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## The Business Traveler's Guide for Safe Dining Abroad

As companies embark upon new business ventures that launch them into the developing world, an increasing number of employees will be racking up frequent flyer miles. Traveling to developing countries can be exciting; however, it can also be wrought with danger - mainly in the form of food and waterborne diseases. On the global front, new food-related infections are emerging. The variety of foodborne diseases present at any time is constantly in flux.<sup>1</sup>

A century ago, typhoid fever, bovine tuberculosis and cholera were the foodborne diseases of the day, but improvements in food and water safety practices have all but banished those ailments in the U.S. In the developing world, however, where safe food and water standards vary, these diseases still linger.<sup>2</sup> Your traveling workers may be just a fruit salad or a chicken satay away from the infirmary. What can you do to help keep them safe? The key is education.

WorkCare's TravelCare department and the Centers for Disease Control (CDC) provide the following tips for business travelers dining abroad.

### Montezuma's Revenge, et al.

Montezuma's revenge, or traveler's diarrhea (TD), is the most common illness awaiting unassuming business travelers. According to the CDC, destinations that pose a high risk for this disease are Latin America, Africa, the Middle East and Asia. Raw foods are a primary culprit. Travelers should avoid salads, uncooked vegetables, unpasteurized milk and milk products.



Coming in at a close second to TD in frequency is the Hepatitis A virus (HAV). HAV is a viral disease that affects the liver and causes fever, malaise, anorexia, nausea, and abdominal discomfort, followed within a few days by jaundice. It is endemic in underdeveloped countries, and is

transmitted by direct person-to-person contact, through exposure to contaminated water, ice, or shellfish harvested from sewage contaminated water, or from fruits, vegetables, or other uncooked foods that become contaminated. For most foodborne pathogens, vaccines are unavailable, but two exist for HAV.

### The Water Will Kill You, The Beer Won't

Hydration is important while at home and abroad. However, travelers should limit their drinks to "safe" beverages, such as commercially available bottled water with its safety seal intact, beer, wine, hot coffee, tea or water boiled appropriately or treated with iodine or chlorine. Caution should be used when consuming drinks with ice since the water used in making it could have been contaminated.

### Fast Food

Travelers are advised to dine at street vendor carts with extreme caution. These roaming restaurants increase the likelihood of illness due to their long-standing fare that rests at ambient temperatures, providing a perfect breeding ground for bacterial growth

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and re-contamination. Avoid undercooked and raw meat, fish, shellfish and eggs.

## A Better Shot at Health

The CDC divides vaccines for travel into three categories: routine, recommended, and required. Travelers should see their doctor or travel health expert four to six weeks prior to a trip to determine which shots are needed. Most vaccines take time to become effective and some vaccines must be given in a series over a period of days or sometimes weeks.

## General Tips

Obvious preventive measures include frequent hand washing or using hand gel with more than 60 percent alcohol. Standard medical insurance policies are rarely valid overseas. Many employers use outside companies to buy travel insurance for their employees and to coordinate their medical care and transportation, should the need arise. To request educational materials on preventative health measures to give to your traveling employees, please email [info@workcare.com](mailto:info@workcare.com).

## References:

1. Tauxe, R. Roots of foodborne illness. The New York Academy of Sciences. New York, NY. 21 April, 2008.
2. The Centers for Disease Control. Typhoid fever. [http://www.cdc.gov/ncidod/dbmd/diseaseinfo/TyphoidFever\\_g.htm](http://www.cdc.gov/ncidod/dbmd/diseaseinfo/TyphoidFever_g.htm).

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