Traveling with HIV Infection
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Despite the fact that HIV is now more of a chronic condition and treatment regimes provide for more "stable" immune function, PREPARATION remains the key to successful travel. The HIV-infected traveler is prepared only when consideration is given to (1) infectious risk, (2) medication needs, and (3) preventative measures.

INFECTIOUS RISK
- **Visit** your provider - Inform your care provider of your intended destination
- **Airplane** air (recirculated) - ask to be reseated if you are seated near a coughing person but maintain your anonymity
- **Call** embassy/consulate to inquire about policy on tourism for HIV-infected travelers (150 countries have entry restrictions for travelers with HIV; their aim is to stop the spread of HIV at their borders)
- **Airplane** food: Don't eat anything unless it's hot
- **T** cells - <200 cells/μL = substantial risk of infection when traveling
- **Immune** status: Know your most recent viral load and CD4+ count
- **Only** eat foods or fluids that have been heat treated and are still hot (heat kills germs but germs can grow again if the food cools off)
- **Neurotic** - this is how you should be about food safety concerns

MEDICATION NEEDS
- **Take** - Be sure you have all your medications
- **Required** amounts - always carry extra in case you lose a bottle
- **In** - ALWAYS carry medications IN your carry-on bag. Don’t pack medications in your checked luggage as luggage can get lost by the airlines
- **Proper** ("original") containers - in destinations that are not HIV friendly you may need to consider alternative storage devices

PREVENTATIVE MEASURES, be sure to take:
- **Travel** companion - take someone with you who could advocate for you if needed
- **Repellent** (insect) - containing DEET
- **Appropriate** medical kit (antibiotic prophylaxis, sunscreen, Tylenol, antiseptics, first aid equipment, condoms)
Vaccinations - all “live” vaccines are contraindicated (see below)
Emergency information - phone numbers of HIV-trained providers and know restrictions on your insurance policy (do you need extra travel insurance?)
Letter summarizing clinical condition and medical history

The need for immunization should be evaluated in all individuals with HIV infection who travel. Live-virus vaccines (i.e. yellow fever) are not recommended for travelers with immune deficiency, people with HIV disease should be current on diphtheria-tetanus, influenza, and pneumococcal vaccines. When traveling to developing countries it is also important to know your immune status to diseases like polio, measles, hepatitis A, and hepatitis B, as coinfection with any of these diseases can lead to significant complications in the HIV-infected traveler. If you have received the vaccines, it may be necessary to recheck your antibody status. If you do not have antibodies your provider may ask you to repeat the series prior to departure.

Your local health department can tell you what immunizations you will need when traveling to countries outside of the United States. Make sure that your immunization card (yellow card) is up to date.

Successful travel on your part requires forethought and PREPARATION. Have a safe trip and remember: A little advanced planning on your part may save you a lot of hassle in the long run.

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Hints for Staying Healthy

Enjoying your vacation requires that you remain healthy. Here are some “trip tips” for maintaining optimal health during travel.

- Normal saline nose drops - excellent way to keep your nasal passages moist during air travel or in dry climates.
- Hydration - consuming bottled water is an excellent means of staying hydrated. Remember that soda and alcohol are dehydrating and should be consumed judiciously.
- All antiretroviral drugs have adverse effects, which usually develop a few weeks after initiation of therapy. It is better not to travel soon after a change in therapy.
Drug-related recommendations for food and liquid intake may need adjustment during travel.

In hot climates, fluid loss due to sweating should be replaced.

Know about the drugs that should not be used with your antiretrovirals because of pharmacokinetic interactions.

Avoid sharing drug-using equipment and unprotected sex: you don’t want to spread your infection nor do you want to get exposed to HIV again (especially to a new strain or a drug-resistant strain) or to other sexually-transmitted and blood-borne diseases.

Seek medical advice immediately if you become ill. A list of medical services and names of HIV-savvy providers along the way will aid this process – remember PREPARATION is the key.

Carry a copy of your prescriptions separately from your medication in case your medication is lost or stolen.

Taking your food with you saves quite a lot of headache. Your major expense may be buying the ice. Canned and dried foods won’t rot and you don’t need ice. Don’t forget the can opener!

Yogurt, multi-packs of chips, and trail mix make good snacks!

Water safety is a MUST! If you don’t have access to bottled water, boil your own. Expect that the water from the tap is deadly.

Use bottled water to brush your teeth.

Remember: ice is nothing more than frozen water. Don’t drink fluids with ice unless you are sure that the water was boiled prior to freezing.

All meat should be well done (heat kills germs).

Fish should be flaky. If there’s even one little “soft spot” don’t eat it.

Be especially careful about ground meat like hamburger.

Assume that poultry in developing countries has been stored and/or prepared un-hygienically (if there is the tiniest bit of pink by the bone – send it back).

For more information on HIV and travel go to the following websites

www.hivguidelines.org
http://plwha.org/
www.nursesinaidscare.org
www.cdc.gov
References


Traveling with HIV. *Positive (February/March 2009).* 31.