

## **MEDICAL ADVICE | TRAVEL | ELDERLY TRAVELLERS**

Earlier retirement has encouraged many elderly, and even very old, people to visit relatives overseas or to fulfil long-standing tourist ambitions. The following are some issues you may wish to consider.

### **The pre-travel assessment**

A pre-travel health consultation may reveal the need for special advice on the mode of travel, choice of destinations and route. Always ask your doctor for adequate medications to cover the whole trip and with some to cover possible delays – familiar medications may be difficult to obtain locally overseas and may have different names or tablet doses.

### **Travel Insurance**

It is essential that the elderly have adequate travel health insurance. Existing health problems usually have to be declared in advance, including any arranged hospital admissions. Cover may not include, for example, those who have recently had a myocardial infarction or bypass surgery. Even with insurance, in an emergency, care depends upon the available facilities.

### **In flight**

Lack of exercise in airports and on aircraft can result in venous thrombosis and possibly pulmonary embolism. Swollen ankles can result from sitting still for long periods in a restricted space. Regular exercises on flights are very important and the aircrew may be able to advise you.

Angina and breathlessness can be worse at high altitude and sometimes in aircraft. If warned in advance the airlines can provide additional oxygen.

Those with unstable or insulin dependant diabetes mellitus, confusional states and urinary incontinence can have difficulties during flights – usually manageable if you are prepared in advance.

### **Pre-existing illness**

Those taking medicines for chronic conditions may have more difficulty remembering to take their tablets (compliance) when away from home.

Reduced stomach acidity (achlorhydria) may predispose older people to gastro-intestinal infection.

Hot climates may aggravate low blood pressure especially in those on anti-hypertensives or anti-Parkinson drugs – this can cause problems in those who get transient cerebral ischaemic attacks.

There is a greater likelihood of accidents in the elderly especially in unfamiliar surroundings.

Poorer balance and postural stability make falls more likely. Reaction can be slower. Brittle bones (osteoporosis) in the elderly make fractures more likely.

Capacity for exercise is often reduced with ageing. Impairment in sight and hearing loss can cause confusion in unfamiliar situations – for example in reading important notices or hearing loudspeaker announcements. Poor short-term memory may mean that travel proves more stressful.

## Skin and foot care

Many elderly people have foot and lower limb problems including deformities, nail changes, ulcers and poor circulation. Protective footwear should be used on the sand and in the water.

Sunburn can be worse when the skin is aging or thin and remember feet and legs can burn – protective sunscreens or covering up are needed as for other parts of the body. Moisturizers are helpful especially on heels that crack easily. Moist cracked skin can lead to infection.

## Vaccinations

Vaccinations take time so consult your doctor or nurse as soon as possible, ideally at least eight weeks before travelling. Age is not a contraindication for any vaccine and even if you have received the vaccine before boosters may now be necessary. Please complete our [travel questionnaire](#) and make an appointment with the Practice Nurse to assess your requirements.

While age and experience may help travellers to be more careful to avoid risks, vaccinations are as important for older people as at any age. Age gives no extra 'natural' immunity to infections and it can make older people more likely to become ill or have complications.

Tetanus and diphtheria vaccination is important for those likely to sustain injuries, perhaps on the beach (tetanus) or mix closely with the local population (diphtheria). For countries where these diseases are still common you should to receive boosters every 10 years and everyone, of all ages, should be up to date with their normal British schedule.

Hepatitis A and typhoid vaccines are important for those who are not able to be careful about their food and water hygiene in risk areas. Hepatitis can be particularly unpleasant in older people. Your accommodation may be reasonably safe but eating out may be risky in poorer countries.

Influenza vaccine can be considered for those who might get a more severe illness such as the elderly and those with existing health problems. Remember the 'flu' season in the southern hemisphere is from April to November.

## Malaria prevention

Your accommodation may well provide good mosquito protection, if not you must consider taking a good mosquito net. Sensible clothing to protect the skin from bites and careful use of mosquito repellents is also important. If your advisor recommends anti-malarial tablets make sure you take them correctly.

Good preparation can prevent many potential health problems and make a holiday much more enjoyable.

## Useful contact details

- **Age Concern Insurance** Tel: [0845 601 2235](tel:08456012235) No upper or lower age limits and this company has very few exclusions. However, like many insurance companies, it wouldn't cover those travelling against medical advice.
- **Holiday Care Service** Tel: [01293 774535](tel:01293774535)  
Has information on holidays for those with health problems and also a list of accommodating travel insurance companies
- **British Heart Foundation** 14 Fitzhardinge Street, London W1H 6DH Tel: [020 7935 0185](tel:02079350185) offers information on insurance for people with heart problems including angina and high blood pressure.