TRAVEL MEDICINE News

THE EDITOR'S NOTE

ONWARD!



have a stack of travel books on my nightstand. Considering all the reading I do for our profession and leisure, much of which come in electronic formats, I still favor the crisp pages of a new book. Depending on my disposition, I usually lean toward adventure travel narrative over all other genera and I tend to read books about areas I'm traveling to in the upcoming months. Since my next work-related travel adventure is a ship doctor job in the Caribbean, I am currently delving though two heavy tomes on the sea. Eric Larson's Dead Wake: The Last Crossing of the Lusitania, covers the ill-fated 1915 Atlantic crossing of the Cunard luxury ocean liner, which was torpedoed by a German U-boat in World War I. William Finnegan's Barbarian Days: A Surfing Life, chronicles the world travels of one of the sports most respected authors. It seems that in between travels, we all still travel: we plan, we read, we prepare.

In that same respect—arming ourselves with information on natural, sociopolitical,

cultural history before travel—we can close the gap by broadening our education and experience. The next 18 months will shape up to be a busy, productive and exiting year for ISTM. We've got new member benefits on My ISTM, regional conferences on three continents, two opportunities to take CTH exam, a very vocal TravelMed forum, and new interest groups and committees. And, it's not too early to save the date for Barcelona 2017 and to start formulating a proposal for a talk. Here is the latest version of Travel Medicine News. Onward!



PRESIDENT'S MESSAGE

PREPARATION

ince our ISTM conference in Québec earlier this year, much has happened. Preparations for the next conference are now well on the way for 2017, and so are the preparations for three regional travel medicine conferences next year: South Africa, Nepal and Great Britain. Scientific committees have been set up, and solicitations for speakers and scientific programs are out. We are also planning to present the ISTM Certificate in Travel Health™ examination in both Nepal and Great Britain. It is a real pleasure to see how busy our Society is!

CLOSINGTHEGAP

I would like to zoom into the activities of the "Close the Gap" Taskforce.

During our last Executive Board meeting, this taskforce was endorsed to address the remaining gaps in travel medicine: the gap between the way travel medicine is practiced, taught and presented at conferences (Western travelers to developing countries) versus the reality that outbound travel from emerging markets and developing countries are about to overtake that from Western countries. We need to become more inclusive, which also means more representation from these emerging countries with departing travelers on our committees, interest groups, as speakers, and in our research.



SECRETARY-TREASURER'S

REPORT

o much is happening in the ISTM it is hard to know where to begin, but well done Christopher Van Tilburg for putting together another issue of *Travel Medicine News*. This is an important avenue of communication for our members and illustrates some of the many and varied activities that ISTM is involved with.

It has been a few months since the very successful CISTM14 during May in Québec City, Canada, where I presented my first Secretary-Treasurer's Report to the General Assembly. The Society was left in good financial health by my predecessor, David Freedman, in 2013. Despite many challenges in today's economy, the society continues to do well. The support of the members in renewing

their membership is appreciated and membership growth helps to give the ISTM a strong voice in the field of travel medicine. Since the resounding vote of approval in the Bylaws Revision late last year, new ISTM members now renew their subscription coming up to their anniversary date of joining the society. If you know travel health professionals who are not members. why not recommend that they join? It is as easy as sending them a link to our website, www.istm.org One of the other items I mentioned in my report is that the ISTM has gained 501(c)(3) approval by the U.S. Internal Revenue Service and has established the ISTM Foundation. We look forward to the complementary work that the ISTM Foundation can undertake in support of the ISTM.

CISTM15 to be held in May 2017 in Barcelona seems to be a long time away, but the conference will come around quickly. In the meantime, there is a feast of regional travel

"..the ISTM has gained 501(c)(3) approval by the U.S. Internal Revenue Service and has established the ISTM Foundation."

medicine conferences in 2016 and we hope that you can attend at least one of these or perhaps sit for the CTH® examination in Kathmandu or London in association with APTHC11 and NECTM6 respectively. The 7th Regional Conference of the ISTM (RCISTM7), which is being held in association with the biennial congress of the South African Society of Travel Medicine (SASTM) in Port Elizabeth, South Africa, with the theme "Travel Health Africa - the boiling point", is one of these meetings. Having been a member of the scientific committee for Africa-European Travel Health Conference (RCISTM1), which was held in Cape Town, in 2004, and having being involved with SASTM's professional development training for more than a decade, there is a tremendous pool of expertise to draw on through SASTM's networks. Being held in association with the ISTM, I am sure RCISTM7 will similarly be a great program. See you there.

Peter A. Leggat
ISTM
SecretaryTreasurer



PRESIDENT'S MESSAGE

CONTINUED FROM PAGE 1

GRANT APPROVALS

I am thrilled to announce that in this context the Executive Board has approved two new grants:

- A grant towards the South Africa Society of Travel Medicine to cover the expenses for speakers and delegates from African countries beyond South Africa for the Regional ISTM conference in Port Elizabeth, South Africa, in 2016. Read more about the RCISTM in South Africa in Robert Steffen's announcement.
- 2. A research award specifically to address this gap issue and geared towards applicants from emerging markets and low-to-middle income countries. Look out for Martin Grobush's research grant call that you can find further below. Also help us disseminate this information to your networks in Asia, South America and Africa.

Additionally, the Executive Board has approved special discounted examination fees to encourage those from resource-poor countries to sit for the exam and participate in the ISTM Professional Development program.

The "Close the Gap" Taskforce, cochaired by Robert Steffen and Marc Mendelson, has a big challenge ahead of them. Make sure that we all support Robert and Marc to achieve the goal to close – or at least narrow – the gap.

Annelies
Wilder-Smith
ISTM
President



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Christopher Van Tilburg, Editor-in-Chief
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Karin Leder, Australia Co-Chair, CISTM15 Scientific Program Committee



Francesco Castelli, Italy Associate Chair, CISTM15 Scientific Program Committee



Lin H. Chen. **United States of America** Associate Chair, CISTM15 Scientific Program Committee



Eskild Peterson, Denmark Associate Chair, CISTM15 Scientific Program Committee



CALL FOR PROPOSALS

14-18 MAY 2017 BARCELONA. SPAIN

hough the very successful Québec conference is just behind us, we are starting to plan for Barcelona in 2017. From now through 1 March 2016 we are inviting ISTM members to submit proposals for plenaries, panel discussions, debates, symposia and workshops. It is anticipated that the majority of such sessions at the congress will emanate from these proposals. These sessions should reflect the latest clinical science and should emphasize areas that have had significant developments since the CISTM14 in Québec.

Please note that the CISTM15 Scientific Program Committee (SPC) frequently finds it necessary to combine similar proposals for symposia/plenaries by picking and choosing individual talks from different submissions. The SPC may also identify different speakers for a particular talk as the full scope of submissions is reviewed. This allows more comprehensive coverage of topics, less duplication between sessions, and more balanced demographic representation.

Each session is 90 minutes, and we ask for proposals for plenaries, symposia, debates, panel discussions and workshops. Session proposals should include:

- A session title, classification, and 5 sentence description of the unifying theme or problem.
- For plenary and symposium, a separate topic/title for each of the three talks.
- Name, affiliation, home country, and e-mail for each suggested speaker. Please be sure to include full names and initials.

Only proposals submitted on the CISTM15 Proposal Form by ISTM Members during the solicitation period will be considered. The CISTM15 Proposal Form is now available from the ISTM website at www.ISTM.org.

THE 1 MARCH 2016 DEADLINE IS ABSOLUTE.

Thank you for your time and contributions to the CISTM15 and the worldwide travel medicine community.

Christina Greenaway, Karin Leder, Francesco Castelli, Lin H. Chen, Esklid Peterson



AWARDS

EXCITING NEWS!

Research Awards Program Enhanced with New Awards Available to Those within Resource-Limited Countries and Emerging Markets!

he ISTM has devoted special funding for research in resource-limited countries and emerging markets for the first time this year. This funding is in addition to the annual research grant program already in place. The society is offering this additional research grant opportunity to address research gaps in our knowledge on health issues related to international travelers crossing borders between developing countries or from developing countries to developed countries.

Applications for the 2015-2016 ISTM Research Awards are being accepted through 31 January 2016. The application and instructions for proposal submission are available now on the ISTM website at www.ISTM.org.

The grants usually range from USD 5,000 to USD 10,000, although grants of up to USD 20,000 may be considered for exceptional proposals. Grant requirements include:

- Research must be travel medicine or immigrant/refugee health oriented.
- Application and protocol proposal must be scientifically sound and must be in accordance with international ethical guidelines.
- There must be no conflicts of interest for any of the investigators.
- · Grant applicants must be ISTM Members in good standing.
- Projects should be able to be realistically completed using ISTM grant funding alone.

Grants are awarded annually through a peer-review process implemented by the ISTM Research and Awards Committee. The awards are designed to stimulate travel medicine research by supporting comprehensive research projects or, for larger projects, providing support for pilot studies to enable

researchers to collect data/test hypotheses so that they can then apply to other agencies for more substantive research grants.

Remember that all Research Award proposals must be received by the ISTM Secretariat office at ISTM@istm.org no later than 31 January 2016 to be considered.

Martin Grobusch Research and Awards Committee Chair

PROFESSIONAL EDUATIONAL commits

Professional Committee (PEC) invites members to view the "Educational Patient Cases" section of the ISTM website which includes an excellent update on "Chikungunya" by Emilie Javelle and Fabrice Simon. We encourage all members to send their interesting cases to PEC for review, editing, and posting. Case vignettes are a fast and fun way to learn! Access to the Educational Patient Cases is free to members and a great resource for those preparing to take the Certificate in Travel Health™ (CTH) exam.

The North American Travel **Medicine Review and Update** Course will be offered in spring of 2016 in Atlanta, Georgia.

This is a 2.5 day review course given by renown faulty in Travel Medicine and provides the most current and relevant information needed by physicians, nurses, pharmacists, and other health care professionals who provide medical care and advice to travelers, expatriates, and migrants. Many attendees come every year to hear the latest information and remain current in their practices. The Course also provides a thorough update and review of the Body of Knowledge for the practice of travel medicine. Participants have ample opportunities to interact with the faculty through question and answer sessions and informal discussions. Details on location and dates will be posted on the ISTM website in October.



Mary-Louise Scully Professional Education Committee Chair



Nancy Piper-Jenks **Educational Patient** Cases Chair



RCISTM 7 NORTH MEETS SOUTH — SOUTH MEETS NORTH

f we look back on the recent ISTM Congresses and Regional Meetings — Québec City (Canada), Maastricht (The Netherlands), Jackson Hole (Wyoming U.S.), and Singapore — we mainly had 'East meets West' encounters. On the horizon for next year is a fascinating chance to obtain a far better insight into one of the favorite destinations in the Southern hemisphere, South Africa. Both our pre-travel customers and post-travel patients frequently challenge us with questions relating to Africa.

The upcoming Biennial Congress of The South African Society of Travel Medicine and the 7th Regional Conference of The International Society of Travel Medicine with the heading ,Travel Health Africa — the boiling point?' offers the opportunity to learn from our colleagues, who by living on that continent, have a vast experience which may differ from our Northern hemisphere perceptions. Some among us will remember, the in every way well prepared 2004 meeting, which hosted more than 600 delegates in Cape Town; many at the time commented that they had learned a great deal. As the Chairman of the Scientific Program Committee, Adriano Duse states, "meeting again provides scope for discussion of common controversies, novel challenges and solutions, and the way forward in Travel Medicine."

Annelies Wilder-Smith has a shared vision of Closing the Gap, urging us to address the issues of emerging economies who by rapidly increasing numbers of outbound travelers, now have a natural interest in travel medicine. There is an obvious need to include these new partners. Thus a particular effort will be taken to attract professionals from various parts of Africa to join us in the debates and the social encounters, so that in the future there will be a stronger representation from this continent in all ISTM echelons. If anyone knows potentially interested health professionals either working in Africa or of African descent working elsewhere, please encourage them to consult the meeting website, to register, and to book their flights.

The venue at Port Elizabeth on the Garden Route is perfectly suited for the conference, with accommodation catering for every budget within a 10-minute walk. Spend some time exploring the natural beauty of South Africa, including a safari at local national parks such as Addo Elephant Park, a scenic drive along the Garden Route to Cape Town, the breathtaking beaches of the Wild Coast, or one of the many hikes, such as the famous 3-day Otter trail in Tsitsikamma National Park. The Kruger National Park is also just a short plane ride

Thus let as many as possible meet from 28 September to 1 October 2016 on Nelson Mandela Bay. We look forward to seeing you there.



Robert Steffen. Chair, Close the Gap Taskforce



Marc Mendelson. Co-Chair, Close the Gap Taskforce



here will be two opportunities in 2016 to take the ISTM Certificate of Knowledge (CTH®) Examination.

- · On 2 March 2016, the Exam will be offered in Kathmandu, Nepal in conjunction with the 11th Asia Pacific Travel Health Conference.
- The second 2016 examination will be offered on 1 June 2016, in London, England, UK, immediately prior to the opening of the 6th Northern European Conference on Travel Medicine.

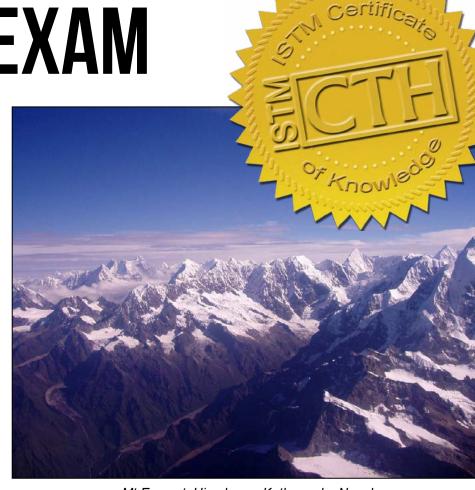
Please note, the ISTM will be offering a discounted rate for those residing in countries identified by the World Bank as Low and Low-Middle Income. You can find a list of these Countries on our website, www.ISTM.org/join.

The CTH® is awarded to professionals who pass the Certificate of Knowledge Examination that has been developed by an international panel of travel medicine experts representing a variety of professional disciplines. The examination is based on the ISTM Body of Knowledge, available on the ISTM website. Those passing the examination will receive a Certificate of Knowledge and will be granted a "Certificate in Travel Health™" or "CTH®" that must be maintained every ten years to remain active. ISTM members who have been awarded and maintain the

Certificate will also be recognized in the ISTM Directory of **Travel Medicine** Providers and within the Travel Clinic section of the ISTM website.

Kenneth Dardick Examination Committee Chair





Mt Everest, Himalayas, Kathmandu, Nepal



London tower bridge

FOR MORE INFORMATION, CLICK HERE.

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TRAVEL TALK

Telemedicine for Travelmedicine

elemedicine is the use of the medical information exchanged from one site to another via electronic communications to improve a patient's clinical health status."1

A short discussion on providing travel medicine consultations via telemedicine recently appeared on the Travel Medicine Forum. A few were willing and able (or had no choice!) to provide advice via phone, email or Skype, for example. However, someone raised the question of liability coverage for this type of not-in-clinic care, which could include pre-travel, post-travel, and "intra-travel" advice. The bottom line is that you have to check the laws in your state, province, or country, then decide if you want to provide this service.

Dr. Mark Wise presented "Providing Care from A Distance: The Role of New Technologies" at CISTM14 in



Québec City in May.² A poll he had conducted elucidated the following---"The general feeling among a majority of respondents appears to be that is it 'nice' to be available by e-mail and telephone, but that such communications 'do not resolve serious medical situations, and rarely, if ever, save lives.'"

Dr. Wise went on further to say, "Some travel health practitioners also see telemedicine as a legal minefield: 'Horrendous potential medico-legal pitfalls. Even with electronically transmitted data, ECGs, etc., there is no substitute to having a real patient in your consulting room. The traveler should attend a doctor or hospital in the country visited, even if that means helicopter evacuation. The only role I see myself playing would be to provide information on the patient's medical history to a doctor abroad but not to take responsibility for my patient's care in a foreign country.'



"Telemedicine is the use of the medical information exchanged from one site to another via electronic communications to improve a patient's clinical health status."

But his final conclusion was: "1) I would suggest that it is more than "nice" to provide long-distance medical support; 2) It should not be fraught with medico-legal pitfalls, but care must be taken; 3) It may occasionally save lives, provide peace of mind, and help to avoid unnecessary or even dangerous treatments."

The results of a questionnaire that asked travelers if they were interested and willing to pay for a travel telemedicine service was presented this year at CISTM.³ The findings? 59% were interested and 99% of these were willing to pay. Email was the preferred method, followed by phone, then video calls. Not surprisingly, older travelers (>60) were more interested than younger ones to pay for this service.

- Definition from: Ken Gamble "Technology and Travel" in Travel Medicine Review and Update Course 2015 slides posted on istm. org (access at: istm.org: log in, go to myISTM, All Communities, then type "Gamble review course" in the search screen)
- 2. Access at: istm.org: log in, go to myISTM, All Communities, then type "telemedicine" in the search screen
- 3. Rochat et al. Telemedicine for Health Problems while Abroad: Are Travelers Interested and Willing to Pay Prior to Departure? CISTM14 PO10.02; access at: istm.org: log in, go to myISTM, All Communi-

ties, then type "telemedicine" in the search screen

Nancy Pietroski, Travel Medicine News Associate Editor





DONT MISS MEMBER ALERTS, AN ISTM BENEFIT

TRAVEL MEDICINE ALERTS

This section includes links to regular reports on travel safety, outbreaks of disease, food and water safety, weather, civil unrest, emergencies and disasters, vaccine supply issues, and other travel medicine related issues.

The ISTM appreciates the support and willingness of the following organizations for sharing this proprietary and important information with ISTM Members. Many thanks to the Center for Tropical and Travel Medicine, Academic Medical Center, The Netherlands for EpiAlert; Boston Children's Hospital, USA for HealthMap; iJET; and Sitata for their support.

- EpiAlert
- HealthMap
- iJET
- Sitata

Government and Public Health Organizations

- World Health Organization
- US Centers for Disease Control and Prevention
- European Centre for Disease Prevention and Control
- UK National Travel Health Network and Centre

VISIT MY ISTM NOW!

THE MEMBER ADVANTAGE PROGRAM OFFERS DISCOUNTS FOR ISTM MEMBERS.

The ISTM has designated these companies as ISTM Member Service Providers to give ISTM Members considerable and exclusive discounts on the products and services you use every day. When we were developing the program, the ISTM chose to put the entire savings into the ISTM Member discount and is not generating any society revenue or benefit from this program — the savings these companies offer to ISTM Members is reward enough. You can easily identify participating companies by the special ISTM Member Service Provider Logo they are authorized to use.



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NEWS THE SECRETARIAT

he ISTM Secretariat has uploaded speaker approved presentations from CISTM14 in Québec City to an online community on My ISTM, accessible by ticking "here" or navigating through your Member site. All ISTM Members are able to access and download these presentations at their own convenience. Also, some of the CISTM14 presentations were videoed and added to the ISTM Distance Learning Program. These videoed sessions are available for purchase with Member discounts.

A key function of our society is to update our Members and others in the Travel Medicine Community on news, special events, and important happenings in the field. This is vital to the health and well-being of the millions who travel around the world each year. Through the ISTM Facebook, Twitter and LinkedIn pages, we work to facilitate ISTM Members stay connected with the society, Members and others in the travel medicine community, and also post the latest alerts from international agencies. In addition, these pages are great places to stay informed on ISTM news and events, registrations, and pertinent articles. With the upcoming CISTM15 to be held May 2017 in Barcelona, Spain, important information such as abstract submission deadlines, hotel availability, and schedule updates will be included.

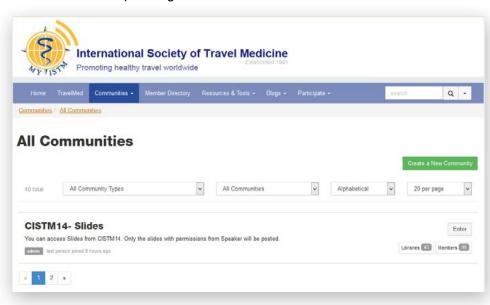
In addition to helping ISTM Members keep in touch, these pages are also providing information about the Society to non-members, other health care providers in the community, as well as travellers. We have active pages with a lot of information that both travel medicine professionals and travellers alike will find helpful/useful. These links will help promote the profession and increase the visibility of member clinics.

You are invited and encouraged to post your own updates and share articles on our Facebook, Twitter and LinkedIn pages. This is a great way to connect with others in the larger travel health community!

Like us on Facebook and Twitter or connect with us on LinkedIn!

Diane Nickolson ISTM Executive Director





ASK THE EXPERTS



ow would you advise parents who plan to travel to a high risk measles area, but have declined the vaccine for their children? *Travel Medicine News* posed this question to four of our colleagues.

"I try to understand why they decline the vaccination. Commonly they fear a severe adverse reaction. I reassure them the measles vaccine is safe. There is no risk of autism or other neurological complications. We use the MMR vaccine, an added bonus of avoiding two additional diseases. I explain the risk of getting measles for those who are susceptible; it's a disease with a high transmission rate. and measles is not a benign disease. There is the risk of contracting bacterial pneumonia along with other complications." Cecilia Perret, an infectious disease pediatrician, works at the Hospital Clinico of Universidad Catolica de Chile in Santiago, Chile.

"They are relying on herd immunity to protect their children. If they want to continue to rely on other children being vaccinated in order to protect their own they should not travel." Dick Stockley is the director of The Surgery, a general practice and emergency medicine facility, in Kampala, Uganda.

"I would advise the parents not to travel to the area. The disease is very contagious and risk for getting the disease is high. Since they have chosen not to vaccinate the children, I would tell them they must choose destinations that are considered low risk. They should consider the risk of infecting their co-travelers." Inger-Lise Grindal is an occupational health nurse with Statoil ASA in Fornebu, Norway.

"I would inform them about the signs, symptoms and complications of the disease; advise them to avoid close contact with local populations and healthcare settings; and finally, ask them to immediately be examined upon any mild symptoms (fever, coryza, conjunctivitis) up to 21 days after return." Tamar Lachish is an infectious disease physician working at the Infectious Diseases Unit and Travel Medicine Clinic, Shaare-Zedek Medical Center, Jerusalem, Israel.

Debra Stoner, *Travel Medicine News*Associate Editor





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PROFESSIONAL

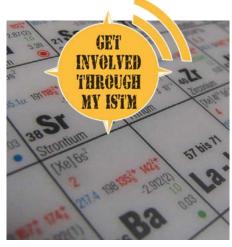
GROUPS

NURSING

It was lovely to meet so many of our members at CISTM14 Québec. The conference timetable was packed and so we only had one specific gathering of Nurses — our traditional welcome meeting. It was a lively meeting however with plenty of new introductions and meeting up of old friends and our only regret was that time was so short during such a very busy conference. This is something we hope to address at future events but we were pleased to be able to meet many of you throughout the event at our stand in the exhibition hall.

During the welcome meeting it was my pleasure to present our very first Distinguished Nurse Leadership award to Jane Chiodini from the UK. Jane will be known to many of you as she has previously chaired the NPG and has been an active member of the ISTM for over 20 years and is a great example of how innovative nurses can be in the discipline of Travel Health. We will be inviting nominations for both the Distinguished Leadership and the Emerging Nurse Leader awards each year and the successful applicants will receive complimentary registration to the next CISTM. Do keep a look out for notification about the next round of awards via the website later this year.

I would like to take this opportunity to thank the outgoing members of the steering council, Claire Wong – who we are delighted is now a member of the ISTM Executive Board, Nahoko Sato, Cindy Rugsten, Lani Ramsey and Gail Rosselot our past chair for all of their time, thoughts and efforts. I would especially like to thank Gail for her exceptional commitment to the NPG over a long period of time. I would also like to thank her for the exceptionally hard work that she put



into our CTH® study group prior to the examination in Québec and we plan to incorporate a lot of the excellent materials that she recommended onto our pages within My ISTM. We intend to keep this forum active for next vear's CTH® examinations which are to be held in March (Nepal) and June (London). If you are planning to write the exam at either of these locations then do go into your My ISTM profile on the ISTM website and opt to join this group. It is only open to ISTM members who are members of the Nurse Professional Group (NPG). If you are not sure whether you are signed up to the NPG then look at your profile in My ISTM and tick the box if it is not already checked. We would love to hear from nurses who took the exam in Québec and to pass on any advice they would give to those who are planning to take it in the future.

We have just completed the nomination process for replacement members of our NPG steering council and I am delighted to welcome, Heather Connor (Canada), Ruth Anderson (Australia) and Lisa Lynch-Jones (USA) to the council. The new steering council has members in USA, Canada, Europe and Oceania and we look forward to working together to

continue to represent Nurses within ISTM.

Carolyn Driver, NPG Chair



INTEREST

GROUPS

RESPONSIBLE TRAVEL GROUP

We are already thinking about how the Responsible Travel Group could contribute to the 2016 regional conferences in Kathmandu, London and Port Elizabeth so please do get in touch with any ideas.

In particular we would like to hear of experiences any of you may have had relating to ethical dilemmas experienced during expeditions or Responsible Safaris.

Hopefully we will be able to arrange informal gatherings of group members at these conferences.

Individual group members continue to promote responsible travel – Sheila Hall recently lectured in the UK on "Voluntourism: all about the experience". This was at the Joint Study Day run by the Faculty of Travel Medicine (Royal College of Physicians and Surgeons Glasgow) and the Medical Advisory Service for Travellers Abroad.

Please contact me or one of my fellow committee members (Sheila Hall, Rhonda Martin, Jim Bond, Trish Smith and Rodney Itaki) via the Responsible Travel Group community discussion forum to let us know your ideas and involvement in Responsible Travel. We would love to hear from you. I can also be contacted via My ISTM.

Susanna Maybin, Responsible Travel Group Chair.





GE®SENTINEL

eoSentinel is in the process of organizing a prospective, longitudinal study of chikungunya, dengue, and malaria cases to assess the medium and long term physical and psychological sequelae of these infections in travelers. This multi-site study will be led by Frabice Simon and Philippe Gautret at the Marseille site. New GeoSentinel publications include a manuscript describing cases of schistosomiasis that occurred in travelers to Corsica in 2013 and 2014, led by Philippe Gautret and published on line in Emerging Infectious Diseases, and a

single site study on travel-associated illness comparing children treated as in- or out patients led by Patricia Schlagenhauf and which is now in press at the Pediatric Infectious Disease Journal. Karin Leder and the Data Collection Working Group have nearly finalized major changes to the main data collection instrument for GeoSentinel. After seeking input from all sites, they are finalizing changes to the form with the goal of going live with the new form in September.

David Hamer and Patricia Schlagenhauf



Dauid Hamer



Elizabeth Barnett



Karin Leder



Marc Mendelson



Pat Schlagenhauf

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MARK CALENDAR

CONFERENCES

The 1st Croatian Congress on Travel, Tropical, Migration Medicine & HIV with international participation, will be held in Dubrovnik, Croatia 1 - 4 October 2015. For further information visit www.hdptm.hr.

11th Asia Pacific Travel Health Conference will be held in Kathmandu, Nepal 2 - 5 March 2016. Themed "Wilderness and mountain medicine: Travel medicine where it happens." For further information visit apthc2016.com.

The 6th North European Conference on Travel Medicine will be held at the QE2 Centre in London 1 - 4 June 2016. For further information visit www.nectm.com or email NECTM6@in-conference.org.uk.

The XIX International Congress for Tropical Medicine and Malaria (ICTMM 2016) will be held in Brisbane, Australia, 18 - 22 September 2016. For further information visit tropicalmedicine 2016.com.

The SASTM Biennial Congress and 7th Regional Congress of the ISTM will be held in Port Elizabeth, South Africa 28 September - 1 October 2016. For further information visit www.sastm.org.za.

The 15th Conference of the ISTM (CISTM15) will be held in Barcelona, Spain 14-18 May 2017. For more information: www.istm.org/cistm15.

Courses/Educational Travel

Medical Priorities & Clinical Tropical Medicine in South East Asia will be held 21 September - 9 October 2015 in Vientiane, Laos. For further information visit https://www.swisstph.ch/en/teaching/professional-postgraduate/medical-priorities-clinical-tropical-medicine-in-south-east-asia.html.

The 3rd Tropical Medicine Excursion to Ghana, West Africa will be held 25 November - 5 December 2015. For further information visit www.tropmedex.com.

The 21st Tropical Medicine Excursion to Uganda, East Africa, will be held 14 - 26 February 2016. For further information visit www.tropmedex.com.

The 8th Tropical Medicine Excursion to Tanzania, East Africa will be held 13 - 25 March 2016. For further information visit www.tropmedex.com.

The 4th Tropical Medicine Excursion to Ghana, West Africa will be held 30 November - 10 December 2016. For further information visit www.tropmedex.com.

Farewell to Hans O. Lobel — April 24, 1930 to September 11, 2015 by Robert Steffen

Sadly we have to announce that Hans Lobel, a co-founder of the International Society of Travel Medicine passed away aged 85 years.

Hans was appointed the first full-time CDC officer for malaria surveillance in 1966. In the early 1980's it became apparent that one of the agents used for malaria prophylaxis, pyrimethamine-sulfadoxin

(Fansidar, produced by Roche), was associated with severe cutaneous adverse events. At a meeting at the Roche headquarters in Basel, Hans and myself met and based on common interests in travelers' health we became friends. Hans greatly contributed to the first Conference on International Travel Medicine organized in Zurich 1988. One debate I remember from that period concerned the name: should that be travel medicine, tourist medicine, emporiatrics? Since that gathering was successful over expectations, he took the initiative to organize a second meeting in Atlanta in 1991 in close collaboration with Phyllis Kozarsky from Emory University. Then, together with Herbert L. DuPont from Houston



who for several years had collaborated with me in travelers' diarrhea research, the four of us launched the initiative to found the International Society of Travel Medicine. Hans became its first Secretary/ Treasurer and based in his CDC office in Atlanta he served the ISTM until 1994. Upon retirement he decided to concentrate on family life and sailing in

Hilton Head, SC.

Hans was a colleague with visions and a strong mind. Discussions with him were stimulating, occasionally they could become agitated, often they were interrupted by laughter, and finally they always were constructive. Hans was an achiever who worked relentlessly in the interest of travelers' health, not only to set up the Society, but also as a scientist. With various among us he has collaborated in malaria studies. Some of these were conducted 'in the field', such as distributing questionnaires daily around midnight for a period of time in the departure lounges of the Nairobi Airport semicircle, occasionally treating an obvious case of malaria on-site.