

# Sneak Peak: CDC Updates Travelers' Health Book

BY DAMIAN McNAMARA  
Miami Bureau

MIAMI BEACH — The next edition of "Health Information for International Travel," also known as the Centers for Disease Control and Prevention's "Yellow Book," will be more clinically oriented and will include new chapters on specific diseases, such as SARS, according to a sneak preview at the annual meeting of the American Society of Tropical Medicine and Hygiene.

Clinical presentation and treatment information will be added to the new and traditional chapters. Previously, the book addressed only prevention, risk, descriptions, and occurrence of travel-related diseases, according to Christie Reed, M.D., of the CDC's Division of Global Migration and Quarantine.

Travel increased exponentially in the 1990s, as did the volume of people migrating around the world, Dr. Reed said, adding, "Yesterday's migrant can become today's traveler." Many immigrants to the United States return to their countries of origin to visit family and friends, for example, and present unique challenges in travel-related health.

One of the main goals of the CDC's Travelers' Health division is to share information, primarily through the Yellow Book and the Internet ([www.cdc.gov/travel](http://www.cdc.gov/travel)). Staff members monitor outbreaks and communicate with the State Department, other CDC disease experts, and foreign ministries of health to compile the most accurate data for the book, as well as the most up-to-date alerts for the Web site.

## Daily TB Meds = Fewer Relapses

Daily treatment may be superior to the standard three-times-weekly treatment for preventing early relapse in tuberculosis patients.

In a nested case-control study of 12,183 patients with pulmonary tuberculosis who completed treatment in 1 year, the overall 30-month relapse rate was 0.9%. The rate in those treated three times weekly was increased, compared with the rate in those treated daily (odds ratio 3.92), reported Kwok C. Chang, M.D., of Grantham Hospital, Hong Kong, and colleagues.

The investigators also found that prolonging intensive-phase treatment and overall treatment by at least 50% reduced the relapse rate (odds ratio 0.24). They found significant associations between relapse and each of the following: extensive disease on chest radiograph, presence of conditions associated with active tuberculosis (such as diabetes), and coexisting tuberculosis lymphadenitis (*Am. J. Respir. Crit. Care Med.* 2004;170:1124-30).

Standard dosing might be cost effective in those without cavitation on initial radiograph, but further research to determine the best treatment strategy in other settings is warranted, they said.

—Sharon Worcester

The 2005-2006 edition will include more information from experts outside the CDC and a new bibliography on evidence-based medicine for travelers. New chapters are expected to include:

- ▶ Norovirus.
- ▶ Severe acute respiratory syndrome.
- ▶ Pneumococcus.
- ▶ Legionella.
- ▶ Jet lag.
- ▶ Fish poisoning.
- ▶ Sunburn.

▶ Health-seeking travelers. "This includes people traveling for surgery, dental care, etc. The standards for health care may not be the same in other places as they are in the U.S.," Dr. Reed said.

There will also be expanded sections on preconception, pregnancy, and breastfeeding issues for travelers. In addition, there will be more information on travel for immunocompromised people, not just for those with HIV infection, as in past editions.

New maps will highlight regions of in-

creased risks associated with Japanese encephalitis and yellow fever.

The new edition is expected to be available in May, to coincide with 9th Conference of the International Society of Travel Medicine in Lisbon, Portugal.

Although the next edition of the Yellow Book is nearly complete, online information is updated continuously. Dr. Reed encouraged physicians to submit any travel health-related information or concerns using the site's "contact us" option. ■

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