



Travelling with medications and medical equipment across international borders

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Summary The international traveller needs to plan ahead to ensure medicines are available and used as directed for optimal therapeutic outcome. The planning needs to take account of legal and customs requirements for travelling with medicines for personal use. The standard advice by travel health providers is that travellers should check with the country of destination for requirements when travelling into the country with medicines for personal use. This is akin to introducing a barrier to care for this category of travellers. Innovative method of care for this group of traveller is needed.

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1. Introduction

The number of travellers crossing international borders is increasing. Worldwide, international tourist arrivals increased from 25 million in 1950 to 1 billion in 2012 [1]. Reports from the United Nations World Tourist Organisation (UNWTO) indicate that amongst all destinations, countries with emerging economies in Africa, Asia and South America are receiving unprecedented numbers of international travellers [1].

A study from Global TravEpinet, a US consortium of clinics providing care to international travellers, provides a snapshot of the health characteristics of international travellers. It was found that majority of the 13,235 individuals, over a two year period were travelling to tropical regions East Africa, South East Asia and South America [2].

Interestingly, more than half of the travellers reported having more than one chronic medical condition with 58% of the travellers taking daily medication. The median number of daily medications was 1 (range 0–15). Cardiovascular and cholesterol-lowering medications were the most common prescription medication used by 20% of the travellers. Eight percent of travellers were taking psychotropic medications; six percent were taking prescribed medications for respiratory conditions, while it is unclear if the travellers with immune compromising conditions were on any medications [3]. A related study examining medications

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problems among international traveller with medical comorbidities, the authors recommend adequate pre-travel counselling including referral for appropriate care [4].

Travellers confront a number of challenges when preparing to travel with medications [5]. Common issues of concern among international travellers are the quantity, packing, storage and the documentation relating to medications for personal use [6]. Travellers need to also be aware of legal and customs restrictions. Medications that have potential for addiction such as strong opioids must not be transported across international borders unless they are accompanied by a customs clearance from the destination country. Common medications in this problem area include narcotic and psychotropic medications [7,8]. This requirement applies even when these medications are obtained on a valid prescription.

Furthermore, clinicians also frequently encounter enquiries about taking medicines overseas and international customs regulations [9]. Just like problems related to drug–drug interactions, medication-related issues across international borders are unpredictable. Moreover, medication-related issues across international borders are often resource and time consuming to solve. To date, information available in the literature and the internet is incomplete and often inaccurate. Clinicians sometimes rely on extrapolation from an isolated case report for recommendations. Applied in the field, these case reports are often incorrect and impractical for most travellers [6]. There is no one single resource on to guide decision making.

The International Narcotics Control Board (INCB) is an independent and quasi-judicial body for implementation of the United Nations (UN) Drug Control Conventions (the Single Convention on Narcotic Drugs 1961, the Convention on Psychotropic Substances 1971 and the UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances 1988). Operating under the three Conventions,

the organisation monitors the enforcement of movement restriction of narcotic and psychotropic medications. The organisation has issued guidelines for individuals travelling with medications for personal use (Table 1) [7,10,11].

2. Objective

This descriptive study aims to assess the ease of finding the requirements for travellers with medications and medical equipment for personal use. In addition, we aim to assess our perception on the quality of service offered to travellers by embassies regarding enquiries about travelling with medications. Lastly, this study was undertaken to evaluate the implementation of the INCB recommendations among numerous countries popular in Australian migration and tourism.

3. Method

Using the Australian Bureau of Statistics (ABS) data, a list of the 10 countries contributing to the Australian migration in the period 2006 to 2011 was obtained [12]. Based on travel health literature, a list of additional 15 countries was obtained. These additional countries are popular travel destination for Australian travellers [13–15]. It is assumed travellers from Australia often travel to these countries. All together, the 25 countries are distributed in the six WHO regional areas [16].

Firstly, we searched the Australian embassy websites for the selected countries. Categories of information sought are shown (Box 1).

Secondly, we sent a standard email to each embassy requesting for information “*about the requirements for travellers to the country who are carrying medications and medical equipment for personal use*”. No embassy

Table 1 INCB recommendations.

Item	Explanation
No special certification is required for narcotics under 30 day's supply but a copy of prescription should always be carried	Under international drug control regime, governments are allowed to permit carrying of small quantities of preparations containing narcotic medications for personal use by international travellers Depending on the requirements of the destination country, a traveller may additionally be required to obtain documentation to prove legal ownership for medical purposes
No special requirement for psychotropic less than 30 days' supply	Under international drug control regime, governments are allowed to permit carrying of small quantities of preparations containing psychotropic medications for personal use by international travellers
Some substances are always prohibited e.g. dimethoxyamphetamine (DMA), tetrahydrocannabinol (THC), cocaine	Substances in schedule I of the 1971 convention. This results from the fact that substances in schedule I are hallucinogens, CNS stimulants with very limited or no medical use
No prescription or certificate is required for any medicine if less than 20 doses are carried Example: dihydrocodeine, pholcodeine, codeine, preparations of opium or morphine	In a quantity no more than 100 mg in each dosage unit or to a level not exceeding 2.5% of the active substance Morphine & Opium: Preparation containing no more than 0.2% morphine; calculated as the anhydrous salt

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