Kokoda Trail

The following information must be viewed as a guide only. It is not intended, nor implied to be a substitute for professional medical advice.

Specific recommendations on vaccinations, antimalarial medications & targeted travel health advice is always provided on an individual basis taking into account:
• the personal health of the traveller including past medical & vaccination history;
• intended activities;
• precise itinerary;
• style of travel;
• type of accommodation;
• time of year;
• length of stay.

As well, some vaccines & tuberculosis are very much influenced by local disease risk. Specific face-to-face advice is particularly important when recommending antimalarial medications & those for presumptive treatment eg for travellers diarrhoea.

We strongly recommend travellers seek an appointment with a doctor trained in travel health prior to departure.

Medical & nursing staff at Travel Doctor-TMVC are trained in international public health issues with a focus on immunisations & preventive medicine. Many have travelled extensively & a number have worked in less developed areas of the world for extended periods. Travellers should undergo individual risk assessments whether they are short term holiday makers, business people or the long term expatriate worker. The Travel Doctor-TMVC has clinics Australia wide. In Australia the local centre may be contacted on 1300 658 844, or by visiting www.traveldoctor.com.au. It is recommended that you visit a travel health professional 6-8 weeks prior to departure. However, if that time frame is not possible, remember – “It’s never too late to vaccinate”.

Healthy Trekking in PNG

The Kokoda Trail is becoming more & more popular with Australian adventure travellers. The trail spans 96 km from Kokoda to Owers’ Corner & includes rugged but spectacular mountain scenery. Trekking the trail is a physically demanding activity & a reasonable level of physical fitness is required to cope. We advise a pre-travel medical assessment, especially for trekkers over 40 years of age.

In addition, temperatures & humidity are high, & the route is often very wet due to tropical downpours. Dehydration should be avoided, as this happens easily in the high temperatures & humidity. Heavy sweating causes loss of fluid & body salts, which if not corrected can have fatal consequences, (the cause of a recent disaster in trekkers there). Ensuring adequate clean water supplies, using additional electrolyte solution, & drinking frequently are important safety measures. Walking in wet footwear for long periods should be avoided & advice should be sought on appropriate clothing & footwear.

Pre-travel preparation will help protect your health while you are away. To assist you in recognising & understanding some of the major travel health risks you may face while on the Kokoda Trail, The Travel Doctor-TMVC has prepared a summary of some of these issues in the following pages. The table below provides a brief description of some of the major travel health issues & vaccinations that should be considered for travel to Kokoda.

We hope you find this information useful in preparing for your trip. Remember it is advisable to consult a travel health specialist prior to departure.

Currency of your basic immunisations such as Tetanus & Diphtheria should be checked & others like Hepatitis A & Typhoid considered according to the criteria mentioned previously.

Major Travel Health Issues & Considerations for Trekking the Kokoda Trail

<table>
<thead>
<tr>
<th>Disease</th>
<th>Description</th>
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<tr>
<td>Hepatitis A</td>
<td>This is a viral disease of the liver which is transmitted through eating contaminated food or drinking contaminated water. It is the most common vaccine preventable disease that occurs in travellers to less developed areas of the world. It is strongly recommended for travel to PNG.</td>
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<tr>
<td>Hepatitis B</td>
<td>This is a viral disease of the liver that is transmitted via blood, blood products or bodily fluids. It is vaccine preventable. Hepatitis B immunisation is now part of the childhood immunisation schedule. Many adult travellers have missed this very important immunisation &amp; travel may be a good reason for vaccination. There is a high incidence of Hepatitis B in PNG.</td>
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<tr>
<td>Typhoid</td>
<td>Typhoid Fever is caused by a bacteria found in contaminated food &amp; water. It is endemic in the developing world &amp; vaccination is recommended for travellers to areas where environmental sanitation &amp; personal hygiene may be poor. The adventurous eater venturing ‘off the beaten’ path should certainly consider vaccination.</td>
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Tetanus, Pertussis & Diphtheria
Tetanus is caused by a toxin released by a common dust or soil bacteria, which enters the body through a wound. Diphtheria is a bacterial infection of the throat & occasionally of the skin. It is found world wide & is transmitted from person-to-person by coughing & sneezing. Pertussis (Whooping cough) is a highly infectious respiratory infection responsible for 300,000 deaths annually, mainly in children. Diphtheria & pertussis vaccines can be added to the tetanus vaccine. Because many adults no longer have immunity from childhood immunisation it is advised that travellers to less developed countries have a tetanus, diphtheria & pertussis booster.

Measles, Mumps & Rubella
Childhood immunisation coverage in many developing countries is not very good. As such, travellers whose birth date is after 1966 should check they have had 2 doses of measles vaccine. Since 1990 this may have been as the combination vaccine MMR (measles, mumps & rubella). Those born prior to 1966 are most likely to have long term immunity from previous exposure as a child.

Chickenpox
This very common infectious disease can now be prevented through immunisation. Many people miss the disease in childhood only to have a significant illness as an adult. Travel puts one at higher exposure & if one cannot elicit a history of having had the illness a test can show whether at risk.

Influenza
Individuals intending to travel out of an Australian winter might consider the current flu vaccine at the beginning of the season. Exposure to illness in airports & commuter transport is common & infection would put completion of the trek at risk. In fact, influenza is likely to be the most common vaccine preventable disease faced by travellers.

Malaria
Malaria is transmitted by a night biting mosquito. Insect avoidance measures should be followed throughout the trip. Medication for the prevention of malaria is crucial for the Kokoda trail. Which drug is recommended depends on individual circumstances & needs to be discussed with an experienced travel physician. It is also vital to continue with the medication for the recommended interval on return to Australia. Upon return, any flu like illnesses should be investigated by a travel health specialist.

Dengue Fever
Dengue (pronounced den-gee) Fever is a viral disease with flu like symptoms that is transmitted by mosquitoes. There is no vaccine for dengue fever & prevention is based upon insect avoidance via repellents, nets & insecticides. The mosquito is a day time biter & the risk is greatest in urban areas.

Japanese Encephalitis (JE)
JE is a mosquito borne viral disease prevalent in rural areas of Asia & Indonesia that can lead to serious brain infection in humans. Risk is usually greatest during the monsoon months. A vaccine is available & is particularly recommended for adults & children over 12 months of age who will be spending a month or more in rice growing areas of countries at risk (or who repeatedly visit such areas). It is also recommended for people travelling to an area where an outbreak is known to be occurring. Insect avoidance should be considered the primary means of defence. This vaccine would not usually be recommended for a trek of up to 10 days, but if further time was expected to be spent in the region, it could be indicated.

Traveller’s Diarrhoea
Up to 40% of tourists may develop 3 or more loose bowel motions a day within the first week of travel. A variety of germs can be responsible for this infection & a traveller’s medical kit containing appropriate therapy can rapidly improve the symptoms.

Travelling in PNG – Special Considerations
- **Malaria** is a risk factor in PNG. Malaria prevention options should be discussed with a travel medicine specialist prior to departure.
- **Parasitic infections & tropical ulcers** are a concern on the Kokoda trail. **Hook worm** can result from the penetration of worms through intact skin so enclosed foot wear is essential.
- **Fungal infections** occur readily in trekkers due to the humidity & wet. Feet are particularly prone, & drying feet, socks & boots is advised every night. Carrying a broad-spectrum antifungal cream is recommended.
- **Dehydration** is a major problem. Keeping well-hydrated is important, & ensuring that trekkers are carrying adequate supplies of drinking water is essential. Water should be boiled, & the addition of electrolyte solutions, such as hydralyte, can assist in addressing the associated loss of body salts.

**Remember to check the DFAT ‘Smartraveller’ website www.smartertraveller.gov.au prior to departure**