

## **End of year editorial : Hot topics in travel medicine**

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Teaser: COVID-19 will reshape travel medicine, in particular in relation to business travellers and the use of digital technologies. Although the hot topic in travel medicine was the COVID-19 pandemic, travel-associated measles, yellow fever and rabies deserve some special attention.

No doubt, the hot topic in travel medicine in 2020 was the COVID-19 pandemic. COVID-19 turned travel medicine upside down, plummeted the travel and tourism industry, and rendered many travel medicine clinics empty, not to mention it revolutionized our own personal lives by stay-at-home orders and mobility restrictions. Travelers were the initial vectors, and travel became the immediate victim.<sup>1</sup> Never in history have we seen such a dramatic decline in air travel. The International Society of Travel Medicine as a whole was affected, our regional conference was cancelled, and all our meetings for leadership or educational purposes are now online. Some of us have lost loved ones, others have experienced the disease, some are still suffering from long-COVID.

The Journal of Travel Medicine received an unprecedented high number of manuscript submissions in 2020, a 500% increase to previous years. Naturally, the rejection rate had to increase; the finally accepted papers related to COVID-19 are all listed in Table 1. They cover topics from the impact of lockdown, experiences in countries such as China, Iran, Nepal, Vietnam and Brazil, outbreaks on cruise ships, measures at borders, screening and quarantine, travel restrictions and travel bans, in-flight transmission, immunity passports, face masks, geographic spread via air travel, infodemic, inequities and inequalities, COVID-19 in migrants and detention camps, and various clinical topics.

Travel medicine will survive the onslaught of COVID-19. A crisis is always an opportunity. The COVID-19 pandemic offers the opportunity to reshape travel medicine practice. Will the logarithmic scale of travel associated vaccine preventable diseases incidences reflect a different pattern post-COVID?<sup>2</sup> Will business travel as we know it now<sup>3</sup> change for ever with reduced air travel as everyone is more comfortable with teleconferences using digital technologies? Will the future of travel medicine include more mhealth and digital technologies? We already have built up expertise to this end.<sup>4</sup> Pre-travel advice is the core function in travel medicine.<sup>5</sup> Immediate and long-term recalls of traditional pre-travel consultations are known to be suboptimal, and online consultation with smartphone support could potentially enhance knowledge, practices and reduce risk behaviour. In a randomized controlled trial, travellers received a short consultation and smartphone support versus no smartphone support.<sup>6</sup> Interestingly, although online support addressed several important travel-related hazards, when combined with a shortened pre-travel consultation, was associated with a lower level of knowledge about health risks. The authors conclude that smartphone support should augment, rather than replace, pre-travel consultation. A prospective cohort of travellers to Thailand used a smartphone application to answer a daily questionnaire about health behaviours and events. By pairing new methods of data collection with questionnaires that identify key traveller characteristics to intervene on, travel medicine providers will be able to provide more specialised health advice, ensuring that all travellers receive comprehensive advice about the full range of health challenges they will face during travel.<sup>7</sup>

Although COVID-19 took centre stage in travel medicine in 2020, there are interesting additional hot topics to report on. The years 2018 to 2019 saw a major rise of measles in travellers.<sup>8</sup> The resurgence of measles globally was a major setback to the measles eradication efforts. Conversely, the social distancing measures as part of the COVID-19 pandemic response have resulted in a decline in measles cases in 2020.<sup>9</sup> However, this impact is unlikely to last, and given the disruptions in childhood immunization programmes due to the COVID-19 pandemic, measles will accelerate soon again, unless we immediately improve global vaccine coverage rates.

Risk perception of rabies in travellers remains low.<sup>10</sup> Fortunately, WHO has proposed a simplification of rabies pre-exposure and post exposure prophylaxis, which should also render prophylaxis more convenient and affordable to travellers, even last minute travellers. A systematic review of vaccine potency has shown that current vaccines (>2.5 IU/IM dose), when administered by the intradermal (ID) route for either PEP or PrEP, have efficacy equivalent to or higher than that of the same vaccine administered by the IM route.<sup>11</sup> Furthermore, ID pre exposure regimens can be shortened to 1 week with 2 visits.<sup>12</sup>

The yellow fever outbreak in Brazil and other parts of the Americas in 2017-2018, associated with a high case fatality rate<sup>13</sup>, resulted in a historic record of yellow fever infections in international travellers.<sup>14</sup> This should serve as a reminder that all travellers should be vaccinated against yellow fever if the travel destination requires or recommends such vaccination, except for rare circumstances where the risk of vaccination outweighs the benefit. Vaccine shortages led to the use of fractional doses; however, while the World Health Organization endorses fractional doses for outbreak situations, fractional doses are not compliant with the International Health Regulations and should not be used for travellers.<sup>15</sup>

The Journal of Travel Medicine, the official journal of the International Society of Travel Medicine, has put together collections on pregnant travellers, emerging topics such as migration medicine, climate change and antimicrobial resistance. For the year 2021, our Journal plans a collection on travel health issues in older travellers and “tropical medicine in travel medicine”. There is more to travel medicine than COVID-19!

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Table 1: COVID-19 related manuscripts accepted by the Journal of Travel Medicine in 2020<sup>1-</sup>  
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