Traveler's Diarrhea (TD)
Guide to Self-management for Adult Travelers

This information applies to healthy adult travelers. Consult your health care provider for recommendations for children, pregnant or lactating women and travelers with chronic illnesses.

Prevention:
- Wash your hands before eating and follow food and water precautions. (1)
- Preventive drug treatment is not generally recommended since acute treatment is quickly effective. Also for most healthy travelers, the possible risks associated with daily medication use for several weeks outweigh the benefits.
- Discuss preventive drug treatment with your health care provider if you:
  - have insulin dependent diabetes
  - take a proton pump inhibitor like omeprazole (Prilosec®), lansoprazole (Prevacid®), esomeprazole (Nexium®), or pantoprazole (Protonix®) OR a H2-blocker like ranitidine (Zantac®) or famotidine (Pepcid®) and cannot go off of these medicines for your travel. Medications that reduce gastric acid secretion have been shown to increase the risk of TD by a factor of 12.
  - are immunosuppressed
  - have an intestinal problem like Crohn's disease, ulcerative colitis, ileostomy

Treatment:
- Follow "Traveler's Diarrhea Flow Chart for Drug Treatment for Adults" in your educational materials.
- Replace fluids and salts to prevent dehydration
  - Increase intake of nonalcoholic, noncaffeinated beverages or soups made with "safe" water.
  - Alternating plain safe drinking water, soup, and bottled juice is a good way to stay hydrated.
  - Fluids should be consumed at a rate to reduce thirst and maintain a pale color of urine.
  - For more severe fluid loss, the World Health Organization recommends oral rehydration salt (ORS) solution. ORS powder packets to mix with water are available in Campus Health Services Healthy Heels Shoppe and in many pharmacies overseas. ORS solution should be consumed or discarded within 12 hours if at room temperature or 24 hours if refrigerated.
  - If ORS solution is not available, a substitute containing 6 level teaspoons of sugar plus 1/2 level teaspoon of salt in 1 liter of safe drinking-water can be used.
- Change Diet
  - Suggested foods include: boiled starches/cereals (potatoes, noodles, rice, wheat, oatmeal) with some salt, salted crackers, tortillas, bananas, soup and boiled vegetables can also be used.
  - Dairy products aggravate diarrhea in some people and should be avoided.
  - When stools are formed, diet may return to normal as tolerated.
- Drug Treatment
  Follow flow chart.

Seek medical help:
- If signs of dehydration appear (dizziness, weakness, dry mucous membranes, sunken eyes, deep-yellow urine, increased heart rate, reduction of tears and urine) despite self-treatment as described above
- If diarrhea symptoms do not begin to improve within 24 to 36 hours after beginning antibiotic
- If high fever (>101°F, 38°C) continues after 1 day of beginning antibiotic
- If you have persistent diarrhea (lasting ≥ 14 days)

<table>
<thead>
<tr>
<th>Diarrhea Travel Kit</th>
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<tbody>
<tr>
<td>Water purification method</td>
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<tr>
<td>Toilet paper/tissues and/or baby wipes</td>
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<tr>
<td>Thermometer</td>
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<tr>
<td>Bismuth subsalicylate (BSS)</td>
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<td>Loperamide (Imodium®)</td>
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<tr>
<td>Supply of antibiotic (Azithromycin, Levofloxacin or alternative)</td>
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<td>ORS solution packets, especially if access to medical care is limited</td>
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(1) Want to learn more: [CDC 2018 Yellow Book - Food and Water Precautions](#) Updated August 2017