

QUICK LINKS**SKIN DISEASES IN TRAVELERS—TRAVELER INFORMATION**

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Traveler Information

SKIN DISEASES IN TRAVELERS**INTRODUCTION**

Skin diseases are a common problem of travelers. One in 10 people are affected during travel; others may not notice symptoms until after they return--days, weeks, or even months later. Most skin problems are caused by insect bites, bacterial and fungal infections, allergic reactions, or too much exposure to sunshine and ultraviolet light.

RISK FACTORS**Heat and Humidity**

The body sweats to stay cool. If the sweat ducts become blocked because of heat and humidity, they can cause prickly heat or become infected. Hot moist skin encourages bacterial and fungal growth.

Insects

Bites are common from insects such as mosquitoes, gnats, sandflies, ticks, and mites. These bites can cause allergic reactions and often become infected. Some insect bites can transmit infections. Other Some insects can transmit worms or larvae that can penetrate the skin.

Sunlight and Ultraviolet Radiation

The ultraviolet (UV) radiation in sunlight can cause sunburn, rashes, and eye irritation that could lead to blindness. Sunlight can cause allergic reactions when taking certain drugs, such as oral contraceptives or antibiotics; it can also cause a rash when it comes into contact with chemicals found in some sun lotions (such as lemon oil). Long-term exposure to sunlight can lead to skin cancer, premature aging, and chronic itching. Young children, blue-eyed blondes, and especially green-eyed red heads are at greater risk of sunburn and UV damage. UV radiation is greatest near the equator, at high altitudes, near reflecting surfaces such a snow, sand, or water, and when the sun is directly overhead. In addition, UV radiation can penetrate clear water to a depth of 3 feet, so it is possible to get a sunburn underwater.

Preexisting Medical Conditions

Eczema can get worse in hot climates, and people who have a tendency toward eczema or asthma might experience their first episode since infancy. Psoriasis, by contrast, sometimes improves in sunlight. Persons with HIV infection are at risk of allergic skin reactions to medications such as those containing sulfa and some antibiotics.

Specific Activities or Places

If traveling "rough," one can come into contact with lice and scabies. Rural travelers, persons on safari, and especially campers are at greatest risk of insect, tick, and mite bites. The seas also contain animals that can cause irritated skin or painful skin lesions (see *Marine Envenomation*). Some diseases are more common in certain areas of the world. Filarial infections (worms) are a risk if traveling to or living in tropical west or central Africa (see *Filarial Infections*). Sandflies that can transmit a skin form of a disease

called leishmaniasis are common in the forests of South and Central America and the semi-desert areas of North Africa and the Middle East (see *Leishmaniasis*).

SYMPTOMS AND FIRST AID MEASURES

Problem	Common Symptoms	What to do
Sunburn (See <i>Sun and Heat</i> .)	<ul style="list-style-type: none"> • Pain and redness appear 2 to 6 hours after exposure to the sun. • Skin may peel or blister. 	<ul style="list-style-type: none"> • Take aspirin every 6 hours. • Apply cool water compresses.
Drugs and sunlight reactions	<ul style="list-style-type: none"> • Severe sunburn • Itchy blisters or flaky, crusty rash in sun-exposed areas • Tanning in bizarre patterns and unexpected places 	<ul style="list-style-type: none"> • Stop using the medication or cream/lotion that is causing the rash or sunburn and stay out of the sun. • Use a hydrocortisone cream on the rash; if it is severe, see your physician.
Prickly heat	<ul style="list-style-type: none"> • Small, white blisters or irritating, deep pink, knot-like bumps or pimples • Affects skin covered by clothing, especially skin folds of the groin, underarms, and breasts 	<ul style="list-style-type: none"> • Stay in a cool, shaded, well-ventilated place or under a fan. • The problem usually clears after a few weeks' adaptation to the climate.
Insect bites and stings (See <i>"Insect Precautions."</i>)	<ul style="list-style-type: none"> • Itchy spots at the site of the bites, lasting a few hours. • Persistent itchy lumps, lasting several days. • Hard itchy lumps, lasting for months 	<ul style="list-style-type: none"> • Keep skin clean and do not scratch. • Anti-itch cream or 1% hydrocortisone cream or ointment may help. • Seek medical advice if itchy lumps persist.
Lice and scabies (See <i>Infestations in Travelers</i> .)	<ul style="list-style-type: none"> • Scabies: Itchy burrows in soft skin of finger webs, soles, palms, breasts, or scrotum; itchy rash • Lice: Itching; nits (eggs) can be seen on scalp hair or lice are seen on head, groin, or pubis. 	<ul style="list-style-type: none"> • Apply water-based preparations of insecticides such as malathion or permethrin. Use according to manufacturer's instructions for scabies. • Carbaryl (an insecticide) is also effective for lice.
Myiasis Fly larvae penetrate skin from un-ironed clothes (Africa) or are injected into skin by biting mosquito (Central and South America).	<ul style="list-style-type: none"> • Small, boil-like sores with a central hole through which the larvae can be seen wriggling. 	<ul style="list-style-type: none"> • Apply petroleum jelly or fatty bacon and cover overnight to make the larvae emerge.

<p>Bacterial infections of the skin</p>	<ul style="list-style-type: none"> • Cuts or scratches become red, sore, or itchy, and ooze serum or pus. • Insect bites become painful and ooze. • Boils are painful, localized collections of pus. • Cellulitis (infection of surrounding tissues) can occur, often with fever. 	<ul style="list-style-type: none"> • Clean cuts and scratches with antiseptic wipes; cover with antiseptic adhesive strip. • If cut is infected: apply an antiseptic cream and cover. • Boils may need to be lanced by a medical provider. Watch for fever and signs that the infection is spreading, and seek medical assistance. • A prescription antibiotic may be needed if the infection spreads to surrounding tissues (cellulitis) and you have a fever.
<p>Fungal infections of the skin</p>	<ul style="list-style-type: none"> • Irritating, small, pale or pink patches, often spreading over the upper chest and back • Large, itchy patches, often in groin, or scaly patches around the feet • Bald patches on the scalp 	<ul style="list-style-type: none"> • Wash daily with anti-dandruff shampoos or apply antifungal creams. • Use antifungal creams such as clotrimazole 1% or miconazole 2%. • Scalp ringworm will require a prescription drug to kill the fungal infection. See a physician.
<p>Systemic infection (affects whole body) with skin lesions</p> <ol style="list-style-type: none"> 1. Tick or mite borne typhus 2. Trypanosomiasis (following tse tse fly bite) 3. Dengue fever (following mosquito bites) 	<ul style="list-style-type: none"> • 1 and 2: Fever develops a few days after the bite. A sore appears at the bite site, and local lymph glands enlarge. • 3: Sudden high fever, body rash (usually subtle but may be bright red), headache, weakness, and intense muscle, joint, and low back pain. 	<ul style="list-style-type: none"> • 1 and 2: Seek medical help immediately. A physician can treat tick and mite typhus with an antibiotic. • 3: Drink plenty of fluids, do not use aspirin, and seek medical help urgently.
<p>Parasitic infections occurring later (See <i>Leishmaniasis</i> and <i>Filarial Infections</i>.)</p>	<ul style="list-style-type: none"> • Painless, knot-like bump develops weeks or months later at site of sandfly bite, grows slowly, and may ulcerate. • Itchy rashes or swellings just beneath the skin that seem to move around appear months after fly bites. 	<ul style="list-style-type: none"> • Seek medical help and be sure to mention any travel to the tropics.

PREVENTION

Care of the skin: Try to adapt slowly to a tropical climate and stay as cool as possible. Keep skin cool and clean through frequent showering. In a humid climate, dry off thoroughly. In a dry climate, use a moisturizer. Clean cuts and scratches with an antiseptic wipe and cover until healed.

Protect against UV radiation: Children and persons who do not tan easily should stay out of the sun as much as possible, especially in the middle of the day, wear long-sleeved clothes, and use a wide-brimmed hat or umbrella and wraparound UV protective sunglasses. Use sunscreens with a sun protection factor (SPF) of 15 or more and lip protection screen. Apply sunscreen before

exposure to the sun and reapply after swimming or heavy perspiration. Wear a shirt while swimming.

Avoid insect bites: There are 3 main ways to avoid insect bites:

- Avoid risky areas at risky times.
- Use repellents on skin and garments. (See *Insect Precautions*.)
- Use insecticides on garments, mosquito nets, and inside camping tents.

Discuss the itinerary with a travel health care provider to learn about possible areas of risk. Use an effective repellent in the daytime (especially early morning and late afternoon to dusk) and in the evening hours (dusk to dawn) to protect against species of insects that bite at different times of day. (Do not apply repellent to sunburnt or inflamed skin.) Do not use more than the manufacturer's recommended dosage when applying insect repellent on children. Use permethrin (an insecticide) on bed nets and curtains. Burning coils and knockdown insecticide sprays may also help prevent bites. In a hot climate, wash clothes frequently and iron to kill myiasis larvae.

Medications and first aid kit: Those with a preexisting medical problem, should consult a doctor before travel and be sure to take an adequate supply of necessary medications, especially if those with severe allergies. Travelers should carry a first aid kit, which at minimum should contain: sunscreen of an appropriate SPF, DEET or other suitable insect repellent, 1% hydrocortisone ointment, antiseptic cream, antiseptic wipes, adhesive bandages, antifungal cream, and aspirin or acetaminophen tablets. If going on a long trip or to places with poor medical facilities, ask a doctor for an antibiotic suitable for cellulitis. (See *Packing Personal Medications*.)

WHEN TO SEEK MEDICAL HELP

Most common skin conditions of travelers can be prevented or can be treated from a first aid kit. Seek medical help for skin conditions that do not respond to simple first aid measures and for severe sunburn, cellulitis (infection of tissues that has spread beyond a localized area), and any condition accompanied by fever. Seek medical help for allergic reactions; they can worsen quickly. See a doctor if nodules or ulcers occur that persist for more than 2 weeks or if rashes and swellings occur later.

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