



Doctor's Orders...

How to avoid on-the-road disease and discomfort—whatever the length of your trip

If you travel frequently enough, venture far enough, or remain on the road long enough, matters of health will sooner or later confront you. If you do all three at the same time, as writer Adam Sachs did, you'd be wise to plan ahead—ideally, six weeks prior to departure. Irrespective of how far or how often you travel, medical maladies are almost always preventable with the following prescriptions.

Allow time to finish any vaccinations or other courses of treatment. What you require will depend on your itinerary, but if frequent travel is a part of your life, it makes sense to broaden your immunities with future trips in mind.

Pack a good medical kit and always keep it with you—the remedies you rely on may not be so easy to find while you're away. Obtain enough prescription medicines to see you through your journey.

A rapid succession of long-haul flights justifies fastidious precautions against deep-vein thrombosis—especially if other risk factors are present, including smoking, obesity, and, for women, being on the Pill. Drinking plenty of water, moving around the cabin, and wearing compression stockings are the easiest and most

effective safeguards.

Every meal away from home is an opportunity for foodborne infection. Know how to prevent it: frequent hand washing, drinking bottled water, and eating fruit only if you cut it open or peel it yourself and food only if it has been freshly and thoroughly cooked. Large, late meals, combined with the effects of jet lag, are more likely to raise cholesterol and increase the odds of heart disease.

By far the most common peril is an accident or injury—usually related to motor vehicles. Wear seat belts, and refrain from driving while intoxicated, tired, or jet-lagged. Sports carry an increased hazard abroad, since good medical care can be hard to find. Make sure helmets and safety equipment are up to snuff. Good medical-evacuation insurance is also essential.

Of course, there is one complication that modern medicine remains powerless to treat: the wanderlust that travel kindles in ourselves and others. This is, of course, a highly contagious condition.

—Dr. Richard Dawood



... And When to Flout Them

Our author did his best to dodge deep-vein thrombosis—but found that even the best Rx takes you only so far

To the literature of travelers' health, allow me to add the following. Do not stay awake for three days at a stretch, no matter how good the nightlife. Do not arrange the details of your arrival in Africa by phone while your malaria meds are kicking in. Do not kick at the wild dogs that chase your motorcycle across remote Polynesian fields. Do not consider espresso a sleep substitute in a cup.

And under no circumstances should you enter into a competitive situation involving Queensland rum and a stout crimson-cheeked Aussie nicknamed

The Sponge.

Travel magazines are sensitive about losing one of their own in action, so I was sent into the field with the latest intelligence on self-preservation. From London, Dr. Dawood prescribed anti-thrombosis socks. In Manhattan, Dr. Louis Morledge, a member of the International Society of Travel Medicine, shot me up with everything he could think of: anti-hepatitis A and B, anti-influenza, anti-yellow fever, anti-

typhoid, anti-tetanus, and for good measure, anti-polio (the disease still exists in Kenya and South Africa). I packed Cipro and Malarone and an over-the-counter nasal spray. Hydration would be my mantra. I'd stretch during every flight.

The reality—like that of so many travel expectations—was different. I wore the socks twice (they didn't look good with my shoes). Sensing a cold, I got trigger-happy with the Cipro but forgot to finish the dose (this can make matters worse, but my symptoms went away). I drank plenty of water but also plenty of Bloody Marys. Strapped into coach, knees to chin with *The Bourne Identity* on endless loop, I found that it's not so easy being good. I slept, when I slept, at irregular intervals in nonreclining seats. I ate in the kind of food markets my mother continues to warn me about.

I was lucky. Maybe the mad dash itself saved me from the luxury of physical breakdown. And although thinking about the doctors' sound advice also helped, so did not thinking about it too much. Like a map or a guidebook, doctors' orders are good to have and to heed, so long as they don't keep us from getting where we need to go.

—A. S.