

**Bibliography: Pediatric Interest Group**  
International Society of Travel Medicine  
April 11, 2014

**Adolescent Travelers**

1. Nield LS. Health implications of adolescent travel. *Pediatr Ann* 2011;40:358-361.  
*A very nice review.*

**Arthropod-Transmitted Infections**

1. Gibney KB, Fischer M, Prince HE et al. Chikungunya fever in the United States: A fifteen year review of cases. *Clin Infect Dis* 2011;52:e121-e126.  
*A good review of cases. Helps with the recognition and management.*
2. Ranjit S, Kisson N. Dengue hemorrhagic fever and shock syndromes. *Pediatr Crit Care Med* 2011;12:90-100.  
*Good review article on the recognition and management of patients with DHF and DSS.*
3. Amarasinghe A, Kuritsky JN, Letson GW, Margolis HS. Dengue virus infection in Africa. *Emerg Infect Dis* 2011;17:1349-1354.  
*Febrile travelers coming from Africa may have dengue fever; an underdiagnosed and underreported condition in this continent.*
4. Krishnan N, Purswani M, Hagmann S. Short report: severe dengue virus infection in pediatric travelers visiting friends and relatives after travel to the Caribbean. *Am J Trop Med Hyg* 2012;86:474-476.  
*Pediatric travelers are at risk for severe dengue virus infection. Prevention is key.*
5. Sotir MJ, Hoang Johnson DK, Davis JP. Travel-associated dengue illnesses among Wisconsin residents, 2002-2008. *Wisc Med J* 2009;108:447-452.  
*Mosquito exposure was high. Unfortunately, insect repellent use was low. The result: dengue.*

**Bacterial Infections**

1. Were T, Davenport GC, Hittner JB et al. Bacteremia in Kenyan children presenting with malaria. *J Clin Microbiol* 2011;49:671-676.  
*Bacteremia and malaria go together in many countries in Africa. Both need to be considered when evaluating the child with a febrile illness.*

## **Breastfeeding and Travel**

1. Chen LH, Zeind C, Mackell S et al. Breastfeeding travelers: precautions and recommendations. *J Travel Med* 2009;1195-1982.  
*Everything you wanted to know about breastfeeding and travel. Great review.*

## **Dermatologic Conditions Associated with Travel**

1. Juckett G. Infections, dermatologic conditions in the returned pediatric traveler. *Pediatr Ann* 2011;40:362-367.  
*Nice review*
2. Neumayr A, Hatz C, Blum J. Not to be missed! Differential diagnoses of common dermatological problems in returning travellers. *Travel Med Infect Dis* 2013;11:337-349.  
*This review is written in a very useful manner that will assist all of us in assessing travelers returning with skin conditions.*
3. Kamimura-Nishimura K, Rudikoff D, Purswani M, Hagmann S. Dermatological conditions in international pediatric travelers: epidemiology, prevention and management. *Travel Med Infect Dis* 2013;11:350-356.  
*Nice review of skin conditions in pediatric travelers.*

## **Gastrointestinal Problems**

1. Pitzinger B, Steffen R, Tschopp A. Incidence and clinical features of traveler's diarrhea in infants and children. *Pediatr Infect Dis J* 1991;10:719-723.  
*The best description of the epidemiology of traveler's diarrhea in children.*
2. Ouyang-Latimer J, Jafri S, VanTassel A et al. In vitro antimicrobial susceptibility of bacterial enteropathogens isolated from international travelers to Mexico, Guatemala, and India from 2006 to 2008. *Antimicrob Agents Chemother* 2011;55:874-878.  
*A must read if you discuss with travelers the benefits of antimicrobial agents for the prevention and treatment of traveler's diarrhea.*
3. Eren M, Dinleyici EC, Vandenplas Y. Clinical efficacy comparison of *Saccharomyces boulardii* and yogurt fluid in acute non-bloody diarrhea in children: a randomized, controlled, open label study. *Am J Trop Med Hyg* 2010;82:488-491.  
*Probiotics appear to be beneficial in the treatment of acute non-bloody diarrhea in children.*

4. DuPont HL, Galler G, Garcia-Torres F et al. Travel and traveler's diarrhea in patients with irritable bowel syndrome. *Am J Trop Med Hyg* 2010;82:301-305.  
*Travel-related acute diarrhea worsens the symptoms of patients with IBS.*
5. Jiang Z-D, DuPont HL, Brown EL et al. Microbial etiology of traveler's diarrhea in Mexico, Guatemala, and India: importance of enterotoxigenic *Bacteroides fragilis* and *Acrobacter* species. *J Clin Microbiol* 2010;48:1417-1419.  
*"Newly-recognized" enteric pathogens in traveler's diarrhea.*
6. Powell CVE, Priestley SJ, Young S, Heine RG. Randomized clinical trial of rapid versus 24-hour rehydration for children with acute gastroenteritis. *Pediatrics* 2011;128:e771.  
*Nasogastric tube rehydration may be needed for young infants with acute gastroenteritis. This study compares a rapid regimen versus a standard slower regimen. Interesting findings.*
7. Mondal D, Minak J, Alam M et al. Contribution of enteric infection, altered intestinal barrier function, and maternal malnutrition to infant malnutrition in Bangladesh. *Clin Infect Dis* 2012;54:185-192.  
*While it is not a surprise to most, this study demonstrates the relationship between enteric infections, intestinal barrier disruption and malnutrition.*
8. Olson CK, Blum LS, Patel KN et al. Community case management of childhood diarrhea in a setting with declining use of oral rehydration therapy: findings from cross-sectional studies among primary household caregivers, Kenya, 2007. *Am J Trop Med Hyg* 2011;85:1134-1140.  
*While the use of ORS is known to be beneficial for children with diarrhea, its use still faces challenges in some countries.*
9. Blum LS, Oria PA, Olson CK et al. Examining the use of oral rehydration salts and other oral rehydration therapy for childhood diarrhea in Kenya. *Am J Trop Med Hyg* 2011;85:1126-1133.  
*The use of ORS still faces challenges in some countries. In some countries, caregivers and health care workers need to be better educated on its benefits and to best utilize them.*
10. Pantenburg B, Ochoa TJ, Ecker L, Ruiz J. Short report: use of commercially available oral rehydration solutions in Lima, Peru. *Am J Trop Med Hyg* 2012;86:922-924.  
*ORSs are under-utilized. Many homemade ORS are inappropriately prepared.*
11. Ross AGP, Olds GR, Cripps AW et al. Enteropathogens and chronic illness in returning travelers. *N Engl J Med* 2013;368:1817-1825.

*Excellent, comprehensive review. Nice summary table.*

## **Global Child Health**

1. Maitland K, Kiguli S, Opoka RO et al. Mortality after fluid bolus in African children with severe infection. *N Engl J Med* 2011;364:2483-2495.  
*Very interesting study. Have we been doing things wrong for decades?*
2. Townley TA. Medical work in developing countries: how to approach a global health experience. *Pediatr Ann* 2011;40:376-380.  
*A very timely review article. There is great interest in global health.*
3. Deepak M. Kamat and Philip R. Fischer (eds). *Textbook of Global Child Health*, First Edition, American Academy of Pediatrics, 2011.  
*A very comprehensive book that covers a wide array of topics pertaining to global health, and travel and geographic medicine. A must-have selection for your library.*
4. McMichael AJ. Globalization, climate change and human health. *N Engl J Med* 2013;368:1335-1343.  
*A concise review on the topic.*
5. Jani IV, Peter TF. How point-of-care testing could drive innovation in global health. *N Engl J Med* 2013;368:2319-2324.  
*Some of you may be involved in research and treatment programs in countries with limited resources. This is an excellent "editorial" that discusses how POC testing may be revolutionizing how we can provide care in these environments. A must read.*

## **High-Altitude Illness**

1. Yaron M, Waldman N, Niermeyer S et al. The diagnosis of acute mountain sickness in preverbal children. *Arch Pediatr Adolesc Med* 1998;152:683-687.  
*Children are not more susceptible to altitude sickness.*
2. Bloch J, Duplain H, Rimoldi SF et al. Prevalence and time course of acute mountain sickness in older children and adolescents after rapid ascent to 3450 meters. *Pediatrics* 2009;123:1-5.  
*Healthy nonacclimatized children and adolescent can tolerate well high altitudes [up to 3450 meters].*
3. Rexhaj E, Garcin S, Rimoldi SF et al. Reproducibility of acute mountain sickness in children and adults: A prospective study. *Pediatrics* 2011;127:e1445-e1448.

*A very interesting study. A must read.*

4. Duster MC, Derlet MN. High-altitude illness in children. *Pediatr Ann* 2009;38:218-223.  
*A concise review of the topic.*
5. Ritchie ND, Baggott AV, Todd WTA. Acetazolamide for the prevention of acute mountain sickness-a systematic review and meta-analysis. *J Travel Med* 2012;19:298-307. See editorial: Basnyat B. Acclimatizing with acetazolamide. *J Travel Med* 2012;19:281-283.  
*Very good analysis. Confirms that lower doses are as effective as higher doses.*
6. Hackett PH, Roach RC. High-altitude illness. *N Engl J Med* 2001;345:107-114.  
*An excellent review.*
7. Bärtsch P, Swenson ER. Acute high-altitude illnesses. *N Engl J Med* 2013;368:2294-2304.  
*Another nice review.*
8. Zafren K. Prevention of high altitude illness. *Travel Med Infect Dis* 2014;12:29-39.  
*Good sections on non-pharmacologic and non-recommended methods of preventing AMS.*

## **Hygiene**

1. Rosa G, Clasen T. Estimating the scope of household water treatment in low- and medium-income countries. *Am J Trop Med Hyg* 2010;82:289-300.  
*Household treatment of water to improve water quality and prevent disease is widely practiced in many high-risk countries. The practice is widespread in the Western Pacific and less so in Eastern Mediterranean and African countries. Boiling water is the most common method used.*
2. Rosa G, Miller L, Clasen T. Microbiological effectiveness of disinfecting water by boiling in rural Guatemala. *Am J Trop Med Hyg* 2010;82:473-477.  
*Great article. While boiling water improves the microbiological quality of water, boiled and stored drinking water is not always free of fecal contamination.*

## **Immunizations**

1. Greenwood CS, Greenwood NP, Fischer PR. Immunization issues in pediatric travelers. *Expert Rev Vaccines* 2008;7:651-661.  
*Good review on vaccine issues for pediatric travelers.*

2. Rahier JF, Moutschen M, Van Gompel A et al. Vaccinations in patients with immune-mediated inflammatory diseases. *Rheumatol* 2010;49:1815-1827. *Practitioners are frequently asked to provide pre-travel recommendations for high-risk patients on immunosuppressive agents. This is a good review for patients with autoimmune disorders.*
3. Kaltenböck A, Dubischar-Kastner K, Schuller E et al. Immunogenicity and safety of IXIARO<sup>®</sup> (IC51) in a phase II study in healthy Indian children between 1 and 3 years of age. *Vaccine* 2010;28:834-839. *The Ixiaro JEV appears to be safe and immunogenic in young children.*
4. Duggan ST, Plosker GL. Japanese encephalitis vaccine (inactivated, absorbed) [IXIARO<sup>®</sup>]. *Drugs* 2009;69:115-122. *Good summary on the new JEV vaccine.*
5. Centers for Disease Control. Update on Japanese encephalitis vaccine for children-United States, May 2011. *MMWR* 2011;60:664-665. *Information on dosing for young children; and availability of vaccine abroad.*
6. Shin S, Desai SN, Sah BK, Clemens JD. Oral vaccines against cholera. *Clin Infect Dis* 2011;52:1343-1349. *A nice review.*
7. Centers for Disease Control and Prevention (CDC). Transmission of yellow fever vaccine virus through breast feeding – Brazil, 2009. *MMWR* 2010;59:130-132. *Vaccination of a lactating mother may pose a risk to infant.*
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9. Rongkavilit C. Immunization for pediatric international travelers. *Pediatr Ann* 2011;40:346-350. *A succinct review of the topic.*
10. Jentes ES, Pomeroy G, Gershman MD et al. The revised global yellow fever risk map and recommendations for vaccination, 2010: consensus of the informal WHO Working Group on Geographic Risk for Yellow Fever. *Lancet Infect Dis* 2011;11:622-631.

*Yellow fever vaccination recommendations have changed this past year. This is a thorough discussion of the rationale and consensus.*

11. Klein NP, Reisinger KS, Johnston W et al. Safety and immunogenicity of a novel quadrivalent meningococcal CRM-conjugate vaccine given concomitantly with routine vaccinations in infants. *Pediatr Infect Dis J* 2012;31:74-71.  
*MenACWY-CRM was found to be immunogenic in young infants. Substantial immunity was achieved after 3 doses given at 2, 4, and 6 months of age.*
12. Thomas RE, Lorenzetti DL, Spragins W et al. The safety of yellow fever vaccine 17D or 17DD in children, pregnant women, HIV+ individuals, and older persons: systematic review. *Am J Trop Med Hyg* 2012;86:359-372.  
*This systematic review shows that serious adverse events are exceedingly rare in infants and children receiving yellow fever vaccines.*
13. Warrell MJ. Current rabies vaccines and prophylaxis schedules: preventing rabies before and after exposure. *Travel Med Infect Dis* 2012;10:1-15.  
*Excellent review. Everything you wanted to know about rabies vaccines and preventive strategies against rabies.*
14. Wahid R, Simon R, Zafar SJ et al. Live oral typhoid vaccine Ty21a induces cross-reactive humoral immune responses against *Salmonella enterica* serovar Paratyphi A and *S. Paratyphi B* in humans. *Clin Vaccine Immunol* 2012;19:825-834.  
*We frequently tell travelers that the oral typhoid vaccine may confer cross-protection against paratyphoid. This is the recent research in support.*
15. Pakkanen SH, Kantele JM, Kantele A. Cross-reactive gut-directed immune response against *Salmonella enterica* serovar Paratyphi A and B in typhoid fever and after oral Ty21a typhoid vaccination. *Vaccine* 2012;30:6047-6053.  
*We frequently tell travelers that the oral typhoid vaccine may confer cross-protection against paratyphoid. This is the recent research in support.*
16. Raczniak GA, Bulkow L, Bruce MG et al. Long-term immunogenicity of hepatitis A vaccine in Alaska 17 years after initial childhood series. *J Infect Dis* 2013;207:493-496.  
*Study shows that hepatitis A antibodies are present up to 17 years after childhood immunization.*
17. Advisory Committee Statement Committee to Advise on Tropical Medicine and Travel (CATMAT). Statement for travelers and yellow fever. *Canada Comm Dis Rep* 2013;39:ACS-2.  
*Good source of current information on yellow fever vaccination.*

18. Grabenstein JD. What the world's religions teach, applied to vaccines and immune globulins. *Vaccine* 2013;31:2011-2023.  
*An excellent review. This is a must-read.*
19. van den Bijllaardt W, Siers HM, Timmerman-Kok C et al. Seroprotection after hepatitis A vaccination in patients with drug-induced immunosuppression. *J Travel Med* 2013, epub ahead of print.  
*Don't wait for the last moment to vaccinate against hepatitis A. In the immunosuppressive host, it appears to be less protective.*
20. Rubin LG, Levin MJ, Ljungman P et al. 2013 IDSA clinical practice guideline for vaccination of the immunocompromised host. *Clin Infect Dis* 2013. Epub December 4, 2013.  
*A must-have resource if you are seeing travelers who happen to be immunocompromised.*
21. Lafond KE, Englund JA, Tam JS, Bresee JS. Overview of influenza vaccines in children. *J Pediatr Infect Dis Soc* 2013;2:368-378.  
*New influenza vaccines appeared in the market this year. This is a good review.*

## **Injury Prevention**

1. Committee on Injury, Violence, and Poison Prevention, American Academy of Pediatrics. Child passenger safety. *Pediatrics* 2011;127:e1050-e1066.  
*Technical report on child passenger safety from the AAP. Specific recommendations on car seat use. In addition, there is a section pertaining to safety of children on commercial airlines.*
2. Bahari M, Prunty N, Molloy EJ. Parent's attitudes towards infant safety during air travel. *Arch Dis Child* 2011;96:701.  
*Will parents pay for safety? Interesting survey results from Ireland. I wonder if the results would be different in other countries.*

## **Insect Bite Prevention**

1. Goodyear LI, Croft AM, Frances SP et al. Expert review of the evidence base for arthropod bite avoidance. *J Travel Med* 2010;17:182-192.  
*Good summary of the existing data for the prevention of arthropod bites.*
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*A good discussion of the various types of insect repellents.*



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*Permethrin + DEET are highly effective in preventing mosquito bites, and is frequently recommended by us. This is a core study in which the recommendation is based.*
4. Goodyer L, Song J. Mosquito bite-avoidance attitudes and behaviors in travelers at risk of malaria. *J Travel Med* 2013; epub ahead of print.  
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### **International Adoption-Related Problems**

1. Sweet K, Sutherland W, Ehresmann K, Lynfield R. Hepatitis A infection in recent international adoptees and their contacts in Minnesota, 2007-2009. *Pediatrics* 2011;128:e333-e338.  
*Along with pertussis, hepatitis A infection has been associated with contact with international adoptees. This article summarizes the experience in Minnesota.*
2. Staat MA, Rice M, Donauer S et al. Intestinal parasite screening in internationally adopted children: importance of multiple stool specimens. *Pediatrics* 2011; 128:e613-e622.  
*Why do we always ask for multiple stool specimens when looking for intestinal parasites? This paper demonstrates why.*

### **Malaria**

1. Faucher J-F, Binder R, Missinou MA et al. Efficacy of atovaquone/proguanil for malaria prophylaxis in children and its effect on the immunogenicity of live oral typhoid and cholera vaccines. *Clin Infect Dis* 2002;35:1147-1154  
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2. Kochar DK, Tanwar GS, Khatri PC et al. Clinical features of children hospitalized with malaria-a study from Bikaner, Northwest India. *Am J Trop Med Hyg* 2010;83:981-989.  
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3. Stauffer WM, Cartwright CP, Olson DA et al. Diagnostic performance of rapid diagnostic tests versus blood smears for malaria in US clinical practice. *Clin Infect Dis* 2009;49:908-913.  
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4. d'Acromont V, Malila A, Swai N et al. Withholding antimalarials in febrile children who have a negative result for a rapid diagnostic test. *Clin Infect Dis* 2010;51:506-511.  
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*Not all malaria is preventable, even after taking appropriate chemoprophylaxis. While most cases of malaria present within the first 30 days after return, many present later.*
6. Bardajf A, Siguaque B, Sanz S et al. Impact of malaria at the end of pregnancy on infant mortality and morbidity. *J Infect Dis* 2011;203:691-699.  
*Malaria is an important cause of infant mortality, morbidity and disability. A must read for all practitioners that are involved in global health.*
7. Douglas NM, Nosten F, Ashley EA et al. *Plasmodium vivax* recurrence following falciparum and mixed species malaria: risk factors and effect of antimalarial kinetics. *Clin Infect Dis* 2011;52:612-620.  
*Very interesting article. No reason for people to have only one species of malaria at a time. This happens to have implications on the prevention and management of malaria among refugees, immigrants and travelers.*
8. Tan KR, Magill AJ, Parise ME, Arguin PM. Doxycycline for malaria chemoprophylaxis and treatment: report from the CDC Expert Meeting on Malaria Chemoprophylaxis. *Am J Trop Med Hyg* 2011;84:517-531.  
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10. Kantele A, Jokiranta TS. Review of cases with the emerging fifth human malaria parasite, *Plasmodium knowlesi*. *Clin Infect Dis* 2011;52:1356-1362.  
*A nice concise review.*

11. Hickey PW, Cape KE, Masouka P et al. A local, regional, and national assessment of pediatric malaria in the United States. *J Travel Med* 2011;18:153-160.  
*Important review defining the current shortcomings of our malaria prevention strategies.*
12. Venturini E, Chiappini E, Mannelli F et al. Malaria prophylaxis in African and Asiatic children traveling to their parents' home country: a Florentine Study. *J Travel Med* 2011;18:161-164.  
*High-risk VFR children need our attention. Malaria is preventable.*
13. Hagmann S, Schlagenhauf P. Prevention of imported pediatric malaria – travel medicine misses the bull's eye. *J Travel Med* 2011;18:151-152.  
*A must-read editorial.*
14. Bulterys PL, Chao A, Dalai SC et al. Placental malaria and mother-to-child transmission of human immunodeficiency virus-1 in rural Rwanda. *Am J Trop Med Hyg* 2011;85:202-206.  
*Interesting finding. Placental malaria appears to be associated with early infant HIV infection. Another reason to prevent/treat malaria in mothers.*
15. Huynh BT, Fievet N, Gbaguidi G et al. Influence of the timing of malaria infection during pregnancy on birth weight and on maternal anemia in Benin. *Am J Trop Med Hyg* 2011;85:214-220.  
*Malaria is not good for the mother or the baby. Anemia and low birth weight are common problems. Preventing malaria during pregnancy is key.*
16. Poespoprodjo JR, Fobia W, Kenangalem E et al. Highly effective therapy for maternal malaria associated with a lower risk of vertical transmission. *J Infect Dis* 2011;204:1613-1619.  
*Congenital malaria is responsible for infant morbidity. Artemisinin-combination therapy reduces the vertical transmission of malaria. Good read.*
17. Schlagenhauf P, Adamcova M, Regep L et al. Use of mefloquine in children—a review of dosage, pharmacokinetics and tolerability data. *Malaria J* 2011;10:292.  
*Mefloquine can still be a useful antimalarial agent in children. This is a good review.*
18. Taylor SM, van Eijk AM, Hand CC et al. Quantification of the burden and consequences of pregnancy-associated malaria in the Democratic Republic of the Congo. *J Infect Dis* 2011;204:1762-1771.  
*Pregnancy-associated malaria is a serious problem in DRC.*

19. The RTS, S Clinical Trials Partnership. First results of phase 3 trial of RTS,S/AS01 malaria vaccine in African children. *N Engl J Med* 2011;365:1863-1875.  
*A must read study. The prevention of malaria through a vaccine may have arrived.*
20. Senn N, Rarau P, Manong D et al. Rapid diagnostic test-based management of malaria: an effectiveness study in Papua New Guinean infants with *Plasmodium falciparum* and *Plasmodium vivax* malaria. *Clin Infect Dis* 2012;54:644-651.  
*This study demonstrates the utility of RDTs in the diagnosis and treatment of infants with malaria in high endemic region.*
21. Steinhardt L, Magill AJ, Arguin PM. Review: malaria chemoprophylaxis for travelers to Latin America. *Am J Trop Med Hyg* 2011;85:1015-1024.  
*Important review on the topic. A must read.*
22. Wilson ML. Malaria rapid diagnostic tests. *Clin Infect Dis* 2012;54:1637-1641.  
*Good comprehensive review on the topic.*
23. Nayyar GML, Breman JG, Newton PN, Herrington J. Poor-quality antimalarial drugs in southeast Asia and sub-Saharan Africa. *Lancet Infect Dis* 2012;12: 488-496.  
*Most travel medicine specialists recommend that travelers do not purchase antimalarial medications while traveling in developing countries. This papers shows why.*
24. John GK, Douglas NM, von Seidlein L et al. Primaquine radical cure of *Plasmodium vivax*: a critical review of the literature. *Malaria J* 2012;11:280.  
*Everything you wanted to know about primaquine for terminal prophylaxis.*
25. The RTS,S Clinical Trials Partnership. A phase 3 trial of RTS,S/AS01 malaria vaccine in African infants. *N Engl J Med* 2012;367:2284-2295.  
*See No. 19 above as well. A malaria vaccine demonstrated protection against clinical and severe malaria in young infants.*
26. Maltha J, Gillet P, Heutmekers M et al. Self-diagnosis of malaria by travelers and expatriates: assessment of malaria rapid diagnostic tests available on the internet. *PLoS One* 2013;8:e53102.  
*Reliability of RDTs may not be as optimal as desired for routine use.*
27. Adachi K, Coleman MS, Khan N et al. Economics of malaria prevention in US travelers to West Africa. *Clin Infect Dis* 2013; epub print October 9, 2013.  
*Malaria prophylaxis is medically-beneficial; and cost-effective too. Perhaps, healthcare payers need to pay for it.*

28. Leshem E, Meltzer E, Stienlauf S et al. Effectiveness of short prophylactic course of atovaquone-proguanil in travelers to sub-Saharan Africa. *J Travel Med* 2014;21:82-85.

*Is this the future dosing for atovaquone-proguanil? If you prescribe this agent, you must read this article.*

### **Parasitic Infections**

1. Keiser J, Utzinger J. Food-borne trematodiasis. *Clin Microbiol Rev* 2009;22:466-483.

*Nice comprehensive review.*

4. Feldmeier H, Keyzers A. Tungiasis—a Janus-faced parasitic skin disease. *Travel Med Infect Dis* 2013;11:357-365.

*Everything you want to know about tungiasis. A must read.*

### **Pharmacology**

1. Strom BL, Schinnar R, Apter AJ et al. Absence of cross-reactivity between sulfonamide antibiotics and sulfonamide nonantibiotics. *N Engl J Med* 2003;349:1628-1635.

*Common question: can we give acetazolamide to a traveler with a history of hypersensitivity to trimethoprim-sulfamethoxazole?*

### **Pre-Travel Evaluation and Counseling**

1. Stauffer W, Christenson JC, Fischer PR. Preparing children for international travel. *Travel Med Infect Dis* 2008;6:101-113.

*Good review article on pre-travel risk-assessment, vaccines, and education.*

2. Committee Paediatrics Committee, Canadian Paediatric Society. Air travel and children's health issues. *Paediatr Child Health* 2007;12:45-50.

*Should young infants travel? Should children with certain medical conditions delay travel? An excellent review that addresses these issues.*

3. Hendel-Paterson B, Swanson SJ. Pediatric travelers visiting friends and relatives (VFR) abroad: illnesses, barriers and pre-travel recommendations. *Travel Med Infect Dis* 2011;9:192-203.

*The focus of this review article is the pediatric VFR. This is always useful information.*

4. Neumann K. Family travel: an overview. *Travel Med Infect Dis* 2006;4:202-217.

*A very comprehensive review. Among topics discussed: avoiding diarrhea, use of infant car seat restraints during air travel, and waterfront safety.*

5. LaRocque RC, Rao SR, Ansdell V et al. Global TravEpiNet: A national consortium of clinics providing care to international travelers-analysis of demographic characteristics, travel destinations, and pretravel healthcare of high-risk US international travelers, 2009-2011. *Clin Infect Dis* 2012;54:455-462.  
*National consortium of 18 US clinics describe the epidemiology of travelers visiting high-risk regions of the world.*
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*The experience in Greece is similar to that of other countries. Very few seek pre-travel services before departure.*
7. Rossi IA, Genton B. The reliability of pre-travel history to decide on appropriate counseling and vaccinations: a prospective study. *J Travel Med* 2012;19:284-288.  
Read editorial at: Zimmer R. The pre-travel visit should start with a "risk conversation". *J Travel Med* 2012; 19:277-280.  
*Risk assessment is key for every pre-travel visit.*
8. Caillet-Gossot S, Laporte R, Noël G et al. Family compliance with counseling for children traveling to the tropics. *J Travel Med* 2013;20:171-176.  
*Nice prospective study assessing compliance to travel recommendations.*
9. Hagmann S, LaRocque RC, Rao SR et al. Pre-travel health preparation of pediatric international travelers: analysis from the Global TravEpiNet Consortium. *J Pediatr Infect Dis Soc* 2013;2:327-334.  
*Our colleagues provide an important view of the challenges associated with the pediatric traveler.*  
[See editorial in same journal: Omer SB, Orenstein WA. Vaccine refusal among pediatric travelers. *J Pediatr Infect Dis Soc* 2013;2:335-336.]
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*Study demonstrates that practitioners who have an ISTM or ASTMH certificate are more knowledgeable about travel vaccines and recommendations.*
11. Starr M. Paediatric travel medicine: vaccines and medications. *Br J Clin Pharmacol* 2012;75:1422-1432.  
*Nice comprehensive review.*

## Refugees and Immigrants

1. Chaves NJ, Gibney KB, Leder K et al. Screening practices for infectious diseases among Burmese refugees in Australia. *Emerg Infect Dis* 2009;15:1769-1772.  
*If you care for Burmese refugees, this is a must-read article.*
2. Barnett ED, Weld LH, McCarthy AE et al. Spectrum of illness in international migrants seen at GeoSentinel clinics in 1997-2009, Part 1: US-bound migrants evaluated by comprehensive protocol-based health assessment. *Clin Infect Dis* 2013;56:913-924.  
*Must-read article for clinicians caring for refugees and immigrants.*
3. McCarthy AE, Weld LH, Barnett ED et al. Spectrum of illness in international migrants seen at GeoSentinel clinics in 1997-2009, Part 2: Migrants resettled internationally and evaluated for specific health concerns. *Clin Infect Dis* 2013;56:925-933.  
*Must-read article for clinicians caring for refugees and immigrants.*

## Respiratory Infections

1. Waitumbi JN, Kuypers J, Anyona SB et al. Short report: outpatient upper respiratory tract viral infections in children with malaria symptoms in western Kenya. *Am J Trop Med Hyg* 2010;83:1010-1013.  
*Influenza A and other viral respiratory pathogens are common in regions with high-endemicity of malaria. Not all febrile illnesses in children are caused by malaria.*

## Travel-Related Medical Problems (Including Post-Travel)

1. Newman-Klee C, D'Acromont V, Newman CJ et al. Incidence and types of illness when traveling to the tropics: a prospective controlled study of children and their parents. *Am J Trop Med Hyg* 2007;77:764-769.  
*Comprehensive description of travel-related illnesses observed in pediatric travelers; with a comparison to adults.*
2. Hagmann S, Neugebauer R, Schwartz E et al. Illness in children after international travel: analysis from the GeoSentinel Surveillance Network. *Pediatrics* 2010;125:e1072-e1080.  
*One of the few papers that exists describing the epidemiology of travel-related illnesses in children; largest number of pediatric travelers described so far.*
3. van Rijn SF, Driessen G, Overbosch D et al. Travel-related morbidity in children: a prospective observational study. *J Travel Med* 2012;19:144-149.

*Skin ailments and abdominal problems are common among pediatric travelers. Read all about it.*

4. Herbingler KH, Drerup L, Alberer M et al. Spectrum of imported infectious diseases among children and adolescents returning from the tropics and subtropics. J Travel Med 2012;19:150-157.  
*Younger travelers are more likely to acquire an infectious diseases while traveling.*
5. Hunziker T, Berger C, Staubli G et al. Profile of travel-associated illness in children, Zürich, Switzerland. J Travel Med 2012;19:158-162.  
*Diarrhea, respiratory tract ailments and febrile illnesses are frequent causes for emergency care among children returning from travel.*
6. Naudin J, Blondé R, Alberti C et al. Aetiology and epidemiology of fever in children presenting to the emergency department of a French paediatric tertiary care centre after international travel. Arch Dis Child 2012;97:107-111.  
*While malaria is an important cause of fever in the returning traveler, cosmopolitan infections are more common.*
12. Flores-Figueroa J, Okhuysen PC, von Sonnenburg F et al. Patterns of illness in travelers visiting Mexico and Central America: The GeoSentinel experience. Clin Infect Dis 2011;53:523-531.  
*Even if not pediatric-specific, very important epidemiologic information is provided within this publication.*
7. Lortholary O, Charlier C, Lebeaux D et al. Fungal infections in immunocompromised travellers. Clin Infect Dis 2013;56:861-869.  
*Good succinct review.*
8. Fox TG, Manaloor JJ, Christenson JC. Travel-related infections in children. Pediatr Clin N Am 2013;60:507-527.  
*Nice, simple review*
9. Leder K, Torresi J, Libman MD et al. GeoSentinel surveillance of illness in returned travelers, 2007-2011. Ann Intern Med 2013;158:456-468.  
*As stated by authors, data collected from this surveillance may assist in preparing more efficient pretravel educational strategies.*
10. Matteelli A, Schlagenhauf P, Carvalho ACC et al. Travel-associated sexually transmitted infections: an observational cross-sectional study of the GeoSentinel surveillance database. Lancet Infect Dis 2013;13:2-5-213.  
*A very important health care problem if caring for adolescents.*



11. Sommet J, Missud F, Holvoet L et al. Morbidity among child travellers with sickle-cell disease visiting tropical areas: an observational study in a French tertiary care centre. *Arch Dis Child* 2013;98:533-536.  
*Travel to tropical areas can be high-risk for patients with sickle cell anemia.*
12. Peterson DC, Martin-Gill C, Guyette FX et al. Outcomes of medical emergencies on commercial airline flights. *N Engl J Med* 2013;368:2075-2083.  
*While the focus of this article is not pediatric-related, it is still a very important and revealing article. An interesting read.*
13. Meltzer E, Stienlauf S, Leshem E et al. A large outbreak of *Salmonella* paratyphi A infection among Israeli travelers to Nepal. *Clin Infect Dis* 2013, epub November 28, 2013.  
*Careful where you eat.*
14. Halbert J, Shingadia D, Zuckerman JN. Fever in the returning child traveler: approach to diagnosis and management. *Arch Dis Child*. Published online, March 25, 2014. Doi:10.1136/archdischild-2012-303196.  
*Nice, easy-reading review. Several illustrative cases.*

### **Venomous Animals**

1. Junghanss T, Bodio M. Medically important venomous animals: biology, prevention, first aid, and clinical management. *Clin Infect Dis* 2006;43:1309-1317.  
*A good review on the topic.*
2. Casale TB, Burks AW. Hymenoptera-sting hypersensitivity. *N Engl J Med* 2014;370:1432-1439.  
*Comprehensive review of the topic.*

### **VFR Traveler (Pediatric)**

1. Valerio L, Roure S, Sabrià M et al. Epidemiologic and biogeographic analysis of 542 VFR traveling children in Catalonia (Spain). A rising new population with special needs. *J Travel Med* 2011;18:304-309.  
*Not much is written about the pediatric VFR traveler. This article from Catalonia provides some very useful observations.*
2. Hendel-Paterson B, Swanson SJ. Pediatric travelers visiting friends and relatives (VFR) abroad: illnesses, barriers and pre-travel recommendations. *Travel Med Infect Dis* 2011;9:192-203.

*An excellent pediatric-specific VFR article.*

3. Han P, Yanni E, Jentes ES et al. Health challenges of young travelers visiting friends and relatives compared with those traveling for other purposes. *Pediatr Infect Dis J* 2012; 31:915-919.

*Another excellent paper from Boston. Should we train healthcare providers to travel advice to parents of VFR children?*