

ADVENTURE TRAVEL ADVICE, including trekking

(Dr Jim Duff, 1/04/08)

Fitness and training

The fitter you are, the more you will enjoy your holiday. Plan your training well in advance and seek advice if you are not sure of what is expected of you. Lack of personal fitness can cause problems. Turning back may be difficult to arrange, and causing delays in bad weather can be especially dangerous.

Over exertion is a risk factor for altitude illness. Kilimanjaro, the Inca Trail, Everest Base Camp and many other treks, climbs and trips involve strenuous days. On Kili, the summit day involves climbing 1200m (4000ft) and descending 2200m (7200ft). The Inca Trail also has a demanding final three days involving an ascent of 1100m (3600ft), an ascent and descent of 900m (3000ft) and finally a descent of 1400m (4500ft). In addition, these hard days are at altitude where there is a reduced oxygen level. At Kala Pattar (Everest viewpoint) or the summit of Kilimanjaro, there is only 50% of the oxygen that is available at sea level.

<http://www.treksafe.com.au/medical/documents/altitudeillness.pdf> for more information.

Pre-existing medical conditions

If you suffer from any of these medical conditions: **asthma, high blood pressure/heart disease, diabetes, epilepsy or mental illness**; please discuss it with your doctor before your trekking holiday or wilderness adventure holiday.

Visit http://www.treksafe.com.au/medical/notes_for_doctors_and_leaders.htm for more information on these conditions to aid your assessment and preparation. These notes are for medical practitioners.

Preventing problems

THE BUDDY SYSTEM

Your leader should arrange the 'buddy system' (pairing up to keep an eye on each other) to make early recognition of illness/problems easier. Buddies should voice their concerns to the leader/doctor as soon as possible (the leader and doctor are on call 24 hours a day).

RECOGNIZING SOMEONE IS BECOMING UNWELL

These signs and changes in behaviour are particularly important when they are 'out of character'.

- Loss of appetite, missing meals
- Tiredness, lethargy; coming to camp late and last, going to bed early, being last to get out of bed
- Personality changes: anxiety, irritability, excitability, anger, aggression, complaining, social withdrawal, depression, loss of concentration, talking more/less
- Clumsiness, staggering, falling over, dropping things, inability to tie shoelaces or pack or carry one's own bag
- Breathlessness, confusion, drowsiness

This can be memorized as: "Grumble, mumble, stumble, tumble".

SUNBURN, BLISTERS, ETC

- Wear a wide brimmed hat to reduce the risk of sunburn and heat exhaustion. Cover up or protect noses, necks, ears, the backs of hands on walking poles, and backs of knees and calves.
- Acetazolamide (Diamox™) and doxycycline (an antibiotic often taken for malaria prevention) can cause a person to sunburn more easily (photosensitivity), so extra sun protection is needed
- Stop and treat blisters at the first sign of rubbing and apply blister dressing
- Walking poles are very useful while trekking, practice with them pre-departure
- Mittens are much warmer than finger gloves

PAINKILLERS AND MEDICATIONS

Anyone contemplating taking anything but their regular medication must inform the leader/doctor. If pain relief is needed at altitude, paracetamol is a safe option while ibuprofen is better at treating the headache of acute mountain sickness. Neither drug will mask symptoms of altitude illness.

FLUIDS

Dehydration occurs at low altitude, where heat and humidity cause excessive sweating and is also common at high altitude due to exercising in cold dry air. Travellers need to drink enough fluid (as soups, beverages or water) to keep hydrated (you are hydrated if your urine is 'pale and plentiful'. Infrequent small amounts of strong smelling, dark coloured urine means you are dehydrated)! Discipline yourself to stop and drink at least every hour.

DIARRHOEA (AND FOOD POISONING)

Diarrhoea in developing countries has a greater than 50% incidence for first-time travellers staying for more than a short time. In these countries it is more likely to need antibiotic treatment than it is at home. Diarrhoea can vary from mild to severe; it can result in dehydration and salts loss with resulting depletion of energy and fitness. This can result in failure to complete your holiday, trek or to summit. It can also spread rapidly through a group, so report diarrhoea to your leader/doctor immediately.

Reduce your risk of diarrhoea by frequent hand washing/drying and avoiding hand-to-mouth contact.

PORTER CARE

If you employ porters directly or indirectly through a company, you must take care of them. This means they should have adequate clothing, footwear, food and shelter. This is especially so above the tree line. The maximum legal load a trekking porter should carry varies from country to country: 20 kg on Kilimanjaro, 25 kg in Peru and 30 kg in Nepal.

Many trekkers take far too much 'stuff' with them and you should aim to travel light. If you want to take more, be prepared to hire another porter. If you are concerned for your porters speak out there and then!

More information about porters and their needs can be found on <http://www.ippg.net/>.