Traveler’s Diarrhea

- 20-50% of travelers have symptoms
- Self-limiting
- Dehydration and discomfort main concerns
- Blood or mucous in stool or high fever require medical attention
- **Symptoms:** Watery stools, usually by third day of travel
- Causes: Infection (bacteria or virus) dietary changes, increased alcohol consumption, jet lag, fatigue, stress, climatic changes, change in water balance, oversized chilled beverages
- Causative organisms disappear from intestinal tract in a few hours or days without antibiotics
- The setting where food is obtained makes a difference: non-deluxe accommodations, street vendors, eating “out” rather than in a private residence
- Most common areas include Mexico, S. America, Africa & Asia
- **Treatment:** rest, fluid and electrolyte replacement (mineral water, canned juices, carbonated caffeine-free beverages, salty soups and “sports” drinks)
  Guideline: Drink enough fluid so light colored urine every 3-4 hours
- Avoid dairy, fruits, vegetables, alcohol, spicy or fatty foods
- Pepto Bismol® for symptomatic relief of cramping and frequent stools
- Immodium AD® to reduce passage and duration of loose stools
- Once acute symptoms subside start “bland diet”: oatmeal, mashed vegetables, bouillon, noodles, rice, eggs and bananas, etc.
- **Prevention:** Pepto Bismol® two tablets four times a day for three weeks maximum (avoid with aspirin, non-steroidals, ibuprofen, anticoagulants) or if history of aspirin allergy, kidney insufficiency or gout. Tongue brushing is recommended to avoid “black tongue”.
- Simplified food/beverage recommendations: boiled bottled water, carbonated beverages, bottled alcoholic beverages, tea and coffee if drunk while still piping hot.
- Safe Food: very hot or dried foods or peeled fruits
- Avoid: cold or raw foods, unpasteurized dairy, street vendors or ice