

Chapter 14.

Travel Medications and Interactions

A number of pharmacological interventions may be made to prepare the traveller going overseas, which include immunisation, malaria chemoprophylaxis and medication for self-treatment, included in a medical kit. Issues related to immunisation are dealt with in chapter ten.

This chapter considers the range of medications that may be prescribed or purchased by the elderly traveller. There are four important principles for consideration:

1. Is the prescribed medication likely to interact with other medication taken for chronic conditions. Polypharmacy is common in elderly people, so a medication history should always be sought at consultation.(See chap.1)
2. Is the medication prescribed for travel likely to be contraindicated? Again the elderly person is more likely to suffer multiple pathologies than a younger individual.(See chap.2)
3. Is the way that the drug is handled by the body (Pharmacokinetics) likely to be affected in older age e.g. declining liver or renal function. (See chap 1.)
4. Do much older people tend to respond differently when compared to a younger population (Pharmacodynamics).

Other points are also worth considering when preparing the traveller who will be carrying any form of medication:

- Carrying medications across international borders can meet restrictions even when intended for personal use. This particularly applies to those which are designated narcotic or psychotropic drugs. As a rule of thumb, this would cover any medicine that has an effect on the central nervous system and in particular if it could potentially be abused. Carrying a prescription or note from the prescriber and keeping the medication in its original packaging is advocated, but there are some countries, such as the United Arab Emirates, where a range of medicines is completely banned.
- Adherence to medication may be affected due to a change and disruption in routines whilst away from home.
- It is always advisable for medications to be purchased before leaving home rather than relying on a local supply even if this is much cheaper. It is estimated that in some countries of Africa and Asia, up to 60% of medicines are counterfeit and many locally produced medicines are of poor quality.Each of the common drugs prescribed in the elderly for travel will be discussed with consideration to these four principles.

First, though a brief review briefly of the principles that influence Pharmacokinetics and Pharmacodynamics in old people. ^{1,2}