



COMMONWEALTH of VIRGINIA

Department of Health

P O BOX 2448
RICHMOND, VA 23218

KAREN REMLEY, MD, MBA, FAAP
STATE HEALTH COMMISSIONER

TTY 7-1-1 OR
1-800-828-1120

December 20, 2011

Dear Colleague:

As we approach a busy time of year with increased holiday travel, I ask that you take a few minutes from your hectic schedule to help me with an important health issue – **the risk of illness to Americans traveling abroad and the importation of infectious diseases into the United States**. Global travel has reached unprecedented levels: each day commercial airlines carry 1.8 million passengers across international borders. Those travelers, including business travelers, tourists and immigrant, migrant and refugee populations, are at risk for acquiring communicable diseases during their travels and spreading those diseases upon their return. Here in Virginia, one in ten residents is foreign born.

Virginia is an important tourist, business and military destination, each year hosting a large number of visiting travelers and welcoming home thousands of U.S. residents returning from trips abroad. As a result, diseases no longer endemic to the area have been reported in Virginia. For example, the infectious nature of measles has led to exposures and spread of infection to non-travelers. Since 2008, VDH epidemiologists have been engaged in countless measles exposure investigations along with other communicable diseases- many involving interstate and international travelers. Recent measles outbreaks in Canada, New Zealand and Europe have proven that even visitors to popular, developed countries can benefit from vaccination prior to travel (most recent data included in December 2, 2011 MMWR: <https://www.cdc.gov/mmwr/pdf/wk/mm6047.pdf>).

I am requesting your assistance in preventing travel-associated illness by:

- **Encouraging pre-travel consultation visits for your patients that may be traveling abroad and recommend vaccination and other preventive measures when needed.** *Pre-travel consultation should include a thorough assessment based on travel destination, duration, and underlying risk factors for each traveler. Each disease of concern has its own particular epidemiology and geographic range. Some are preventable with medications, others with vaccines, and some only with personal protective measures.*
- **Considering imported infections when assessing patients who have recently traveled.** *For these patients, please remember infection control guidelines, public health implications and requirements for reportable diseases.*
- **Seeking further information on travel health recommendations (vaccines and other preventive measures) and travel-related illnesses.** *Resources that may be of assistance include: the Centers of Disease Control and Prevention "Traveler's Health Web page*

(<http://wwwnc.cdc.gov/travel/> that includes destination-specific health recommendations and a free online version of health information for international travel, also known as Yellow Book 2012. If you are not familiar with this comprehensive reference, I encourage you to take a look today. The U.S. Department of State (<http://www.travel.state.gov/>) and the Central Intelligence Agency (<https://www.cia.gov/library/publications/the-world-factbook/index.html>) provide a number of online resources, including information about climate, terrain and natural hazards in each country.

Finally, while some special travel vaccines may be indicated, **all children, adolescents and adults who are traveling internationally should be up-to-date on routine vaccines** to ensure protection against diseases such as polio, measles and rubella, which are still common in many parts of the world. Please take the time to look at the chart below and be sure you and your loved ones are protected.

Recommended Adult Immunization Schedule

Vaccine	Indications
Influenza	1 dose annually
Tetanus, diphtheria, pertussis (Td/Tdap)	1-time dose of Tdap, then boost with Td every 10 years
Varicella	2 doses for adults w/o evidence of immunity
Human papillomavirus	3 doses for females 19-26 years of age
Zoster	1 dose at age ≥ 60 years
Measles, mumps, rubella (MMR)	1 or 2 doses for all adults born in 1957 or later
Pneumococcal (polysaccharide)	1 dose at age ≥ 65 years; earlier if medical indication
Meningococcal	1 or more doses if medical or other indication
Hepatitis A	2 doses if medical or other indication
Hepatitis B	3 doses for any person seeking protection, or if indicated

Source: Advisory Committee on Immunization Practices, <http://www.cdc.gov/vaccines/recs/schedules/adult-schedule.htm#hcp>

As always, thank you for your leadership in promoting and protecting the health of all Virginians. Happy Holidays and remember that we are just beginning the peak of influenza season-and it's not too late to get your flu shot.

Sincerely,

Karen Remley, MD, MBA, FAAP
 State Health Commissioner