



TRAVEL MEDICINE

How to Travel Smart and Stay Safe

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IDIC Hong Kong, 23 October 2025





TRAVEL MEDICINE: What you should know?

- What is travel medicine?
- Available resources?
- When is counseling necessary?



Have you ever see travelers requesting pre-travel consultation before going abroad?



WE ARE IN A SMALL WORLD!

Hong Kong Investigating Initial Chikungunya Case of 2025

August 4, 2025 • 4:50 am CDT

CDC Reports Fourth Human Case of H5 Bird Flu Tied to Dairy Cow Outbreak

[Español \(Spanish\)](#) [Print](#)

Press Release

For Immediate Release: July 3rd, 2024

Contact: [Media Relations](#)

(404) 639-3286

Healthcare & Pharmaceuticals

Japan's health ministry reports country's first death from mpox

By Reuters

December 13, 2023 4:21 PM GMT+7 · Updated 4 months ago



Aa



TOKYO, Dec 13 (Reuters) - Japan's health ministry on Wednesday reported the country's first fatality from mpox.

The patient was a man in his 30s with a prior infection with HIV and no travel history, the ministry said in a statement.

Mpox is a viral infection that spreads through close contact, causing flu-like symptoms and pus-filled lesions. Most cases are mild but it can kill.

Concerns Growing over Measles Outbreak in Japan





LETTER ▶ *Emerg Infect Dis.* 2016 Jul;22(7):1317–1318. doi: [10.3201/eid2207.160469](https://doi.org/10.3201/eid2207.160469)

Yellow Fever in a Worker Returning to China from Angola, March 2016

[Yun Ling](#)¹, [Jun Chen](#)¹, [Qin Huang](#)¹, [Yunwen Hu](#)¹, [Aihong Zhu](#)¹, [Shanke Ye](#)¹, [Lie Xu](#)¹, [Hongzhou Lu](#)¹,



Thai Travel Clinic
Hospital for Tropical Diseases
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Research ▾

Product ▾

Developers ▾

Safety

Company ▾

Se

Introducing ChatGPT

We've trained a model called ChatGPT which interacts in a conversational way. The dialogue format makes it possible for ChatGPT to answer followup questions, admit





+ New chat

Nigeria travel vaccines r ✎ 🗑

🗑 Clear conversations

👤 Upgrade to Plus

NEW

🌙 Dark mode

🔗 Updates & FAQ

🚪 Log out

WA

I'm traveling to Nigeria. Which vaccines do you recommend?



If you are traveling to Nigeria, it is recommended that you get vaccinated against a number of diseases, including:



1. Yellow fever: Yellow fever vaccination is required for all travelers to Nigeria, as the disease is endemic in many areas of the country.
2. Hepatitis A and B: These vaccines are recommended for all travelers to Nigeria, especially if you will be staying for an extended period or have close contact with locals.
3. Typhoid: Typhoid fever is a common food and waterborne disease in Nigeria. It is recommended that you get vaccinated against it before traveling.
4. Meningitis: Nigeria is part of the "meningitis belt" in sub-Saharan Africa, where outbreaks of meningococcal meningitis occur regularly. Vaccination is recommended for travelers, especially during the dry season (December to June).
5. Polio: Nigeria has recently been

🔄 Regenerate response

Send a message...





+ New chat

Clear conversations

Upgrade to Plus

NEW

WA

I'm traveling to Nigeria. Which vaccines do you recommend?

5. Polio: Nigeria has recently been declared free of wild polio virus transmission, but vaccination is still recommended, especially for travelers staying for an extended period.
6. Measles: Measles outbreaks occur regularly in Nigeria. Make sure you are up to date on your measles vaccination before traveling.
7. Cholera: Cholera outbreaks occur regularly in Nigeria, especially during the rainy season (June to September). The vaccine is not 100% effective, but it may offer some protection.

It is important to consult with a healthcare provider or a travel medicine specialist at least 4-6 weeks before your trip to discuss which vaccines are recommended for you based on your individual health status, planned activities, and other factors.



Risk of Travel

- Risk of infectious diseases
- Spreading of infectious diseases from one country to another
- Risk of exacerbation of existing diseases e.g. DM, asthma, epilepsy, etc.
- Risk of travel-related problems e.g. AMS, Decompression sickness, economy class syndrome etc.
- Risk of accident/injury/homicide
- Psychological problem in travelers e.g. culture shock



Practices in Travel Medicine

• Pre Travel visit

- Risk assessment and management
- Recommendation of vaccination/chemoprophylaxis
- Malaria prevention and prophylaxis
- High altitude counselling
- Other risk: travelers with underlying diseases, specific destination

80%

• Post travel and During Travel Visit

- Screening of returned travelers
- Diagnosis and treatment of common problem in returned-travelers eg fever, diarrhea, rash, eosinophilia

• Surveillance, Prevention and Control, Research



Practices in Travel Medicine

- **Pre Travel visit**

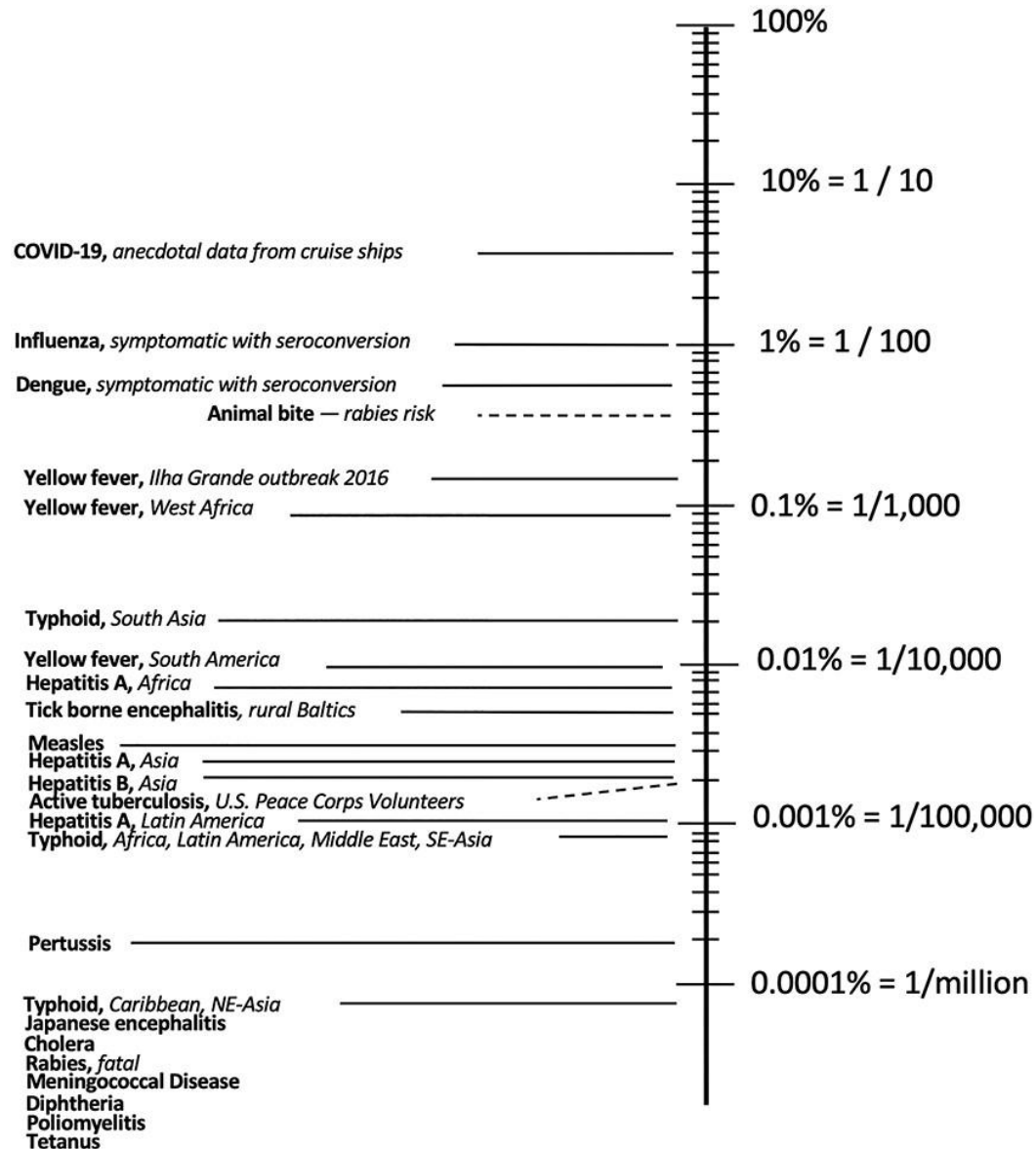
- Risk assessment and management
- Recommendation of vaccination/chemoprophylaxis
- Malaria prevention and prophylaxis
- High altitude counselling
- Other risk: travelers with underlying diseases, specific destination

- **Post travel and During Travel Visit**

- Screening of returned travelers
- Diagnosis and treatment of common problem in returned-travelers eg fever, diarrhea, rash, eosinophilia

20%

- **Surveillance, Prevention and Control, Research**



NEW STEFFENOGRAM!

Vaccine preventable disease travel health risks:
Estimated incidence per month in lower income
countries among non-immunes



Impact of symptomatic VPDs in travellers

Impact					
VERY HIGH: CFR > 10% and/or Frequent sequelae	• Japanese encephalitis • Rabies • Meningococcal disease • Diphtheria • Poliomyelitis • Tetanus			• Yellow fever, South America	• Yellow fever: - in outbreak - West Africa
HIGH: CFR 1-10% and/or Sequelae			• Tick-borne encephalitis, rural Baltics		
INTERMEDIATE: CFR $\pm$ 1% and Hospitalization > 10%	• Typhoid: NE-Asia, Caribbean • Cholera	• Typhoid: Africa, Latin America, Middle East, SE-Asia • Pertussis	• Hepatitis A • Hepatitis B • Measles	• Typhoid: South Asia	• Dengue
LOW: CFR < 1% and Hospitalization < 10%		• Pertussis		• Mpox (?)	• COVID-19 • Influenza • [Risk of rabies, PEP indicated]
	< 0.1	0.1-0.9	1-9	10-99	≥ 100
	Incidence per 100,000 person-months				

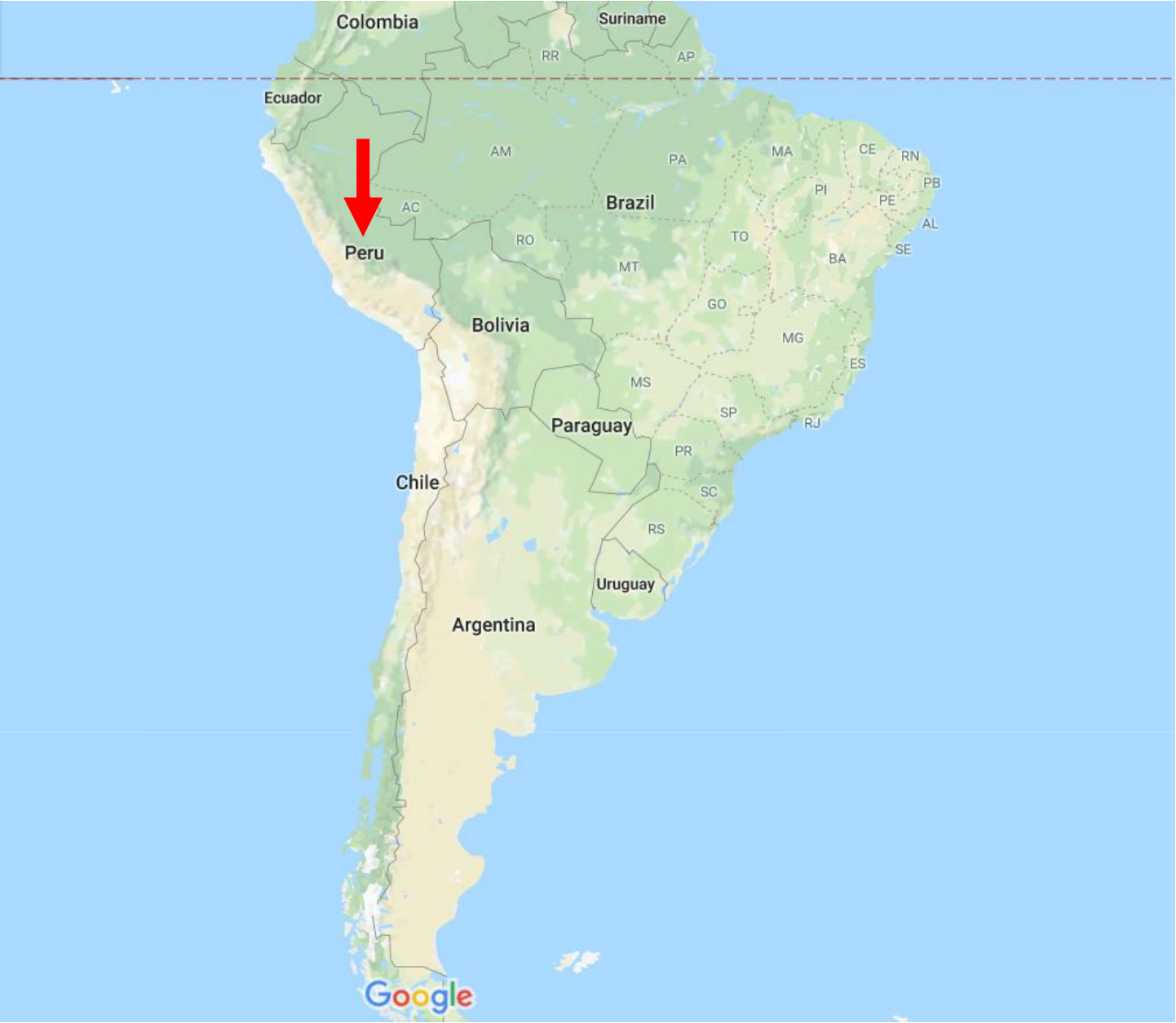


No vaccine package in Travel Medicine



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Peru







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INDIA



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Structured Approach to Medical Consultation before international travel

Risk Assessment

Medical history, including medications, disabilities, immune status, immunizations, surgeries, allergies, and pregnancy or breast-feeding

Prior travel experience

Specific itinerary, including regions, season, and dates

Activities (e.g., adventure travel and events involving mass gatherings)

Type of accommodations

Travelers' risk tolerance

Financial challenges

Standard In-Office Interventions

Administration of immunizations
Updating of routine vaccines —
MMR, Tdap, pneumococcal, varicella, influenza
Routine travel vaccines —
hepatitis A, typhoid, hepatitis B
Special travel vaccines —
yellow fever, rabies, polio, meningococcal, Japanese encephalitis, cholera, tickborne encephalitis

Malaria chemoprophylaxis (if risk)
Individualize to itinerary and patient

Travelers' diarrhea
Food and water precautions
Oral rehydration and use of loperamide and bismuth
Antibiotic self-treatment options for severe diarrhea
Prophylaxis with bismuth or antibiotic (only if high risk)

Focused Education before the Trip

Vectorborne diseases (if risk)
Personal protection measures for malaria, dengue, chikungunya, Zika virus infection, leishmaniasis, rickettsial disease, sleeping sickness

Other travel-related illnesses (as applicable)
Altitude illness
Travelers' thrombosis
Motor vehicle injury
Bloodborne and sexually transmitted infections
Swimming, water exposure, and marine hazards
Transportation-associated illnesses
Respiratory infection and tuberculosis
Rabies and animal-associated illness
Skin conditions and wounds

Medical kit and medical care abroad
Personal health kit
Available medical facilities
Evacuation insurance; supplemental health insurance



Pre-travel Consultation

- Geographical and health risk at the destination
- Medical history and travel itinerary
- Individual risk assessment
- Standard intervention and preventive measures



General Consideration for Travel Vaccination

☐ Routine vaccine

- ☐ EPI, different country – different EPI
- ☐ MMR, Hep B, Tetanus etc.

☐ Required vaccine

- ☐ Required for specific country or event
- ☐ Yellow fever vaccine – Endemic country, Meningococcal vaccine – Hajj, Umrah

☐ Recommended vaccine

- ☐ Hepatitis A, typhoid, rabies, JE etc.



Pre-travel Consultation

- Geographical and health risk at the destination

- Medical history and travel history

- Risk assessment

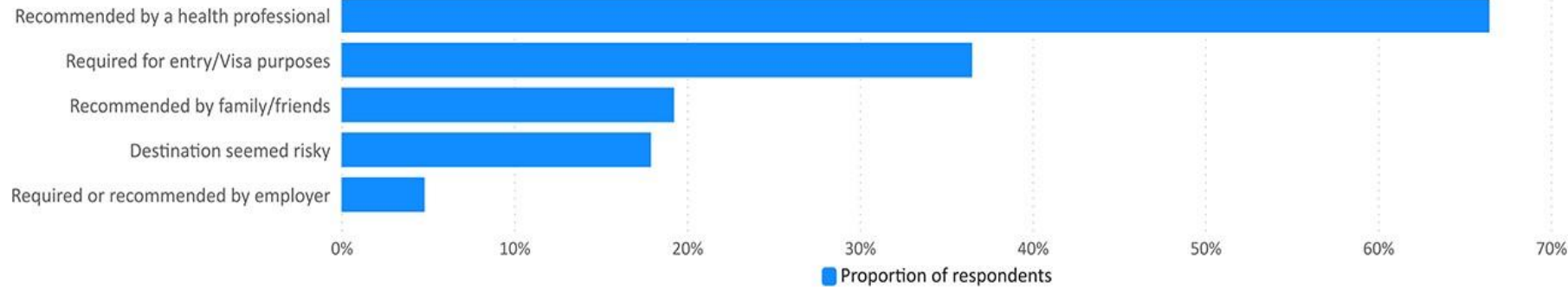
- Standard intervention and preventive measures

Minimize the travel health risk during travel



A

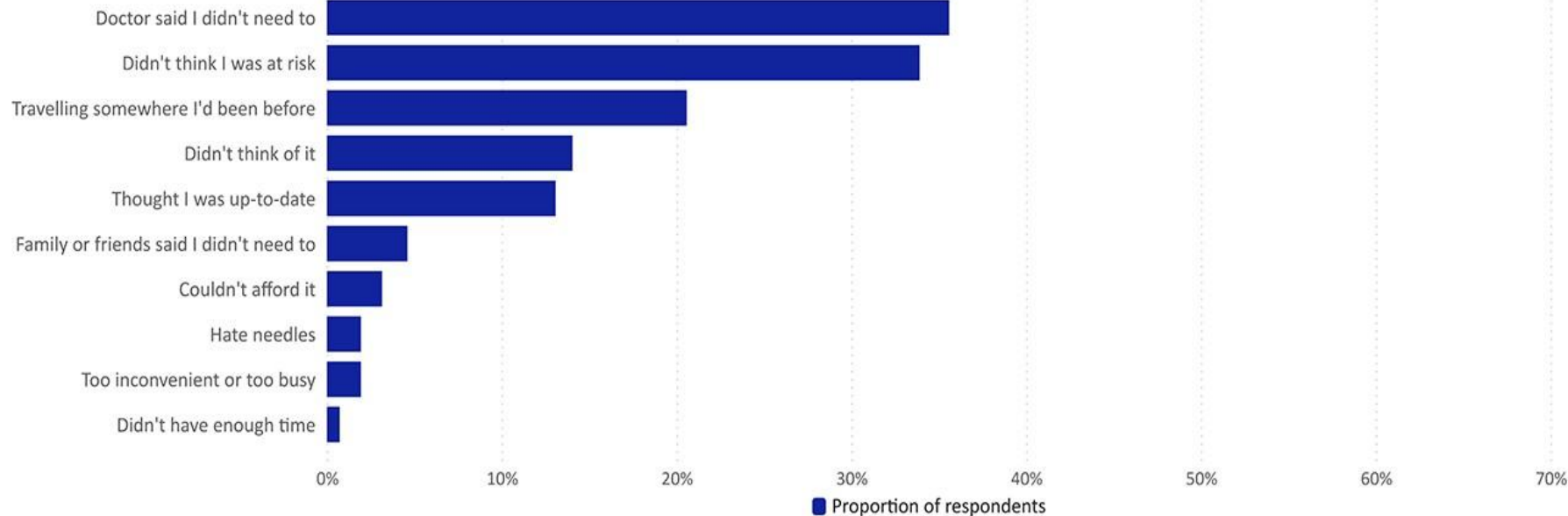
What prompted you to get vaccinated before your trip(s)? n=748



Reported reasons for receiving (panel A) or not receiving (panel B) vaccines pre-travel.

B

Why didn't you receive vaccines before your trip(s)? n=413





Routine vaccine and Travel Vaccine

Travel Vaccine	Routine Vaccine
Hepatitis A	
Japanese Encephalitis	
Polio (IPV)	
Typhoid vaccine	MMR
Rabies	Tetanus, Diphtheria, Pertussis
Yellow fever	Hepatitis B
Meningococcal vaccine	Influenza
Cholera	Varicella
Tick-borne encephalitis	Pneumococcal
	Hib
	Rotavirus



Sonstige Schutzimpfungen, z. B. gegen
Cholera, FSME, Hepatitis A, Meningokokken, Pneumokokken, Typhus, Varizellen
Other vaccinations / Autres vaccinations

Datum Date	Impfung gegen vaccination against vaccination contre	Handelsname und Chargennummer des Impfstoffes (Vignette) Name of vaccine and batch no.(vignette) nom du vaccin et numéro du lot (vignette)	Unterschrift und Stempel des Arztes Signature and stamp of physician Signature et cachet du médecin
07.08 2008	FSME II	FSME-IMMUN 0,25 ml Junior Ch.-B.: Baxter verwendbar bis: VNR1H04E 07 2009	DR. M. PAYDAR UNIVERSITÄT 70329 STUTTGART 123599/01
13.03 2009	FSME III	FSME-IMMUN 0,25 ml Junior Ch.-B.: Baxter verwendbar bis: VNR1H04E 07 2009	DR. M. PAYDAR UNIVERSITÄT 70329 STUTTGART 123599/01



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Indikations- und Reiseimpfungen,
z. B. gegen Cholera, FSME, Hepatitis A, Hepatitis B, Humane Papillomviren (HPV), Japanische
Enzephalitis, Meningokokken, Masern, Mumps, Röteln, Tollwut, Typhus, Varizellen
Other vaccinations / Autres vaccinations

Datum Date	Impfung gegen Vaccination against Vaccination contre	Handelsname und Chargennummer des Impfstoffes (Vignette) Name of vaccine and batch no. (vignette) Nom du vaccin et numé- ro du lot (vignette)	Unterschrift und Stempel des Arztes Signature and stamp of physician Signature et cachet du médecin
18.5.03	FSME	ENCEPUR® Erwachsene 0,5 ml Ch-B.: 098011A	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
22.6.09		ENCEPUR® Erwachsene 0,5 ml Ch-B.: 096051A	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
21.07.2011		ENCEPUR® Erwachsene 0,5 ml Ch-B.: 124031A	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
01. Dez. 2014		VIATIM® Ch-B.: K5077-1	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
01. Dez. 2014		Ch-B.: 562011A RABIPUR®	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
08. Dez. 2014		Ch-B.: 562011A RABIPUR®	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
2.1.2015		Ch-B.: 571011A RABIPUR®	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
08. Dez. 2014		Nimenrix® LOT: A90CA048A	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629

Indikations- und Reiseimpfungen,
z. B. gegen Cholera, FSME, Hepatitis A, Hepatitis B, Humane Papillomviren (HPV), Japanische
Enzephalitis, Meningokokken, Masern, Mumps, Röteln, Tollwut, Typhus, Varizellen, Zoster
Other vaccinations / Autres vaccinations

Datum Date	Impfung gegen Vaccination against Vaccination contre	Handelsname und Chargennummer des Impfstoffes (Vignette) Name of vaccine and batch no. (vignette) Nom du vaccin et numé- ro du lot (vignette)	Unterschrift und Stempel des Arztes Signature and stamp of physician Signature et cachet du médecin
02. Jan. 2015		IXIARO® Lot: JEV13A31B Exp: AUG/2015	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
01. Dez. 2014		IXIARO® Lot: JEV13A31B Exp: AUG/2015	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
01. Dez. 2014		Ch-B.: 562011A RABIPUR®	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
08. Dez. 2014		Ch-B.: 562011A RABIPUR®	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
02. Jan. 2015		Ch-B.: 571011A RABIPUR®	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
02. Jan. 2015		Nimenrix® LOT: A90CA048A	Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629
20.11.16			Dr. med. N. Kellner Assistenzarzt Innere Medizin Klinikum St. Georg gGmbH 04129 Leipzig Tel.: (0341) 909 2619 Fax: (0341) 909 2629



Case 3

- A 30-year-old Thai male is visiting the travel clinic for counseling before traveling to Gabon.

What would you do?



Case 3

- A 30-year-old Thai male is visiting the travel clinic for counseling before traveling to Gabon.

Travel Risk Assessment (Trip Details)

Itinerary

- Countries and specific regions, including order of countries if >1 country
- Outbreaks at destination
- Rural or urban destinations

Timing

- Season of travel
- Time to departure
- Trip duration



Travel Risk Assessment (Trip Details)

Reason for travel

- Adoption
- Adventure
- Business
- Education or research
- Medical tourism (seeking health care)
- Pilgrimage
- Tourism
- Visiting friends and relatives
- Volunteer, missionary, or aid work

Travel style

- Accommodations (e.g., camping/ tent, dormitory, guest house, hostel/ budget hotel, local home or host family, tourist/ luxury hotel)
- "Adventurous" eating
- Independent travel or package tour
- Level of hygiene at destination
- Modes of transportation
- Traveler risk tolerance
- Travel with children

Special activities

- Animal interactions (including visiting farms, touring live animal markets)
- Cruise ship
- Cycling/motorbiking
- Disaster relief
- Diving
- Extreme sports
- High elevations
- Medical care (providing or receiving)
- Rafting or other water exposure
- Sexual encounters (planned)
- Spelunking



Case 3

- **Individual risk assessment**
- **Risk communication**
 - Address Special Health Risks
 - Educate to Change Behavior
- **Risk management**
 - Vaccine
 - Prophylactic medication (malaria)
 - Adjust/Change Plans
 - Postpone/Cancel Trips





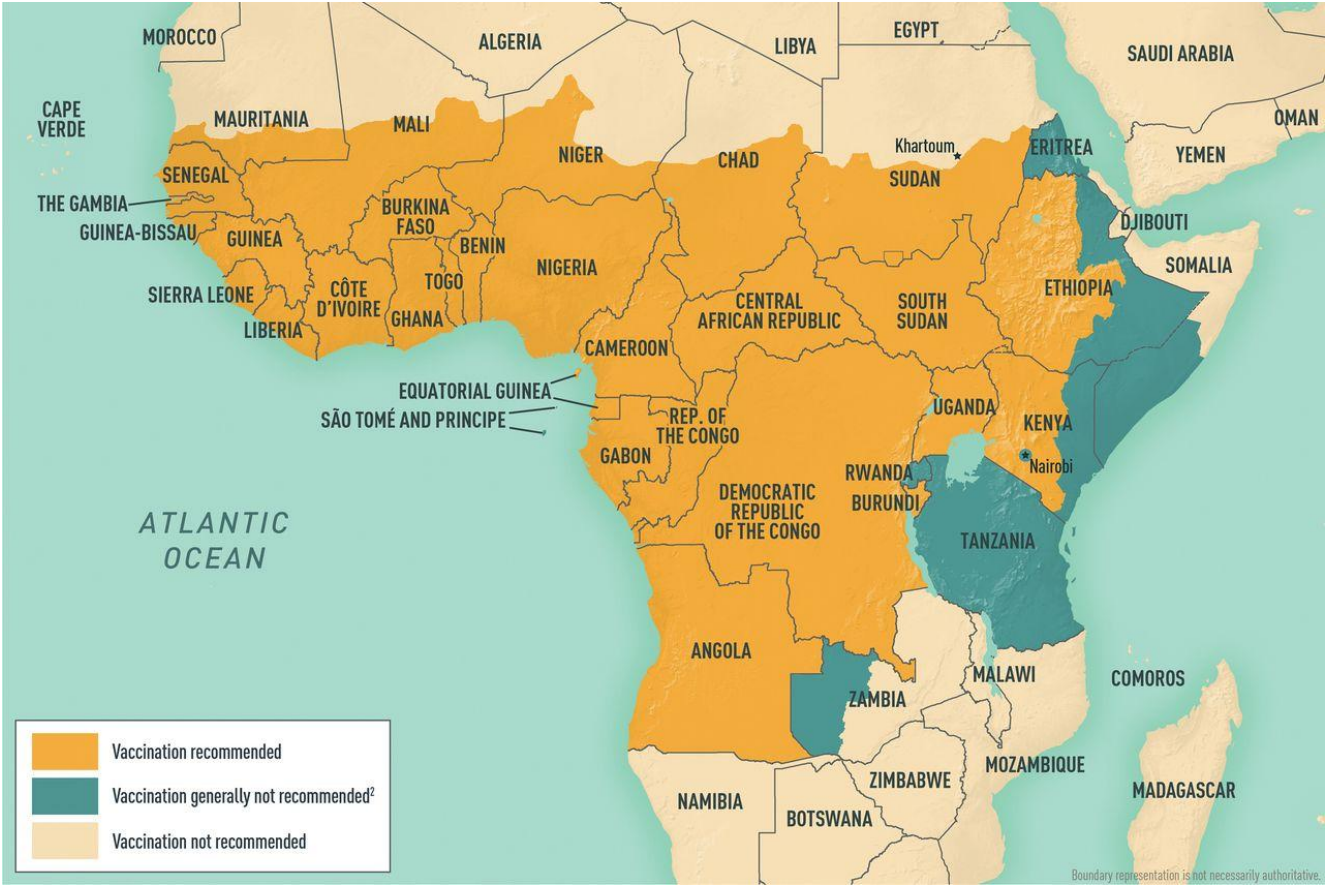
Case 3

- A 30-year-old Thai male is visiting the travel clinic for counseling before traveling to Gabon.
- No U/D, Cannot recognize vaccination history
- Working with 3 colleagues in the capital city of Gabon for 1 weeks (business trips)
- Stay mostly in the hotel
- Leaving Thailand next month with Qatar airway transiting Dubai
- Request for yellow fever vaccine



Yellow Fever

- Acute viral hemorrhagic disease transmitted by infected mosquitoes
- Nonhuman and human primates are the main reservoirs of the virus
- Endemic in Africa and Latin America
- **Incubation period** usually 3-6 days
- Most infections likely to be asymptomatic
- **Case fatality rate** in severe case is 20-50%



Yellow Fever endemic area



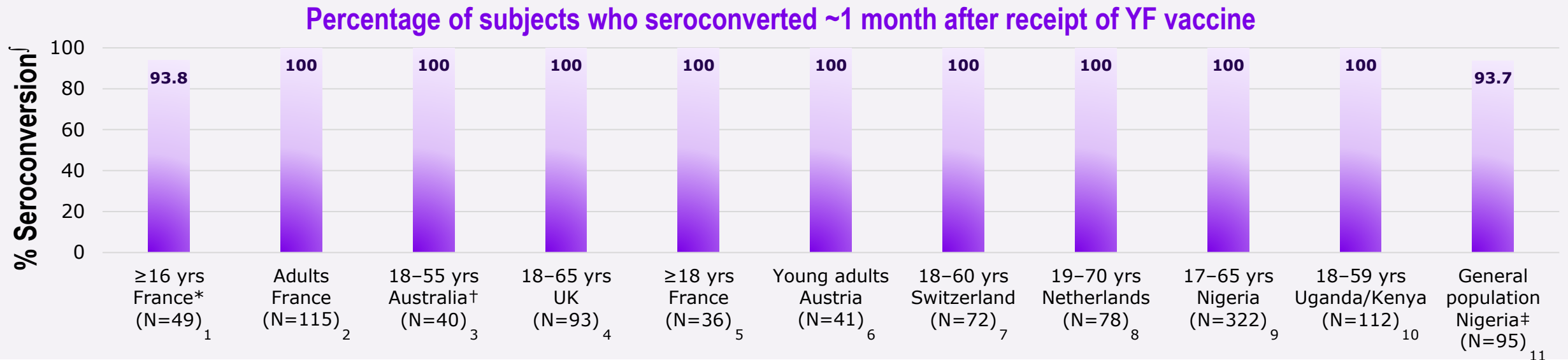
Yellow Fever Vaccine

- Live attenuated vaccine
- More than 900 million doses used
- Excellent safety and effective against the disease
- Need to receive 10 days before travel
- Routinely used in endemic country
- Immunity from vaccine – long lasting**

YF Vaccine Immunogenicity in Adults

Immunogenicity Among Adults

- The immunogenicity of YF vaccine has been assessed in clinical studies of **adults** from **non-endemic** countries,^{1–8} including international travelers,^{1,2,4} and in adult residents from **YF endemic** countries^{9–11}



YF vaccine is immunogenic with high seroconversion rates in adults from YF endemic and non-endemic regions

Trials identified from PubMed searches, with >10 vaccinated subjects and reported seroconversion data, are included.

*Vaccine given as one-third dose; †Administered sequentially with a Japanese encephalitis vaccine; ‡Age range not specified.

§Several serological testing methods were used over time and as many thresholds for seroconversion. Neutralizing antibody testing were mostly used with a threshold of neutralizing titers $\geq 1/5$, $\geq 1/10$ or $\geq 1/20$ or a post-vaccination neutralizing antibody titer ≥ 4 -fold pre-vaccination titer. YF: Yellow Fever; yrs: years.

1. Wolga J, et al. J Biol Stand. 1986;14(4):289–95; 2. Roche JC, et al. Vaccine. 1986;4(3):163–5; 3. Nasveld PE, et al. Hum Vaccines. 2010;6(11):906–14; 4. Lang J, et al. Am J Trop Med Hyg. 1999;60(6):1045–50; 5. Receveur MC, et al. Bull Soc Pathol Exot. 1993;86(5 Pt 2):406–9; 6. Ambrosch F, et al. Vaccine. 1994;12(7):625–8; 7. Pfister M, et al. Am J Trop Med Hyg. 2005;72(3):339–46; 8. Roukens AH, et al. PLoS One. 2008 23;3(4):e1993; 9. Fabiyi A, et al. Proceedings of 1st International Conference on Viral and Bacterial Vaccines, Paris. 1983:141–3; 10. Juan-Giner A, et al. Lancet. 2021;397(10269):119–27; 11. Nasidi A, et al. Trans R Soc Trop Med Hyg. 1993;87(3):337–9.



CONTRAINDICATIONS	PRECAUTIONS
• Allergy to vaccine component¹ • Age <6 months • Symptomatic HIV infection or CD4 T-lymphocytes <200/mm³ (or <15% of total in children aged <6 years)² • Thymus disorder associated with abnormal immune-cell function • Primary immunodeficiencies • Malignant neoplasms • Transplantation • Immunosuppressive and immunomodulatory therapies	• Age 6–8 months • Age ≥60 years • Asymptomatic HIV infection and CD4 T-lymphocytes 200–499/mm³ (or 15%–24% of total in children aged <6 years)² • Pregnancy • Breastfeeding







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Serengeti, Tanzania



Masai-Mara, Kenya



© Photo by
Alberta Seith

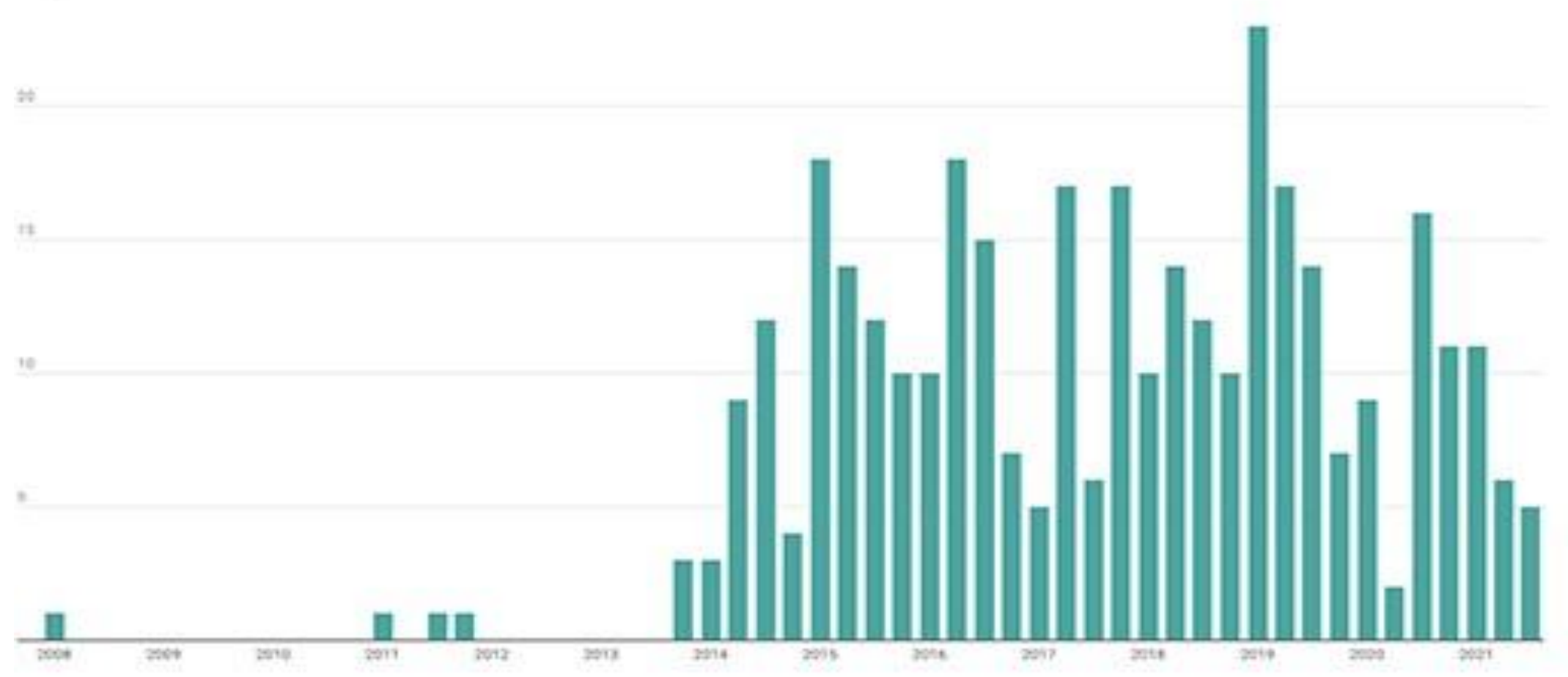


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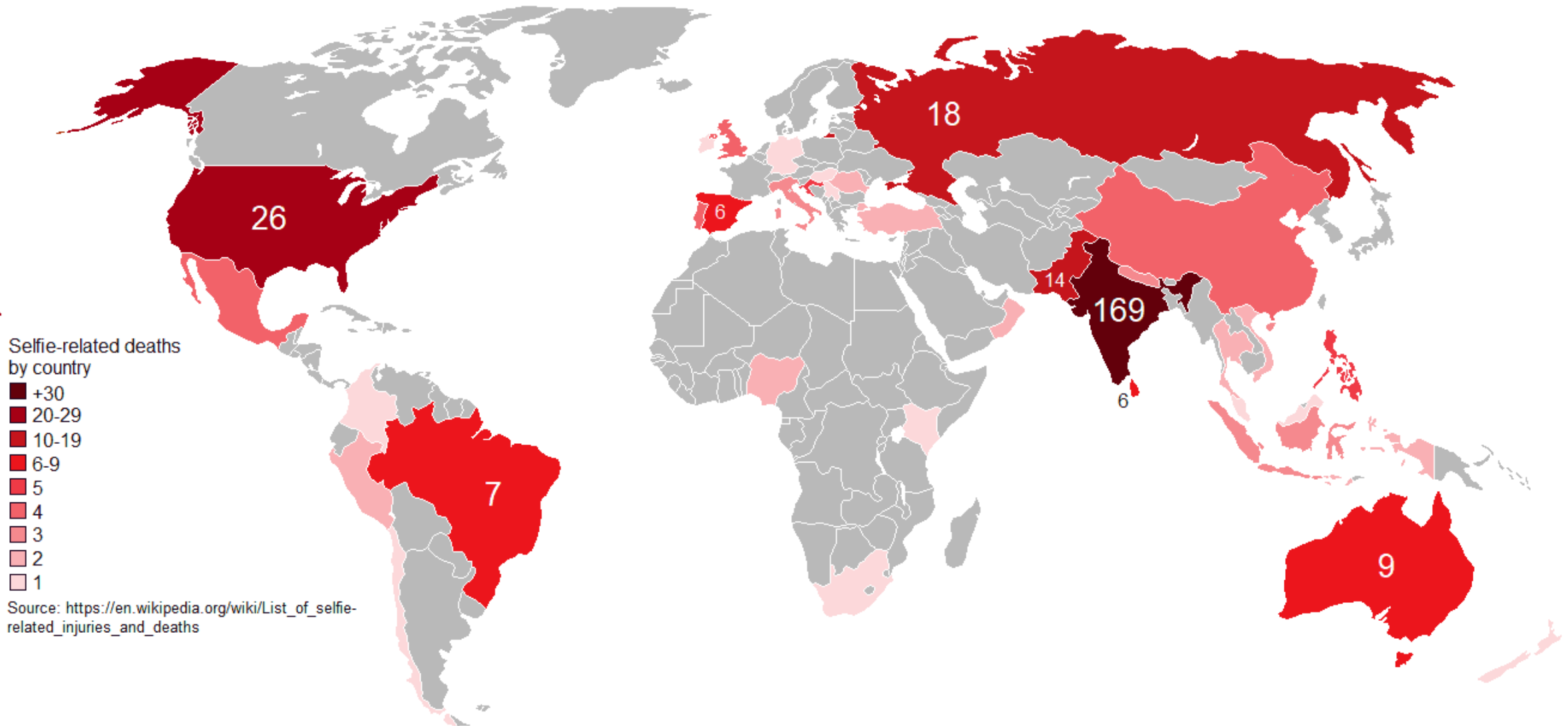


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DAILY SABAH

Nearly 260 people have died taking selfies
since 2011, study says

BY DAILY SABAH | ISTANBUL | OCT 04, 2018 - 12:00 AM GMT+3 |

Selfie deaths: 259 people reported dead seeking the perfect picture

🕒 4 October 2018





บทก.ต่างชาติเซลฟี่ พลัดตกรถไฟดับ

**Irish tourist falls to his death from train
'while trying to take a selfie' on 'death
railroad' in Thailand**

- Patrick Ward, a 45-year-old Irish national, fell from the moving train in Thailand
- Mr Ward fell from the train after leaning out of the carriage to take photos
- Rescuers tried to resuscitate him for half an hour but their efforts were in vain



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International Society of Travel Medicine
Promoting healthy travel worldwide
Established 1991

Journal of Travel Medicine, 2022, 1–4
<https://doi.org/10.1093/jtm/taab170>
Research Letter

Research Letter

Selfie-related deaths using web epidemiological intelligence tool (2008–2021): a cross-sectional study

Manuel Linares^{1,2,*} , Laura Santos, MD^{1,3}, Joaquín Santos, BSc¹,
Cristina Juesas, BSc¹, Miguel Górgolas, MD, PhD⁴ and
José-Manuel Ramos-Rincón, MD, PhD⁵

- 13.5 years analysis
- Increased report after 2012
- **Death : 379 (141 identified as travelers)**



Angelo et al. *Malar J* (2017) 16:293
DOI 10.1186/s12936-017-1936-3

Malaria Journal

RESEARCH

Open Access



Malaria after international travel: a GeoSentinel analysis, 2003–2016

Kristina M. Angelo^{1*}, Michael Libman², Eric Caumes³, Davidson H. Hamer⁴, Kevin C. Kain⁵, Karin Leder^{6,7},
Martin P. Grobusch⁸, Stefan H. Hagmann⁹, Phyllis Kozarsky^{1,10}, David G. Lalloo¹¹, Poh-Lian Lim^{12,13},
Calvin Patimeteeporn¹, Philippe Gautret¹⁴, Silvia Odolini¹⁵, François Chappuis¹⁶, Douglas H. Esposito¹
and for the GeoSentinel Network

- 13 years analysis
- Severe malaria : 444
- Death : 12



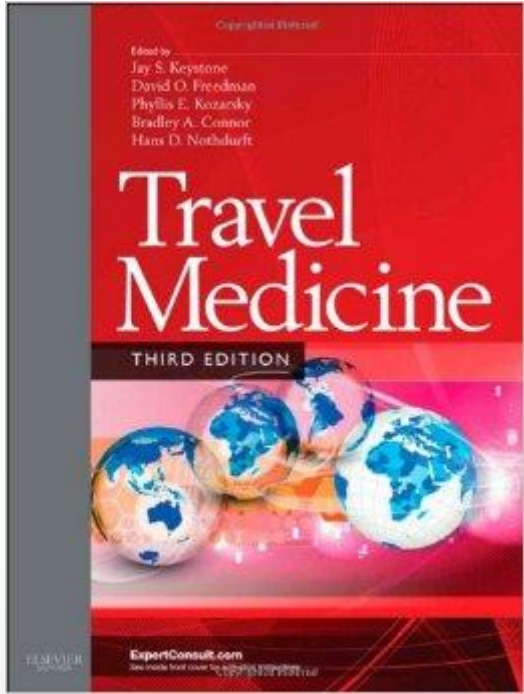
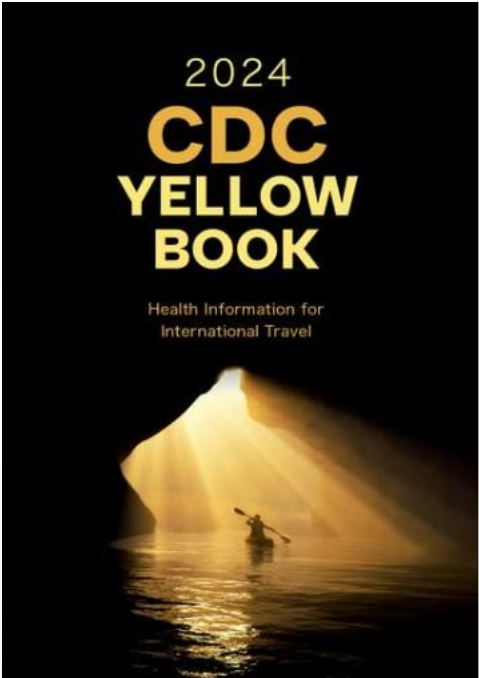
What we should know?

ISTM Body of Knowledge

- Revised 2017
- To guide the professional development of individuals practicing travel medicine
- To shape curricula and training programs (and also research) in travel medicine

ISTM Body of Knowledge

1. Epidemiology
2. Immunology/Vaccinology
3. Pre-travel assessment/consultation
4. Diseases contracted during travel
5. Other clinical conditions associated with travel
6. Post-travel assessment
7. Administrative and general travel medicine issues



International Society of Travel Medicine
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Established 1991



JOURNAL ARTICLE ACCEPTED MANUSCRIPT

Climate change and glacier melting: risks for unusual outbreaks?

Ryan Varghese, BPharm, Pal Patel, BTech, Dileep Kumar, PhD ✉, Rohit Sharma, MD, PhD ✉ [Author Notes](#)

Journal of Travel Medicine, taad015, <https://doi.org/10.1093/jtm/taad015>

Published: 31 January 2023 [Article history ▼](#)

JOURNAL ARTICLE CORRECTED PROOF

Air pollution crisis in Southeast Asia and its impact on international travellers [Get access >](#)

Amornphat Kitro, MD, Jinjuta Panumasvivat, MD, Phimphan Pisutsan, MD, Wasin Matsee, MD ✉

Journal of Travel Medicine, taad077, <https://doi.org/10.1093/jtm/taad077>

Published: 06 June 2023 [Article history ▼](#)

JOURNAL ARTICLE

Heat-related illnesses are an increasing threat for travellers to hot climate destinations

Wasin Matsee, MD ✉, Sakarn Charoensakulchai, MD, Aisha N Khatib, MD

Journal of Travel Medicine, Volume 30, Issue 4, May 2023, taad072,

<https://doi.org/10.1093/jtm/taad072>

Published: 24 May 2023 [Article history ▼](#)



Challenges in Travel Medicine

- Climate changes
- Emerging Infectious diseases
- Changing patterns of drug resistance
- Elderly travelers or travelers with chronic medical conditions
- Artificial Intelligence, Technology for travel (mobile app) etc

20th Anniversary



CISTM20

Bangkok, Thailand
2-5 May 2027



CISTM20

2-5 May 2027 | Bangkok, Thailand

Save the Date for CISTM20!

THANK YOU

ขอบคุณครับ

