



Pre and post-travel practice patterns among infectious disease (ID) specialists: an Emerging Infections Network Survey – United States, 2009



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Background

Travel medicine is an important discipline with a crucial role in the development of pre-travel health advice and the diagnosis and management of illness after travel is completed. Infectious disease (ID) specialists are frequently consulted by patients who are interested in tapping pre-travel and/or post-travel expertise. Travelers who seek post-travel care are ideal sentinels for the early detection of emerging diseases. The purpose of this study was to gather information about patterns of pre-travel practice and the frequency and types of travel-related infections that are encountered by ID specialists post-travel.

Objectives

The objectives of this study were to describe the experiences of ID specialists with both pre and post-travel consultations and to ascertain the degree of travel health training.

Methods

To assess practice patterns of travel medicine among ID specialists, we electronically surveyed 1265 ID specialists through the Emerging Infections Network in March 2009 about their participation in travel medicine consultations and the characteristics of those consultations related to pre- and post-travel visits. Only responses from those who practiced travel medicine were analyzed.

Results

Of 1265 physicians, 701 (55.4%) responded to the survey. Among respondents, 445 (63%) reported practicing at least some travel medicine. In the six months preceding the survey, 209 (47%) provided pre-travel consultations while 270 (61%) saw patients in the post-travel setting. Malaria (84%), diarrheal disease (71%) and typhoid fever (53%) were the three most commonly reported travel related infections seen by ID specialists who practice post travel consultation. Diagnoses that were reported as increasing the most were tuberculosis and *Clostridium difficile* colitis. Among physicians who practiced travel medicine 397 (91%) physicians who reported practicing travel medicine reported self-training through online resources.

Figure 1. Number of pre-travel consultations in the 6 months prior to the survey

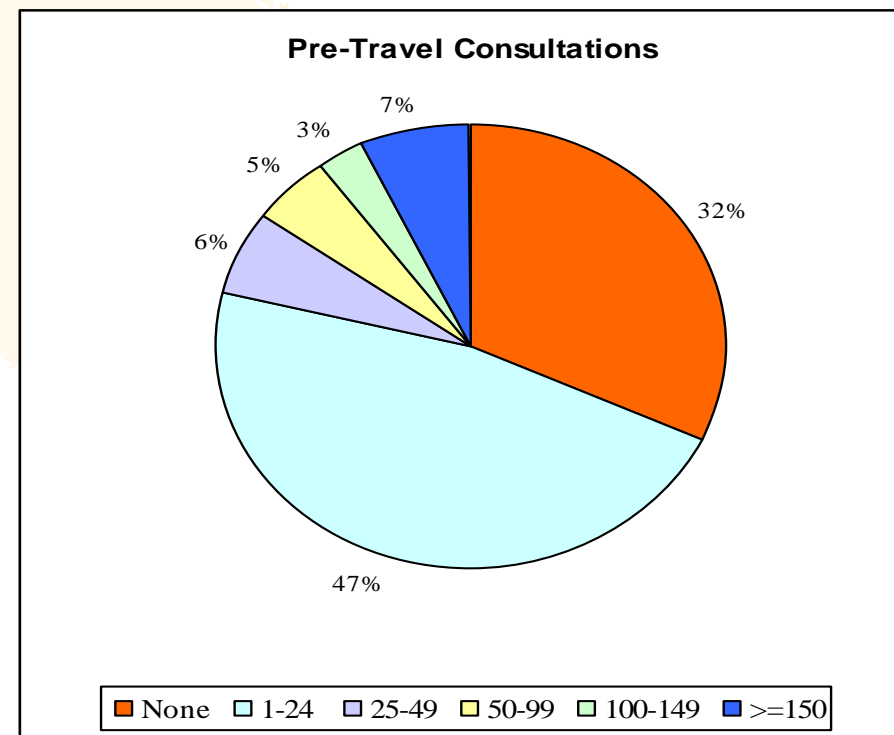


Figure 2. Number of post-travel consultations in the 6 months prior to the survey

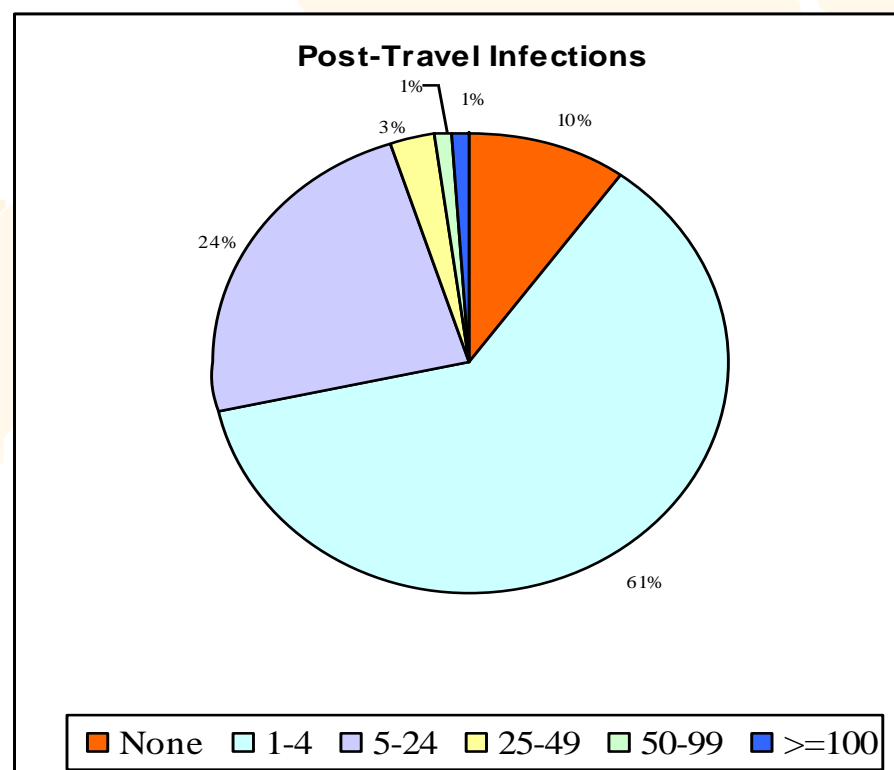


Figure 3. Changes in occurrence in these travel-related conditions

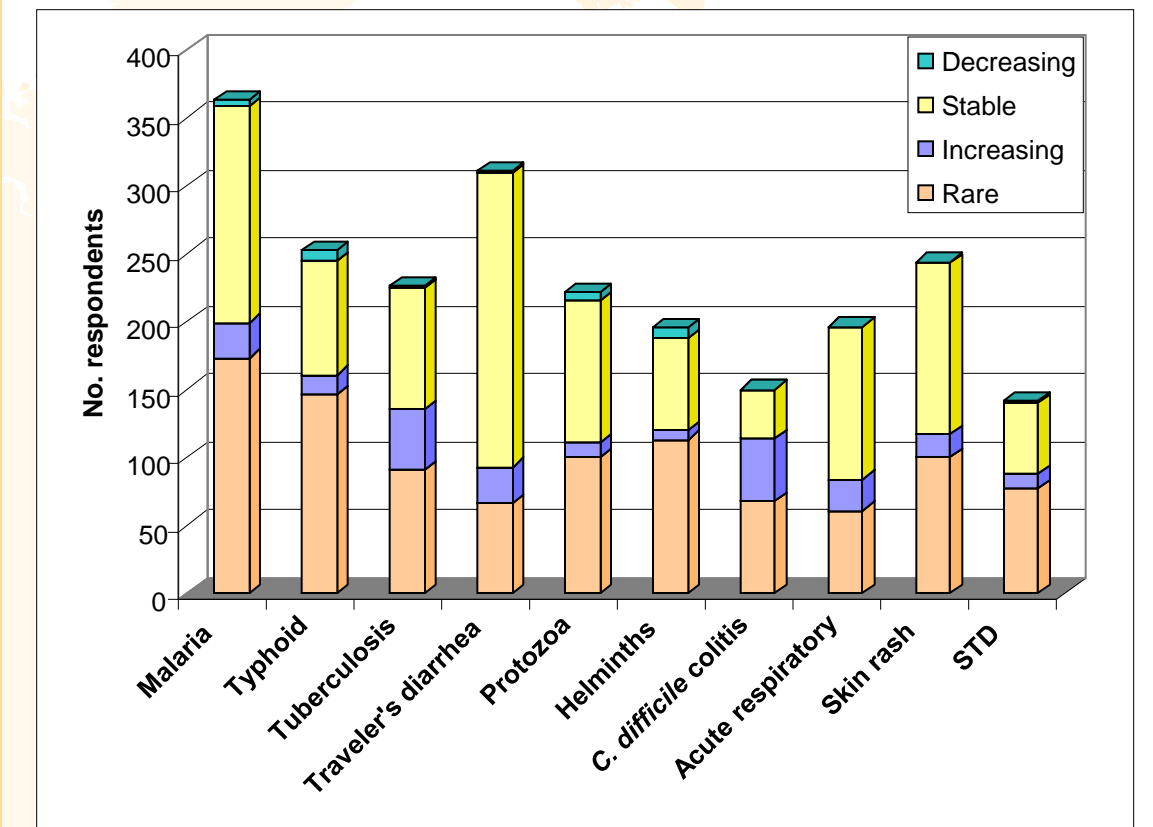


Table 1. Physicians' response to their travel medical education

	N (%)
Felt that they did not have sufficient training	262 (61)
Self-training through online resources	397 (91)
Interested in continued medical education in travel medicine	479 (86)

Conclusions

ID specialists are often involved in both pre and post-travel medicine and they appear to be interested in obtaining more continuing medical education for the practice of travel medicine. Travel medicine education for this group may be accessed through participation in allied organizations such as the International Society of Travel Medicine and by increasing the availability of easily accessible and reliable sources of information