

Visiting Relatives and Friends (VFR), Pregnant, and Other Vulnerable Travelers

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KEYWORDS

• Traveler • VFR • Pregnancy • Pediatric • Elderly • Vulnerable

KEY POINTS

- Visiting relatives and friends travelers have a disproportionate burden of travel-related morbidity and are less prone to adopt preventive measures.
- The travel associated risks for the pregnant traveler vary across the trimester of pregnancy and depend on the preexisting medical conditions and obstetric problems.
- Very young children and the older traveler have a weaker immune system, which increases the risk of infectious diseases and severe forms of malaria during travel: the need for appropriate pre-travel immunization and chemoprophylaxis is increased.
- In general, live vaccines should be avoided during pregnancy.
- Food and water precautions during travel are particularly recommended to vulnerable travelers like children, pregnant women and elderly.

INTRODUCTION

With industrial development and expanding tourism, many people now have an opportunity to travel to many previously unreachable foreign destinations. Travelers with medical or physical conditions or who are vulnerable because of pregnancy or age (pediatric or elderly traveler), require specialist support and advice before traveling. Qualified travel agencies and accredited travel medicine clinics should provide the necessary information to help travelers with disabilities or health problems plan their trip. Web-based advice providing information on travel health may provide inappropriate or irrelevant advice. Internet sources should be consulted where the body is internationally recognized or if a health professional recommends it.

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Immigrants who return to their country of birth to visit relatives and friends should be classified as vulnerable travelers, as they have been shown to carry a disproportionate burden of travel-related morbidity.

In this article, we explore the major risks to health and the main preventive strategies appropriate to the most vulnerable travelers.

VISITING RELATIVES AND FRIENDS TRAVELERS

Definition

The definition of VFR, as a group of travelers commonly referred to as “visiting friends and relatives,” is continuously changing, as the trend and character of travel changes.

The “classic” VFR is defined as a traveler who is of a different ethnicity in relation to the host country population but similar to that of the destination population, and whose intended purpose of travel is to visit friends or relatives, where there is a risk for tropical infectious diseases (eg, malaria).

However, following extensive immigration and increasing global mobility, second-generation or third-generation immigrants challenge this definition. Several scenarios highlight the problems of VFR definition in the current era. In the literature, authors have used different terms for VFRs, for example, the foreign-born traveler (“immigrant” VFR) from the child or non-foreign-born spouse of an immigrant traveler (“traveler VFR”), although they may well travel to the same destination visiting friends or relatives. Recently, a new definition of VFR was proposed based on 2 fundamental criteria, with the exclusion of race, ethnicity, or administrative/legal status (eg, immigrant) and where a gradient of risk (both infectious and noninfectious) exists between where he or she currently lives and where he or she travels to visit. This definition underlines the importance of hazards that are not infectious diseases (eg, road accidents, injuries, crime, pollution etc) together with classical infectious hazards (eg, malaria, water-borne infections).^{1,2}

A debate on the definition of VFR continues, confirming the importance of this group of travelers in the discipline of travel medicine.³

Travel-Associated Risk

There are several health determinants that are attributed to the higher risk of both travel-related infectious and noninfectious diseases among VFR. These are best categorized under broad groupings, including the socioeconomic status of travelers (eg, level of schooling, legal status, financial barriers to pretravel health care), preexisting health conditions (eg, immunodeficiency, age), behaviors (eg, for sexually transmitted diseases, last-minute travel plans, and longer trips), and the environment (eg, pollution or the possibility of having access to safe food, clean water, and sanitary conditions at the destination).^{1,2}

Malaria

In 2010, 71% of malaria cases imported into the United States among civilians was among VFRs, who also constituted 53% of all severe malaria cases.⁴ Similar data came from Europe: data from GeoSentinel⁵ show that VFRs who traveled to sub-Saharan Africa had more than 8 times the odds of receiving a diagnosis of malaria than other tourist travelers. In the same study, *falciparum* malaria accounted for 86.8% of illness in the immigrant VFR group, 63.3% in the traveler VFR group, and 44.0% in the tourist traveler group.

Increased incidence of malaria may relate to both travelers and their journey. VFRs may travel to and stay in remote rural areas for long periods and have closer contact

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