

TREKKING ADVICE

Dr Jim Duff, 23/04/06

Fitness and training

Lack of personal fitness can cause problems. Turning back may be difficult to arrange, and delay high up a mountain or pass in bad weather can be dangerous. Overexertion is a risk factor for altitude illness.

Kilimanjaro, the Inca Trail, Everest Base Camp and many other treks 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.

The fitter you are, the more you will enjoy your trek. Training should start three months before departure. Before departure, you should be able to walk up and down 1000 m for all kind of treks except 'introductory grade' ones. Seek advice if you are not sure of what is expected of you.

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).

SIGNS OF SOMEONE BECOMING UNWELL

("Grumble, mumble, stumble, tumble")

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 own bag
- Breathlessness, confusion, drowsiness

SUNBURN, BLISTERS

- Trekkers should have a wide brimmed hat and wear it to reduce the risk of sunburn and heat exhaustion. Sunburned noses, necks, ears, the backs of hands on walking poles, and backs of knees and calves are painful and can last the rest of the trip. Cover up or burn!
- Diamox™ and doxycycline (a common antibiotic often taken for malaria prevention) can cause a person to sunburn more easily (photosensitivity), so extra sun protection is needed
- Stop and attend to blisters at the first 'hot patch' symptom of rubbing
- Walking poles are very useful at high altitude, ideally get some pre-departure practice.
- Mittens are much warmer than finger gloves

PAINKILLERS AND MEDICATIONS AT ALTITUDE

If pain relief is needed at altitude, paracetamol is a safe option while ibuprofen is better at treating the headache of AMS. Neither drug will mask symptoms of altitude illness.

Anyone contemplating taking anything but their regular medication must inform the leader/doctor.

FLUIDS

Dehydration is common at low altitude, where it can be hot and humid, causing much sweat loss; it occurs also at altitude, while exercising in cold dry air. Trekkers need to keep their fluid intake up in the form of soups, drinks and water. Discipline yourself to stop and drink at least every hour.

The way to know you are keeping ahead of dehydration is if your urine is 'pale and plentiful'. Strong-smelling, yellow urine passed infrequently and in small amounts means you are dehydrated!

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. Diarrhoea can vary from mild to severe; it can result in dehydration and loss of salts with resulting depletion of energy and fitness. Diarrhoea is a cause of failure to complete a trek or to summit. It can also spread rapidly through a group, so report diarrhoea to the leader/doctor immediately.

Reduce the risk of diarrhoea by frequent hand washing/drying and avoiding hand-to-mouth contact. Travelling with your own cooks reduces the risk. To prevent a potent cause of food poisoning, your cook should have two sets of chopping boards and knives: one for meat/fish preparation, the other for all other purposes. Boards and knives must be scalded, scrubbed clean with soap and sun-dried after each meal.

Diarrhoea in developing countries is more likely to need antibiotic treatment than it is at home.

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 www.ippg.net