protect their travelling employees and do you know enough to protect yourself and your family from this pandemic.

On the home front, we have a look at preventing accidental poisoning at home, ensuring that you and your children are safe. We provide simple and easy steps to guide and help you to keep your children healthy through proper nutrition.

Remember to have a look at the back of the magazine as we cater for the children through interactive educational and creative mediums sharing the message of safety and health awareness.

I know you will enjoy this edition as much as we enjoyed putting it together for you, your business and your family. We hope you will find the information valuable and it will keep you and your family healthy.

Remember, it's not always what you know, but what you do with what you know.

Share the message of good health and good practice.

Warm regards,  
Lizette Klingenberg,  
Marketing Manager: Africa

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**Disclaimer:** These articles have been developed for educational purposes only. It is not a substitute for professional medical advice. Should you have questions or concerns about any topic described here, please consult your medical professional.

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# When is it a **MIGRAINE?**

Written by: Clyde Green-Thompson, Medical Director, Medical Services, Southern African Region

## A migraine is:



Headache causing **intense throbbing** sensation in one area of the head



Commonly accompanied by **nausea, vomiting**



Aggravated by **light and sound**



Sometimes accompanied by **sensory warning symptoms** such as flashes of light, blind spots, or tingling in your arms or legs

┌ Migraine attacks can persist for hours or days and be so severe that all you can think about is finding a dark, quiet place to lie down. ┐



## Symptoms

Migraine headaches often begin in childhood, adolescence or early adulthood.

### 4 stages are possible: (you may not experience all the stages)

#### 1 Prodrome

One or two days before a migraine, you may notice subtle changes that signify an oncoming migraine, including:



**Constipation**



**Hyperactivity**



**Neck stiffness**



**Depression**



**Irritability**



**Uncontrollable yawning**



**Food cravings**

#### 2 Aura

Aura may occur before or during migraine headaches, e.g. as flashes of light, touching sensations (sensory), movement (motor) or speech (verbal) disturbances. Most people who experience migraine headaches don't have aura.

Each of these symptoms usually begins gradually, builds up over several minutes and then commonly lasts for 20 to 60 minutes.

#### 3 Headache (attack)

Untreated, a migraine usually lasts from four to 72 hours. The frequency of these headaches varies from person to person.

During a migraine, you may experience the following symptoms:

- Pulsating, throbbing pain on one or both sides of your head
- Sensitivity to light, blurred vision, sounds and sometimes smells
- Nausea and vomiting
- Light-headedness

#### 4 Postdrome

This occurs after a migraine attack and you may feel drained and washed out.

## When to see a doctor

**Attacks are often undiagnosed and untreated.**

If you regularly experience signs and symptoms of migraine attacks, keep a record of your attacks and how you treated them. Then make an appointment with your doctor to discuss your headaches.

Even if you have a history of headaches, see your doctor if the pattern changes or your headaches suddenly feel different.

**Speak to your doctor immediately or contact your emergency services if you have any of the following signs and symptoms, as these may indicate other, more serious medical problems:**

- An abrupt, severe headache like a thunderclap
- A headache with fever, stiff neck, mental confusion, seizures, double vision, weakness, numbness or trouble speaking
- Any headache occurring after a head injury
- A chronic headache that is worse after coughing, exertion, straining or a sudden movement
- New headache pain if you're older than 50
- Unresponsive migraine event can result in Status Migrainosus. People with this complication have migraine attacks that last for more than three days and require medical attention

## Causes

Although much about the cause of migraines isn't understood, genetics and environmental factors appear to play a role.

Migraines may be caused by changes in the brainstem (lower part of the brain) — and its interactions with a major pain pathway called the trigeminal nerve.

### Migraine headache triggers

Whatever the exact mechanism of the headaches, a number of things may trigger them. Common migraine triggers include:

- **Changes in female hormonal levels:** Women with a history of migraines often report headaches immediately before or during their menstrual periods, when they have a major drop in oestrogen
- **Oral contraceptives and hormone replacement therapy** also may worsen migraines. Some women however, may find their migraines occur less often when taking these medications
- **Foods:** Aged cheeses, salty foods and processed foods may trigger migraines. Skipping meals or fasting also can trigger attacks
- **Food additives:** Any additives may trigger migraines.
- **Drinks:** Alcohol and highly caffeinated beverages may trigger migraines
- **Stress:** Stress responses at work or home can cause migraines
- **Sensory stimuli:** Bright lights, sun glare, loud sounds. Unusual smells can trigger migraines in some people
- **Changes in wake-sleep pattern:** Such changes affect the body's natural rhythms and may contribute to migraines
- **Physical factors:** Intense physical exertion may provoke migraines
- **Changes in the environment:** A change of weather can prompt a migraine
- **Medications:** Some medicines can aggravate migraines

## Prevention

You may benefit from lifestyle changes that can help reduce the number and severity of migraines you experience. One or more of these suggestions may be helpful to you:

1. **Avoid triggers.** If certain foods or odours seem to have triggered your migraines in the past, avoid them
2. **Exercise regularly.** Regular aerobic exercise reduces tension and can help prevent migraines
3. **Reduce the effects of oestrogen.** Talk with your doctor about the appropriate alternatives or reduced but effective dosages for birth control pills and hormone replacement therapy

## Risk factors

Several factors that make some people more prone to suffering from migraines.

- **Family history of migraine attacks.** If one or both of your parents have or previously had migraines, then you stand a good chance of having migraines too
- **Age:** Migraines can begin at any age
- **Gender:** Women are three times more likely to have migraines than men
- **Hormonal changes:** Migraines are more likely to occur before or shortly after onset of menstruation. They may also change during pregnancy or menopause
- Generally, the severity and frequency of migraines **improve after menopause**

## Complications

- **Combinations of self-medication** to control pain can cause problems due to drug interaction
- **Abdominal problems** due to some types of medication
- **Medication-overuse** headaches — these are dose and time related
- **Chronic migraine** — prolonged duration of migraine

## Tests

Your doctor may also recommend a variety of tests to rule out other possible causes for your pain if your condition is unusual, complex or suddenly becomes severe.

- Blood tests
- Computerised tomography (CT) scans or magnetic resonance imaging (MRI) — detailed cross-sectional images of your brain may help doctors diagnose the cause of your headaches
- Spinal tap (lumbar puncture) to extract a sample of cerebrospinal fluid for laboratory analysis

## Treatment

Your doctor can help find the right medication for you

### Pain-relieving medications

Consult your doctor or a qualified pharmacist. For the most effective results, take pain-relieving medications as soon as you experience signs or symptoms of a migraine. It may help if you rest or sleep in a dark room after taking these.

Medications include a variety of over the counter products (no prescription required) and prescribed medication (by doctor or under advice from qualified pharmacist).

Pain relievers include:

- Triptans
- Ergots
- Anti-nausea medications
- Opioid medications
- Glucocorticoids (prednisone, dexamethasone)

### Preventive medications

Preventive therapy if you experience:

- Four or more debilitating attacks per month
- Attacks that last more than 12 hours
- That pain-relieving medications aren't helping
- Migraine signs and symptoms that include a prolonged aura or numbness and weakness



Non-traditional therapies may be helpful if you have chronic migraine pain.



Preventive medications reduce the frequency, severity and length of duration of migraines and may increase the effectiveness of symptom-relieving medicines used during migraine attacks.

Your doctor may recommend you take preventive medications daily, or only when a predictable trigger, such as menstruation, is approaching.

In most cases, preventive medications don't stop these headaches completely and some drugs can cause serious side effects. If you have had good results from preventive medicine and your migraines are well controlled, your doctor may recommend tapering off the medication to see if your migraines return without the medication.

To prevent or reduce the frequency of your migraines, take these self-care measures to help ease the pain of a migraine headache.

- **Try muscle relaxation exercises.** Relaxation may help ease the pain of a migraine headache
- **Relaxation techniques** may include progressive muscle relaxation, meditation or yoga
- **Get enough sleep but don't oversleep.** Get an adequate amount of sleep each night. It's best to go to bed and wake up at regular times as well
- **Rest and relax.** If possible, rest in a dark, quiet room when you feel a headache coming on. Place an ice pack wrapped in a cloth on the back of your neck and apply gentle pressure to painful areas on your scalp
- **Keep a headache diary.** Continue keeping your headache diary even after you see your doctor. It will help you learn more about what triggers your migraines and what treatment is most effective

## Alternative medicine

Non-traditional therapies may be helpful if you have chronic migraine pain:

- **Acupuncture.** Clinical trials have found that acupuncture may be helpful to relieve headache pain
- **Biofeedback.** This relaxation technique uses special equipment to teach you how to monitor and control certain physical responses related to stress, such as muscle tension
- **Massage therapy.** Massage therapy may help reduce the frequency of migraines
- **Cognitive behavioural therapy (CBT).** CBT may benefit some people with migraines as it can help to reduce stress levels
- **Herbs, vitamins and minerals.** There is some evidence that some herbs may prevent migraines or reduce their severity

Ask your doctor if these treatments are right for you.



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# COULD I BE DEPRESSED?

Written by: Charles Laubscher, Site Medical Officer, International SOS Clinic, Onne

Life has its ups and downs and most people will feel low and depressed from time to time. This could be due to certain events such as losing a loved one, losing a job, or experiencing some other life-changing event. As many as 4 in 10 women and 1 in 10 men will experience some degree of depression in their lifetime. Most times we get over this by ourselves. We discuss our feelings with someone close to us, we get a better perception of the issue, learn to cope and life goes on again. These episodes are not so severe that it affects normal functioning. However, sometimes the depression can be so severe, that it profoundly changes a normal lifestyle, and in a worst case scenario may lead to thoughts and even real attempts, of self-harm.

In history, many notable figures were or are known to have depression. There are a few surprises in this shortened list: Buzz Aldrin, Woody Allen, Halle Berry, Jon Bon Jovi, Jim Carey, Helena Bonham Carter, Ray Charles, Agatha Christie, Winston Churchill, Eric Clapton, Leonard Cohen, Bryan Cranston, Ellen DeGeneres, Johnny Depp, Angelina Jolie, Stephen King, Lady Gaga, Hugh Laurie, Brian May, Kylie Minogue, Dolly Parton, JK Rowling, Bruce Springsteen, Catherine Tate, Emma Thompson, Uma Thurman, Oprah Winfrey and Reese Witherspoon.

Reflecting on the following questions can help identify if you might be suffering from depression. Most people will experience some of the below, at least some of the time.

It does not necessarily label them as being depressed. However, if in general there has been a change in your life and you are now predominantly experiencing these negative feelings and its effects, you should see a health care professional, such as your local doctor. He or she would be able to make an initial assessment, after which you will be referred to appropriate specialist services for a thorough professional assessment and treatment.

Do you have a low mood on most days? Do you have a reduced interest in all, or almost all, activities for most of the day? Have you been having these feelings for longer than two weeks?

## Do you experience any of the following?



**Tiredness**



**Lack of Energy**



**Restlessness**



**Suicidal thoughts**



**Reduced sexual desire**



**Having mostly negative expectations**



**Lack of confidence**



**Poor memory and concentration**



**Disturbed sleep**  
(often by way of waking up in the early hours with a depressed mood)



**Feeling worse during a specific part of the day** (often early morning)



**Much reduced appetite** (or sometimes a very increased appetite with weight gain)





Take a look at yourself and ask the question: Could I be depressed? If so, get help. It's available and it's effective.

If you are experiencing some or most of these feelings together with a low mood and a reduced interest in activities around you, are these feelings also affecting your usual lifestyle? Are you unable to do even very simple things? Are you avoiding activities you used to enjoy before? Are you cutting yourself off from people around you? Do you find yourself just doing nothing for hours on end?

The concern is that a depressed person will sometimes ignore their problems. Unfortunately, this could only make matters worse. There are some herbal therapies put forward by untested sources but not everything "natural" is necessarily effective, nor harmless. Conventional drugs often have their origins in herbal products, but are

subsequently refined and rigorously tested for safety and efficacy at a correct dosage. This is often not the case for herbal remedies.

People with significant depression cannot be expected to just shake it off and get on with life. For some, depression can spiral out of control. There is no shame or weakness of character associated with depression. It is an illness associated with chemical imbalances in the brain. In its milder forms, depression can be well-managed with professional counselling (and a specific technique called Cognitive Behavioural Therapy). In the more severe form of depression, this therapy is combined with antidepressant drugs.

**SPEAK TO A DOCTOR AT THE CLINIC TODAY. DEPRESSION IS TREATABLE.**

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# GASTROENTERITIS (GASTRO)

## What is gastroenteritis

- Gastroenteritis (gastro) is a common infection of the stomach and intestines.
- Main symptom of gastroenteritis is diarrhoea, with or without vomiting.
- Travellers' diarrhoea is the name given to the gastroenteritis that many travellers get while travelling abroad.

Most people will recover on their own in one to two days.

## Many causes of infectious gastroenteritis

### Viruses (very common)

- ➔ Norovirus, rotavirus

### Bacteria

- ➔ *E. coli* (common cause of travellers' diarrhoea), salmonella, campylobacter
- ➔ Serious infection e.g. typhoid, cholera

### Parasites

- ➔ Cryptosporidia, giardia

## Common gastro symptoms

- ➔ Usually occur within 24 – 48 hours of exposure (sometimes as soon as 6 hours after)
- ➔ Usually causes mild diarrhoea and/or vomiting

### Other symptoms include:

- ➔ Fever, nausea, abdominal pain and cramps, headache, muscle aches
- ➔ Blood in the stool
- ➔ Some people will develop severe diarrhoea and vomiting
- ➔ Can lead to dehydration

## How does gastro spread?

- ➔ Eating or drinking contaminated food or water
- ➔ Direct contact with an infected person's diarrhoea or vomit
- ➔ Contact with contaminated objects (touching the object, getting the germs on your hands, then putting your hands in your mouth, or touching something that you will eat or drink)

### Common sources of infection:

- ➔ Water — especially where there is poor sanitation
- ➔ Raw or undercooked meat or seafood
- ➔ Contaminated raw fruits and vegetables
- ➔ Contaminated bathroom taps

## Diagnosis and treatment

**Diagnosis:** Medical history and symptoms. Occasionally, blood or stool tests.

**Treatment:** Usually no specific treatment. Antibiotics are sometimes used. Fluid replacement may be required to prevent dehydration.

## What **TO DO** when you suffer from gastro

- ✓ Prevent dehydration
- ✓ Drink bottled water or diluted fruit juice
- ✓ Use rehydration solutions
- ✓ Keep sipping even if vomiting continues — you are keeping some fluids down
- ✓ Avoid sharing items such as towels and eating utensils
- ✓ Keep surfaces clean and wash hands regularly
- ✓ Choose low-residue, bland foods, such as rice, biscuits or dry bread
- ✓ Avoid milk / dairy drinks

Seek medical attention if symptoms last more than two days or if they are severe, e.g. blood, unable to keep any fluids down, severe diarrhoea etc.

## What **NOT TO DO** when you suffer from gastro

- ⊗ Neglect ongoing or bloody diarrhoea
- ⊗ Take antibiotics or anti-diarrhoeal medications without medical advice
- ⊗ Consume alcohol and caffeine
- ⊗ Prepare food for others

It's important to keep hydrated.

### Prevention of gastroenteritis

#### Good personal hygiene

Wash your hands with soap and “safe” water (water that has been boiled or disinfected):

- Before preparing food or eating
- After toilet use
- After attending to infected people
- After changing diapers (baby nappies)
- After participating in clean-up activities

#### Reduce your risk of infection

Some germs such as noroviruses are highly infectious.

- Avoid touching other people's body fluids — if unavoidable, wear gloves
- Wear gloves to dispose of objects that are contaminated with body fluids
- Be sure to wash your hands thoroughly afterwards

#### Safe food — prepare hygienically

Germs can spread through contaminated food.

#### Effective food hygiene:

- Wash hands before preparing food
- Cook food thoroughly
- Eat food while still hot
- Prevent cooked foods from being contaminated by raw foods, water, ice, contaminated surfaces
- Avoid raw fruits and vegetables unless they are first peeled

Keep cooking utensils (plates, bowls, knives, pots, etc.) and food surfaces clean by washing them before food preparation with “safe” water.

#### Contaminated water

Avoid contaminated water:

- Do not use contaminated water to clean, bathe, play, drink or cook
- Keep away from children







# TRAVELLERS' DIARRHOEA

The most common travel-related illness. Usually occurs within the first week away and affects between 20 – 50% of travellers'. Most cases of travellers' diarrhoea will resolve by itself within 48 hours.

## Spreads by

- ➔ Contaminated food and water
- ➔ Mainly caused by the *E.coli* bacteria
- ➔ Other bacteria: salmonella, shigella and campylobacter
- ➔ Some viruses and parasites

## Symptoms

- ➔ Three or more loose or liquid stools per day
- ➔ Abdominal pain, cramps, bloating and fever
- ➔ Vomiting may also occur

## Treatment

- ➔ Fluid replacement to prevent dehydration
- ➔ Consult your doctor about what medicine and dosage is right for you
- ➔ Medications to slow the diarrhoea
- ➔ Antibiotics, if prescribed

## Prevention

- ➔ Choose safe food and water
- ➔ Oral cholera vaccine may give some protection against travellers' diarrhoea caused by *E.coli*

┌ If you have a limited supply of clean water use an alcohol-based sanitiser to wash your hands. └

## SAFE WATER



### 1. Bottled water:

- ➔ Use bottled water if available



### 2. Boiled water:

- ➔ If water is cloudy, filter it through a clean cloth or allow it to settle before boiling
- ➔ Boil the water for one minute, then let it cool
- ➔ Store the water in clean containers with covers
- ➔ **Do NOT use water if you know it is contaminated**



### 3. Treated water:

- ➔ If you can't boil water, you can disinfect it using household bleach
- ➔ If water is cloudy, filter it or allow it to settle before disinfection
- ➔ Add 1/8 teaspoon (or 8 drops) of regular, unscented, liquid household bleach for each gallon (4 litres) of water, stir it well and let it stand for 30 minutes before you use it
- ➔ Store disinfected water in clean containers with covers





# ON-THE-GO NUTRITION

Written by: Dr Andrew Ebringer, Regional Medical Director, International SOS Australasia

When you're on the road, maintaining a healthy diet may not be as easy as it seems. You may be faced with contaminated food and water, a lack of "healthy" choices or foods with which you are unfamiliar with or wary of.

You might just shrug it off, thinking that no harm can come from bad nutrition for a week or two. However, an unbalanced diet can lead to health problems, lack of energy and disease. These are the last things you'll want while travelling!

## Follow these easy tips to maintain a healthy diet while travelling:

- 🍏 Be sure to **get protein from safe sources**, such as eggs (well cooked), tofu, beans, lentils and nuts. Protein helps build up your body's strength, if you have lost weight or have been sick
- 🍏 Try to **eat five servings of fruit and vegetables** per day to get the vitamins your body needs. Remember that 100 percent fruit and vegetable juices, canned fruit and vegetables and dried fruit all count. To avoid consuming contaminated fruits, try to eat those you can peel, such as bananas, oranges and mangoes
- 🍏 **Keeping up your fibre intake** will also help you maintain a regular bowel habit
- 🍏 **Eat lots of whole-grains** (carbs), such as brown rice and oats, which provide your body with energy
- 🍏 **Don't cut out all the fat in your diet.** You need some fats for the body to work well. Eggs and nuts are safe places to get a small amount of fat

- 🍏 Remember that **overcooked food** loses much of its nutritional value, which you need while travelling
- 🍏 You can usually get the **vitamins and minerals** you need from a balanced diet. However, if you don't follow a balanced diet, take vitamin or mineral supplements
- 🍏 **Maintain good hydration.** Aim to drink around two litres of water each day. Drink more if you're in a hot and/or dry climate
- 🍏 Excessive sweating in hot climates can lead to loss of salt in your body, so you should consider adding just a small **quantity of salt to your food**



# TRAVEL TIPS

## TRAVEL SECURITY TIPS

No matter where you are in the world, the same **SAFETY PRINCIPLES** apply. It is important to **UNDERSTAND** the risks and dangers, and **REDUCE** the risk as much as possible.



**BE CONFIDENT**  
and stay calm in uncertain situations.



**RESEARCH**  
your destination.



**STAY ALERT** of your  
**SURROUNDINGS**



**BLEND IN**  
don't draw attention to yourself.



**LOOK THE PART**  
Dress according to  
a country's culture.



**AVOID TRAVELLING**  
by foot or alone where possible.



**DON'T SHARE A TAXI  
WITH STRANGERS.** Rely  
on hotel taxi transport if you  
have a choice.



**TRY TO ARRIVE AT A  
DESTINATION BEFORE  
DUSK.** Avoid driving at night.



**PROGRAM MOBILE  
PHONE WITH KEY  
CONTACTS.** Ensure your battery  
is always charged.



**GIVE SOMEBODY** at home  
your itinerary.



**BE SENSITIVE** to local customs and  
traditions.



**KEEP COPIES** of important  
documentation **SEPARATE FROM**  
the originals.



Always keep your **PASSPORT  
ON YOU.**



Don't carry **TOO MUCH  
CASH** on you.



Keep **SPARE MONEY HIDDEN**  
separately.



Use **CREDIT OR TRAVEL** cards.



**DON'T WEAR**  
expensive jewellery.

## TRAVEL HEALTH TIPS



**RESEARCH** the health risks of your destination.



Ensure you **MONITOR** for outbreaks of infectious diseases.



Have a check up with your **DOCTOR** and **DENTIST** before you travel.



Pack a basic **FIRST AID** kit.



Check your **VACCINATIONS** are up to date.



Keep all medication in its **ORIGINAL PACKAGING**. Pack a **COPY** of your prescription with the drug.

## THE NUMBER OF WOMEN THAT TRAVEL ABROAD FOR BUSINESS INCREASES EVERY YEAR

**A 2015 survey of travellers found that for women**

**56%**

had experienced an illness while abroad, most commonly a gastrointestinal problem.

**80%**

of women have worried about their personal safety while abroad, with financially motivated crimes being the most common concerns.

*International Travel: Risks and Reality 2015*, an Ipsos Global advisor research study.

**Statistically, women travellers are MORE LIKELY than male travellers to have:**

1. Psychological stress
2. Medication reaction
3. Dental problems

Schlagenhauf P, Chen LH, Wilson ME, Freedman DO, Tchong D, et al. Sex and gender differences in travel-associated disease. *Clin Infect Dis.* 2010 Mar; 50(6):826-32

### COMMON HEALTH CONDITIONS AFFECTING FEMALE TRAVELLERS:

Traveller's Diarrhoea  
Respiratory Infections  
Urinary Tract Infections  
Injuries

For more information visit [internationalsos.com/femaletravel](http://internationalsos.com/femaletravel) to see our Women's Travel Risk e-Learning opportunity.

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# ZIKA VIRUS



Zika virus circulates in tropical areas of Africa, the Americas, Southern Asia and Western Pacific.

## What is the Zika virus disease?

The Zika virus disease is an emerging mosquito-borne illness. The virus was discovered in 1947. First large outbreak occurred in Yap (Micronesia) in 2007. According to the World Health Organisation (WHO), "Given the expansion of environments where mosquitoes can live and breed, facilitated by urbanisation and globalisation, there is potential for major urban epidemics of Zika virus disease to occur globally."

## How does the Zika virus spread?

The Zika virus is commonly transmitted to humans through the bite of an infected Aedes mosquito (the same mosquito that spreads dengue, chikungunya and yellow fever).

- + These mosquitoes mostly bite during the day – inside and outside
- + From mother to newborn around time of delivery or possibly during pregnancy
- + Blood transfusion
- + Sexual contact (rare)
- + Perhaps through infected monkey bite (rare)

Research is ongoing to see whether other human body fluids (e.g. urine, saliva) might possibly transmit infection.

## The Zika virus symptoms

Most cases are mild, one in five develop symptoms. Illness develops about two to seven days after mosquito bite or transmission.

### Common symptoms include:

- + Fever
- + Rash
- + Muscle and joint pain
- + Conjunctivitis (red eye)
- + Headache

Most people recover in about a week. Symptoms are similar to dengue fever and chikungunya, or malaria. These diseases are often present in the same locations.

## Treatment

- + No specific treatment is available
- + Treatment is mainly supportive and includes rest and drinking plenty of water
- + If using medicine to relieve fever and pain avoid aspirin/non-steroidal anti-inflammatories (such as ibuprofen) unless dengue has been excluded, as these medicines can make bleeding worse



## What does NOT repel mosquitoes

- + Sound-producing vibrating buzzers
- + UV blue light electric zappers
- + Herbal preparations
- + Vitamins
- + Citronella candles/burners

## Unusual mosquito breeding sites

- + Tree hole
- + Air-conditioner tray
- + Plant axle
- + Ponds and lakes
- + Canvas sheet
- + Discarded receptacle

## Prevent mosquito breeding sites around your home

- + Aedes mosquitoes like clean, stagnant water found in man-made containers around homes and urban areas
- + Make sure any containers you have outdoors don't collect standing water
- + Turn buckets and watering cans upside down when not in use
- + Don't place dishes of water under pot plants
- + Clean up and dispose of fallen leaves regularly
- + Clear any stagnant water in air conditioning units and gutters

## Should I travel to a place with Zika?

- + You should always consult your doctor to get an individual recommendation
- + Whilst the association between Zika and birth defects is uncertain, many authorities are advising pregnant women to consider postponing their travel to affected areas, especially to areas with increasing or widespread transmission

## After travel to a place with Zika

### Monitor your health for two weeks

If you develop symptoms and have been in a location that has malaria, see a doctor promptly. Malaria can be rapidly fatal if not treated.

If you are pregnant, or could be pregnant, seek medical advice. You may be tested for Zika (even if you don't have symptoms) and may need to have special monitoring of your pregnancy.

Men should consider using condoms for 28 days (if your partner is pregnant — for the duration of the pregnancy).

If you are returning to an area that has Aedes mosquitoes, continue to prevent mosquito bites for two weeks (e.g. using insect repellent). This will reduce the risk of infecting local mosquitoes with Zika, and therefore reduce the risk of an outbreak.

## Zika virus prevention

### There is no vaccine.

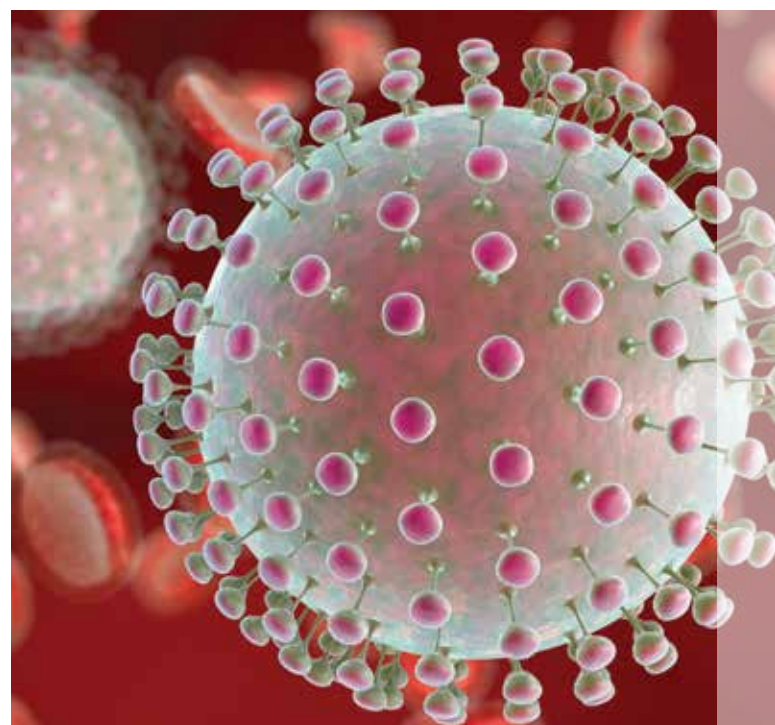
If in, or travelling to an affected area, prevent infection by preventing mosquito bites. Prevent sexual transmission through the use of condoms.

## Indoor bite prevention

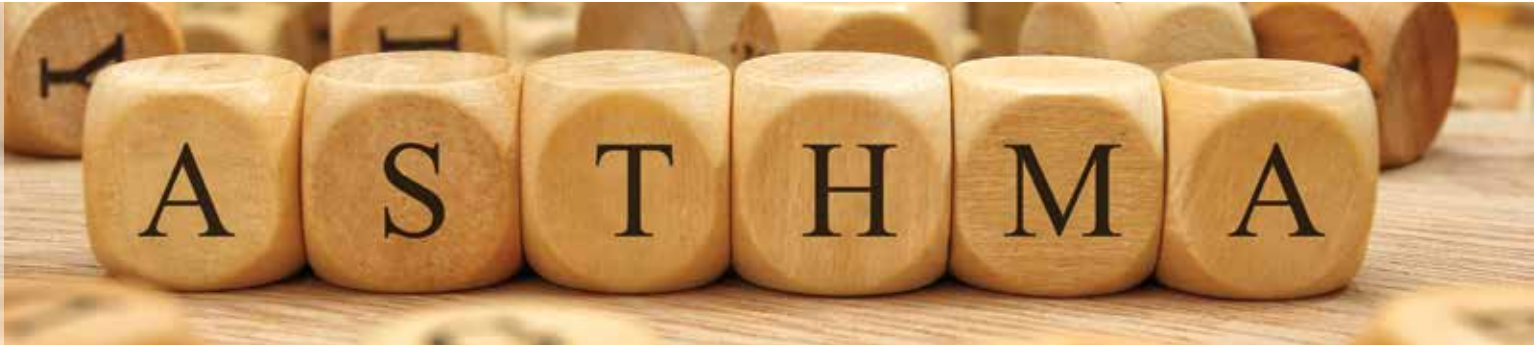
- + Use insecticide sprays or vaporisers:
  - Spray bedrooms before going to sleep
  - Plug-in electric vaporisers which release insecticide
- + Install insect screens on doors and windows:
  - The mesh size should be less than 1.5mm
- + If possible use air conditioning:
  - It may reduce the chance you will be bitten
- + Use an insecticide-treated bed net:
  - Make sure the net does not have any tears
  - Tuck the ends in under the mattress, or make sure it reaches the floor
  - Use it if resting / sleeping during the daytime (and also at night)

## Outdoor bite prevention

- + Wear clothing that covers most of the body (long sleeves and long pants)
  - Wear socks and shoes
  - Consider treating clothing with an insecticide if you are very likely to be exposed to mosquitoes
- + Be aware of peak exposure times
- + Avoid mosquito breeding areas (stagnant or still water)
- + Use an effective insect repellent:
  - Such as one containing DEET, Picaridin, PMD, or IR3535. Reapply after swimming or excessive sweating
  - Coils: Release pyrethroids which repel mosquitoes. Use outdoors only



# RESPIRATORY DISEASES:



It's not yet known why people suffer from asthma, though there may be a family link. There is no cure for asthma, but it can be managed.

## Asthma facts:

- 1 It's a common lung disease, especially among children
- 2 At least 300 million people worldwide live with asthma
- 3 It's characterised by inflammation and narrowing of the airways that comes and goes in "attacks"
- 4 Human lungs take in 'invaders' every day: bacteria, viruses, pollen, dust, etc. Normally, these are processed with no noticeable effects

People with asthma react to some 'intruders' with an increased response, for example the:

- 1 Lining of the airways become inflamed (swell)
- 2 Muscles in the airway tighten (bronchospasm)
- 3 Mucus glands are more productive, plugging the airways with thick secretions

## Common asthma symptoms include:

- 1 Coughing, especially at night or early in the morning
- 2 Wheezing (whistling or 'creaking' noise while breathing)
- 3 Chest tightness
- 4 Shortness of breath

Attacks are different for each person and can be mild or severe.

Some people feel this way every day. Others only feel symptoms occasionally. When asthma is well-managed, symptoms are infrequent.

## How do I know its asthma?

Not all wheezes and coughs are due to asthma. Doctors will make a diagnosis based on:

- 1 Your medical and family history
- 2 Your symptoms and when they occur
- 3 Physical examination
- 4 Specific lung function tests

In children, asthma can be difficult to distinguish from some other lung conditions.

## Severity of asthma

Doctors classify asthma based on its severity to guide treatment. Several measures are used, including lung function testing. However, frequency of symptoms alone is a reasonable guide to severity.

Classification	Attacks	Disturbs sleep and physical activity
<b>Mild intermittent asthma</b>	No more than 2 days per week. In between attacks there are no symptoms.	No more than 2 nights per month.
<b>Mild persistent asthma</b>	3 days or more per week but not daily.	3 nights or more per month. Some disruption of activity.
<b>Moderate persistent asthma</b>	More than twice per week, possibly every day.	1 or more nights per week. Often interferes with activity.
<b>Severe persistent asthma</b>	Symptoms throughout the day, every day.	Often disturbs sleep. Activity severely limited.



## Asthma triggers

People with asthma can reduce their symptoms by avoiding known triggers. The triggers are different for each person and may include:

- Animals (pet hair or dander)
- Dust
- Temperature changes (especially cold air, but any change including exposure to hot weather)
- Pollen
- Chemicals in the air, like pollution, tobacco smoke etc.
- Exercise
- Mould
- Respiratory infections, such as the common cold
- Strong emotions (stress)

Some people also react to aspirin and other anti-inflammatory drugs (NSAIDs). Asthma cases may be tied to elements people encounter while at work (occupational exposures).

## Minimise asthma triggers:

There are many ways in which you can minimise asthma triggers:

- Cover bedding with non-allergenic cases to reduce dust mite exposure
- Choose hard flooring (avoid carpets and rugs)
- Vacuum regularly
- Use unscented cleaning products
- Keep indoor humidity levels low to reduce mould
- Do not smoke in or near the home

## Treatment of asthma

Although asthma never goes away, it can usually be brought under control with treatment, e.g.:

- Reducing symptoms
- Stopping attacks at night, allowing a good night sleep
- Attending school or work without asthma-related absences
- Ability to be physically active
- Avoiding hospital visits
- Taking medication every day (even when you feel well)
- Using a fast-acting medication when necessary

The effectiveness of treatments can be monitored by reduction in symptoms and by measuring lung function tests. Sometimes doctors need to try a few different drugs before they find the one that works for you.

## Complications of asthma

**Asthma can be severe and life threatening.**

If poorly controlled in the long-term, it can lead to reduced lung function and permanent damage to the airways. This may cause permanent, non-reversible symptoms.

## Asthma medications

Generally, there are two types of medication. Both are administered through inhalers and are used under a doctor's supervision.

**Quick relief ("rescue") medicines are:**

- taken when needed
- designed to act quickly
- do not work immediately: they can take several minutes, so avoiding triggers is still important

**Long term medicines are:**

- usually taken every day
- help control inflammation and prevent attacks
- may be scaled back when symptoms are under control

## Severe asthma attacks

**Get emergency help if:**

- Quick-relief medication does not relieve symptoms
- Wheezing or breathing difficulty gets worse quickly
- Breathing becomes difficult
- This is a life-threatening emergency

## Asthma action plan

This is a management plan you write with your healthcare provider.

**An action plan:**

1. outlines your daily treatment (if any)
2. details how to handle and attack
3. explains when to call the doctor or go to the hospital
4. includes methods for avoiding your personal triggers



# PREVENT ACCIDENTAL POISONING IN THE HOME



Written by: Dr Richard Glied, Country Medical Director, Papua New Guinea

Medications adults are using are often left in open suitcases. Children are, by nature, inquisitive and unless you are alert to the potential hazards, poisoning is a real risk.

## What is most likely to cause poisoning?

At the outset, it is important to be aware that packaging of toxic substances in foreign countries is different from what you may be used to back home. Childproof containers may not be the norm. Plants and insects are different and uncommon. Medications adults are using are often left in open suitcases. Children are, by nature, inquisitive and unless you are alert to the potential hazards, poisoning is a very real risk. Certain medication (for example heart pills) may be fatal to children in very small doses. Remember that moth balls, cosmetic products and even mouthwash may be extremely toxic to a child.



## Who is most at risk of accidental poisoning?

Most cases of accidental poisoning occur in the home and almost 80% of these cases are children between the ages of one and four. Those living an expatriate lifestyle, travelling with small children to hotels and new homes are particularly at risk. Often, an awareness of poisoning hazards is nowhere near the top of the list for jetlagged parents!

### Some basic tips to reduce the risk of accidental poisoning:

- ➔ Use safety locks on all cabinets containing medication and toxic substances. Remember a child will readily climb up onto a toilet to investigate
- ➔ Lock your suitcases to prevent your child gaining access
- ➔ Store detergents and chemicals out of reach and, preferably, out of sight of young children and educate domestic helpers to do so as well
- ➔ Keep chemicals in their original containers. Never transfer them to unmarked containers and particularly not to food containers, cans or milk bottles
- ➔ If using a toxic substance, don't leave your child unattended within reach of opened containers
- ➔ Discard used containers safely
- ➔ Keep your child away if pesticides are being used. Certain countries still allow use of highly toxic sprays outlawed elsewhere
- ➔ Keep indoor plants out of reach of children – particularly in foreign countries where the plant may be strange to you
- ➔ If using a foreign chemical (particularly if the instructions are in a foreign language) make sure you obtain an accurate translation and instruction first
- ➔ When moving into a new house first scout around for potential toxic substances before giving your child the run of the place; this can include painted surfaces, removable drain caps, etc

### When should I suspect that my child might have been poisoned?

If your child unexpectedly presents with any of the following, rule out accidental poisoning as a potential cause:

- ➔ Difficulty breathing and speaking
- ➔ Dizziness or unconsciousness
- ➔ Burning in the mouth or salivating (frothing saliva)
- ➔ Tummy cramps, nausea or vomiting
- ➔ Strange or bizarre behaviour

### Important Points to Remember

- ➔ Most cases of poisoning occur in children aged between one and four
- ➔ Lock toxic substances away out of reach of children
- ➔ Remember to keep your suitcase locked
- ➔ Check for poisonous substances when moving into a new house
- ➔ Learn how to recognise possible signs of poisoning in your child
- ➔ Never induce vomiting
- ➔ Never give large quantities of fluid to drink
- ➔ Keep the poison container and take it to your medical facility

### What should I do if I suspect that my child has been poisoned?

- ➔ If your child is unconscious, check for breathing and a heartbeat and begin CPR immediately if absent. Call for help and activate the appropriate emergency medical response
- ➔ If CPR is not required, try to establish what your child might have swallowed and call your nearest poison center or the International SOS Assistance Centre for advice and assistance
- ➔ Do not induce vomiting unless instructed to do so. Never give salt water or attempt to stimulate the back of the throat with your finger. It is extremely dangerous to induce vomiting in cases of poisoning by corrosives (acids and alkalis) and certain hydrocarbons (e.g. kerosene)
- ➔ Do not make your child drink large volumes of water or milk unless acting on a doctor's instruction. Most poisons are absorbed in the duodenum (the first part of the intestine) and drinking large quantities simply propels the poison into the duodenum more quickly
- ➔ If the skin has been contaminated wash copiously with warm, soapy water
- ➔ If the eyes are contaminated, rinse with water for at least 10 minutes
- ➔ Transport your child to the nearest appropriate medical facility without delay. Remember to bring the poison container with you





# KIDS WITH FEVERS

## WHAT YOU NEED TO KNOW

Written by: Dr Sonia Bourreau, Family Doctor, International SOS Beijing Clinic

**Fever in children can scare parents, particularly first-time mums and dads. Fever is a sign that the immune system has been activated to fight an infection. And is therefore a symptom and not a disease. Children usually recover fully from most infections, whatever the level of fever they experience.**

### How can I measure my child's temperature?

It is important first to give you some directions about how to take a child's temperature and second, if you need to see a doctor it will help him/her to make a diagnosis. You can take a temperature using the oral (mouth), armpit (axillary) or ear (tympanic) method or by using the newer forehead (temporal artery) scanners. Although it is most accurate to use a rectal reading for infants and young children, this is usually done in the hospital setting.

### What is a fever?

A fever is technically a temperature above normal body temperature (about 37°C / 98.6 °F). Everyone's body temperature varies throughout the day and can differ by age, activity, clothes, external temperature and other factors, including where and how the temperature was measured.

If your child is well, there is no need to check their temperature.

### When should you NOT worry about your child's fever?

You don't need to be concerned if your child continues to be playful and is eating and drinking normally. Children may look more tired than usual particularly during the peak of the fever.

- ❑ **If the fever is below 39°C (102.5°F) and there are no other symptoms:** Temperatures of up to 39°C (102.5°F) for children from 3 months old can be common and may not relate to anything nasty. For your doctor, the meaning is the same - your child has a fever
- ❑ **After immunisation:** Fever after immunisation is common and usually resolves within 48 hours
- ❑ **In the absence of other symptoms:**
  - Observe your child
  - Administer fever medication, like Paracetamol (1<sup>st</sup> choice) or Ibuprofen. For the dosage, always follow the recommendations contained in the dosage instructions on the package insert. Consult your doctor if there is no improvement within 48 hours

### When should you call or go to see your doctor?

- ❑ **Your infant is younger than three months:** Bacterial infections are more severe for infants younger than three months and need to be detected faster
- ❑ **Your child's fever lasts more than five days:** There may be a bacterial infection needing treatment with antibiotics
- ❑ **Your child's fever is higher than 40°C (104°F):** Your child may be at risk of seizures, dehydration or poor feeding
- ❑ **Your child's fever does not come down after receiving fever medication**
- ❑ **Your child is not acting his/her normal self, e.g.:** It is difficult to awaken the child
- ❑ **The child is not consuming enough liquids:** Babies who are not wetting at least four diapers per day and older children who are not urinating at least every 12 hours may become dangerously dehydrated

### What to do if a seizure occurs?

Seizures are very scary side effects of fevers in some children. "Febrile seizures" occur in 2-4% of all children from 1 to 6 years old. Seizures commonly cause jerking movements and may look as if the child is "passing out". If your child has a febrile seizure it does not mean that he/she is or will become epileptic.

#### If your child develops a seizure:

- ❑ Put your child on his/her side
- ❑ Do NOT put anything in your child's mouth
- ❑ Call an ambulance if the seizure lasts more than five minutes or take the child to your nearest medical facility immediately

If the seizure lasts fewer than five minutes, call your doctor or seek immediate medical assistance.



# KEEP YOUR KIDS HEALTHY

Written by: Dr Pieter Kersemakers, Family Doctor, International SOS Beijing Clinic

**As the weather changes, so does an increase in colds and flu. These six tips will help you and your family resist some of the common winter ills.**



## Wash your hands regularly

Personal hygiene and washing hands are some of the key ways to prevent contagious diseases such as colds and gastroenteritis from spreading. Make sure that you and your kids wash your hands before eating or preparing food and after blowing noses, or coming into contact with others who are ill.



## Eat well – particularly lots of fruit and vegetables

Eating well, with a varied diet is important and vitamin supplements generally aren't needed if you follow an adequate diet. A normal and varied diet contributes more to staying healthy and will give your kids the nutrients they need.



## Eat a good breakfast

Eating a good breakfast is important as part of a healthy diet. Try to spread meals over the day and make sure the whole family eats plenty of fibre-rich foods. It is best to avoid snacks high in sugar, especially BEFORE meals.

The sensation of hunger stops when you eat sugar. Your child will be less interested in eating if they have a sugary snack before a meal. This is true for all carbohydrates, including things like puffed rice. If you would like to give your children something sweet, give it to them AFTER they have eaten their meal. This way the treats won't spoil their appetite.



## Get enough sleep

Getting enough sleep is very important as it is during sleep that children grow. Children who don't get enough sleep find it harder to concentrate during the day and school performance may be affected. Children also tend to get more easily annoyed when they haven't had enough sleep.



## Have an annual flu shot

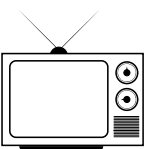
Flu shots are NOT harmful, they have hardly any side effects and are effective in preventing the flu. Having a flu shot will not affect the rest of your immunity nor will it weaken your immune system in general.



## Exercise

Normal exercise is healthy and don't need to be exaggerated based on age. Just follow the advice of your child's teachers.

Do some exercise together. The beneficial effects of exercise outweigh the negative effects of pollution.



Make sure that your children don't play video games or watch television the whole day. Too many hours of sedentary gaming can lead to obesity. I know that it's tempting when it's cold outside to sit in front of the computer, but try to keep your children active.



Allow your kids to spend some time with interactive gaming and socialising with other kids in this way. Every parent has to decide how many hours per day are acceptable to them. There are no specific rules regarding screen time limitations, it's mostly based on common sense and what you feel is appropriate for your family.



# HEALTHY HEART

Exercise regularly to keep your heart healthy



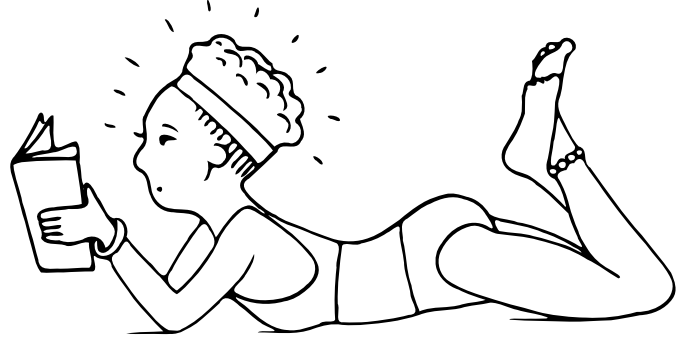
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# WHAT TO PACK WHEN TRAVELLING

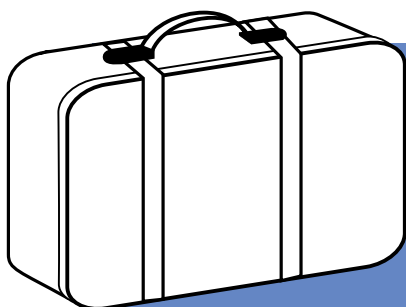
Find the hidden words in the table below.

Words run from left to right, top to bottom or diagonally.



S	W	I	M	S	U	I	T	A	I	S	O	W	D	L	U	S	H	T	H	G	F	S
V	A	T	O	J	S	C	H	E	Z	E	S	E	R	O	D	A	D	H	O	L	H	M
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## Hidden words:



1. Pajamas
2. Suitcase
3. Sunglasses
4. Toiletry Bag
5. Jacket
6. First Aid Kit
7. Money
8. Swimsuit
9. Passport
10. Toys
11. Shoes
12. Hat

# RABIES

## Have your pets vaccinated for rabies

Rabies is a serious infection of the nervous system. The nervous system controls everything you do – from breathing to walking. A person can get rabies after being bitten or scratched by an animal that carries the rabies virus.



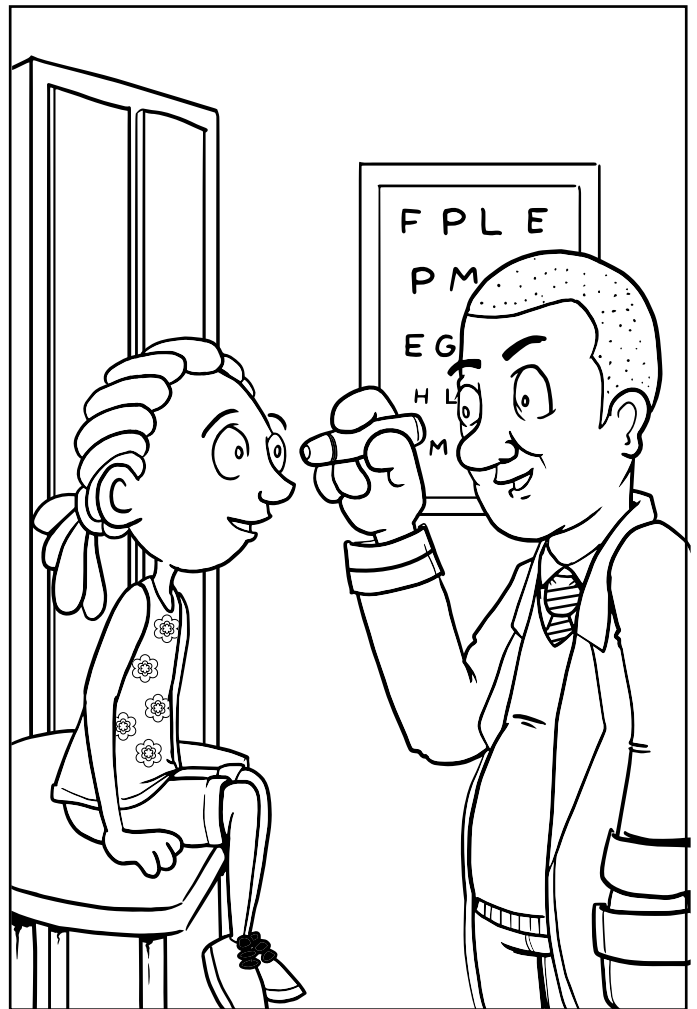
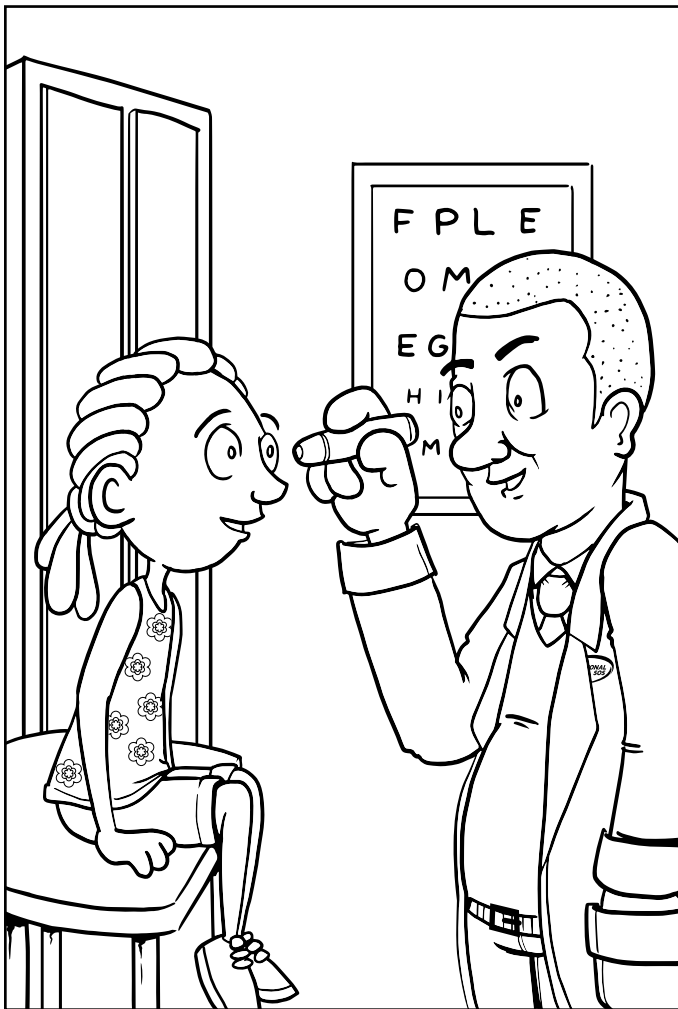
FOR YOU TO COLOUR IN.

# HAVE YOUR **EYES** **TESTED** REGULARLY

**SPOT THE 10 DIFFERENCES**

**A**

**B**



FOR YOU TO COLOUR IN.

**OUR TRAVEL RISK TRAINING  
CAN HELP YOUR PEOPLE TO  
STAY SAFE AND HEALTHY.**

**REDUCE EXPOSURE  
TO RISK. KNOW HOW  
TO RESPOND.**



WORLDWIDE REACH. HUMAN TOUCH.



**A TRAINING SOLUTION FOR A GLOBAL WORKFORCE.**

Whether your people are travelling to a modern city or a high-risk destination, they are never far from being affected by a potential medical or security threat. As an employer, ensuring your people are trained in the practical aspects of travel risk is integral to your Duty of Care. Furthermore, where training is provided, training records should be retained to help you demonstrate your compliance.

To help prepare your business travellers and expatriates, International SOS has developed a range of training programmes that cover personal security tips, real scenarios, decision-making skills and destination-specific awareness.

Our travel risk training is the perfect complement to our Travel Risk Mitigation suite of services, supporting International SOS membership. Our training is available in various formats including: eLearning modules, virtual learning and face-to-face workshops.

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