Bradley A. Connor Inaugurated as President; Prativa Pandey is chosen President-elect

Three New Counselors Elected

Bradley Connor, MD (USA) was inaugurated as the seventh president of ISTM at the organization’s May meeting in New York. (Brad’s bio and mission statements appeared in the previous issue (March/April 2003) of NewsShare and are available on the ISTM website. Written copies of NewsShare are also available from the ISTM office.)

Prativa Pandey, MD (Nepal) was chosen president-elect in the recently held election. She will be inaugurated as the Society’s eighth president at CISTM9, in 2005, in Lisbon Portugal, when Brad ends his term.

In the same election, three new counselors were chosen: Peter Leggat (Australia), Kevin Kain (Canada) and Eli Schwartz (Israel). Kevin and Eli will serve four-year terms. Peter will serve a two-year term. Generally, only two counselors are chosen, but a third was necessary to complete Prativa’s term, as she now rises from counselor to president-elect. Peter received the third most ballots.

This election of Prativa marks several milestones in the history of the ISTM. Prativa will be the first woman, the first person from outside Europe/North America, and the first person from Asia to serve as chief executive officer of the Society. Also, the new counselors further widen the geographical representation of the executive board to Australia, Canada, Israel, and the United Kingdom,

“I am sure that Prativa will be an active and dynamic President, especially in bringing the voice of those members outside Europe and North America to our Society,” said outgoing president Louis Loutan (Switzerland).

Prativa is the Medical Director of the CIWEC Clinic Travel Medicine Center in Kathmandu, Nepal, a clinic that is well known internationally for excellence in travel medicine, providing clinical practice, research and training of residents. The patient population at the Clinic comes from all over the world.

Prativa is board certified in internal medicine in the United States. She practiced internal medicine for 10 years in Boston where she was associated with Beth Israel Hospital and served as a clinical instructor of medicine at the Harvard University School of Medicine. She returned to Nepal in 1993 and joined the CIWEC Clinic. Her experience in designing and carrying out research in a clinic setting will help steer the priorities of the ISTM.

She has served a 3-month volunteer season at the Himalayan Rescue Association’s high altitude clinic near the base of Mt. Everest, is active in several Nepalese medical organizations, and is currently the President of the Nepal chapter of the America Nepal Medical Foundation. The Foundation strives to improve medical education in Nepal.

At ISTM, Prativa was elected a counselor in 2001. She was a member of the committee that prepared the first certificate of knowledge examination and helped make the CIWEC Clinic one of the main destination travel medicine centers linked to the GeoSentinel program.

Message from Prativa

I am very honored to be entrusted with the responsibility of being president-elect of this prestigious Society. I never dreamt that I would be saying this but here I am asking for your goodwill and support to move the organization forward.

The ever changing issues in travel medicine make it imperative that the ISTM continues to educate travel medicine practitioners and the traveling public while encouraging research in areas that will form the scientific basis of our specialty in the future. As travel medicine/migration medicine grows in different parts of the world,
The New Counselors

The new counselors also have had long and distinguished careers in travel medicine.

Peter Leggat, MD, PhD, hails from Queensland, Australia. He did postgraduate studies at universities in four countries and in several disciplines including public health, occupational health (PhD), aerospace medicine, travel medicine, aeromedical evacuation, and medical education. He joined James Cook University (Australia) in 1992 and is currently associate professor in the School of Public Health and Tropical Medicine. Presently he holds a Fulbright Scholarship for academic exchange at several institutions in the USA, including the Civil Aerospace Medical Institute in Oklahoma City, is visiting professor at the University of the Witwatersrand, South Africa (in public health), and is visiting professor at the Prince of Songkla University, Thailand. He is a Lieutenant Colonel in the Australian Defense Health Service Reserve. He has served in executive positions in many international and Australian organizations including the World Safety Organization (director-general) and the Australasian College of Tropical Medicine (president). He is the recipient of more than 20 major national and international awards.

Peter’s research in travel medicine has focused on general practice, travel insurance claims, emergency assistance, and clinical trials of antimalarial agents. He is a reviewer and a member of editorial boards for numerous prestigious journals, has contributed more than 300 papers to professional journals and national and international conferences, written chapters for many textbooks, and given numerous lectures.

Peter has served on several ISTM committees and sub-committees, including the editorial board of the Journal of Travel Medicine. He is keen to promote and support worthwhile regional and global initiatives in travel medicine, while continuing to contribute to his present ISTM activities.

Kevin Kain MD, FRCP, is the director of the Center for Travel and Tropical Medicine at the Toronto General Hospital, is professor of medicine at the University of Toronto, and holds a Canada Research Chair in Molecular Parasitology. He has had post-doctoral research training as a Senior Research Associate in the Department of Immunology at the Walter Reed Army Institute of Research in Washington DC. Kevin has worked extensively in the tropics and sub-tropics, including New Guinea, Madagascar, Uganda, Laos, Thailand, and the Amazon basin. He has served as chairperson to Health Canada’s Committee to Advise on Tropical Medicine and Travel and to the Scientific Advisory Board of the Malaria Foundation, been a board member of the Programme for Appropriate Technology, and been a consultant to many organizations including the Red Cross, Canadian Blood Services, and Centers for Disease Control and Prevention.

Kevin’s research efforts are focused on developing a translational research program that characterizes host-parasite interactions responsible for major global health threats such as malaria and HIV. One of his primary goals has been to attempt to elucidate the molecular basis for adverse outcomes in malaria and to translate this knowledge into novel therapeutic interventions.

His specific interests in travel medicine and his efforts within ISTM include the development of molecular, diagnostic, and epidemiologic tools for the surveillance of emerging diseases, especially those that threaten travelers. His efforts are also focused on global equity, knowledge sharing and education. He places great importance in the transfer of appropriate technologies and the training of research scientists in the developing world, enabling and empowering them to address their own problems in a sustainable fashion. Kevin is the author or co-author of numerous articles and chapters in major textbooks.

Eli Schwartz, MD, DTMH, is the Director of the Center for Geographic Medicine at Sheba Medical Center in Tel-Hashomer, Israel. He is the current president of the Israeli Society of Parasitology and Tropical Diseases and is a senior lecturer in the internal medicine division of Tel-Aviv University. He has worked extensively in developing countries including Cambodia Refugee camps (1980), CIWEC Clinic, Nepal (1987-88), and Ethiopia (1991 and 1999). As director of the Israeli malaria team, he has served as a consultant for the governments of Zanjan (1994), for the United Nations peace keeping troops in Angola (1997), and in Senegal (2001). He is a graduate of the London School of Tropical Medicine and Hygiene. His research interests have led to more than 70 publications in the medical literature. He has a deep commitment to education and expanding public awareness in the field of travel medicine.

Eli has been involved in tropical and travel medicine for more than twenty years and has been an active member of ISTM since its founding. Within ISTM he has served on several scientific committees of biennial conferences, the editorial board of the Journal of Travel Medicine, and currently is the chair of the Professional Education and Training Committee. As chair he hopes to help members by furthering the development of educational resources. One of his goals is to organize ISTM-sponsored training centers to give members hands-on experience in practicing pre-travel, post-travel and migrant medicine. He is also the site director for GeoSentinel. He has been active at European and Asian travel society meetings. In October 2002, he chaired the scientific committee of the Asian-Pacific Travel Health conference in Shanghai.
CISTM 8 is a Spectacular Success on Broadway

The recently concluded 8th biennial conference of the International Society of Medicine, held at the mammoth New York Marriott Marquis Hotel on Broadway in Times Square – which, say New Yorkers, is the epicenter of the world, if not the universe – made the Great White Way sparkle even brighter than usual, if, indeed, that is possible.

The gala opening reception, “Lights on Broadway/Tastes of New York” was held on the eve of the Conference in the bi-level 8th and 9th Floor Broadway Lounge and Promenade. These immense rooms, part of a forty-story atrium, protrude out over Times Square, offering a panoramic view of the bright lights, a fitting and unforgettable backdrop to the evening’s festivities. The food, plentiful and delicious, represented the various ethnic neighborhoods of the Big Apple. Music was provided by not one but two groups, New York’s own Jon Benitez Jazz Quintet offering a mellow jazz backdrop on the lower floor and the band, “Off the Wall” on the upper level playing a variety of music for the dancing pleasure of the assembled multitude.

The opening ceremony of the Conference, Act I so to speak, began with a talented singer, from the Broadway show Mama Mia, presenting a rendition of well known Broadway show tunes about the City - perhaps the first medical meeting ever to be inaugurated in this “show biz” fashion. This was followed by a recorded address by former U.S. President Bill Clinton praising ISTM for its accomplishments and mission, welcomes from the deputy mayor of New York and from ISTM’s outgoing and incoming presidents, a stirring speech about travel and hope by one of our members, and a keynote address “International Health Regulations in the Era of Outbreaks and Epidemics” by Isabelle Nuttal, M.D. Dr. Nuttal is the World Health Organization’s Medical Officer for International Travel.

But as dazzling as Act I was, it was merely the curtain raiser for a memorably spectacular, sophisticated, state-of-the-art medical meeting. CISTM8 was expertly staged, produced, directed, and choreographed by Bradley Connor (USA), the meeting chairman and incoming president, and by Hans Dieter Nothdurft (Germany) and David Freedman (USA), the scientific co-chairmen. The co-chairmen

Update on the ISTM Certificate of Knowledge Exam

The Certificate of Knowledge Examination was held on May 7, prior to the opening of the CISTM8, at the Marriott Marquis Hotel in New York City. It was an extremely successful undertaking, with 423 people from 28 countries taking the exam. More than 300 of the examinees were ISTM members. About 80% of examinees remained for the conference.

In June, the passing score will be decided followed by the scanning of the examination answer sheets by Knapp & Associates International, Inc. (KA&I). The passing score will be determined after reviewing each examination question, evaluating the difficulty of each question and judging how a professional with basic competence would perform on the question. These judgments will be analyzed statistically to determine the passing score. Questions that appear to be flawed will be discussed by a group from the Examination Committee to determine if they should be deleted from scoring entirely or if credit should be given for more than one answer.

Examination results will be mailed out approximately six to eight weeks after the administration of the exam. The examination is designed only to distinguish those who have the basic level of professional knowledge from those who do not. Therefore, those who pass the examination will be informed only that they have successfully completed the Certificate of Knowledge process. They will not be notified of the actual score.

Those who fail the examination will be notified of their score and the minimum score required for passing. They will also receive a diagnostic report showing their performance in each content area so that they may review any weak areas and retake the exam if they wish at a later date. There is no “curve” to the grading of the exam; in other words, once a passing score is set it could be that everyone who took the exam passed.

Candidates who pass the examination will receive a Certificate in Travel Health™ (CTH) suitable for framing, and will be allowed to represent that they have received such a certificate and can use the CTH designation.

I’d like to thank all of the examinees for their participation and hope it was a positive experience for all. I would also like to thank the Examination Committee and the Executive Board for their continued support and dedication to the cause.

Phyllis Kozarsky, MD for the Examination Committee
Letters to the Editor

Dear Editor:

ISTM has grown over the years with high quality development of the biennial meeting, its publications and electronic networking. Its growth and quality have been due in large measure to a dedicated group of experts in the field who founded and have led it up to this time.

Necessarily, every organization must develop new leadership if it is to continue its growth and development. But there has been relatively little introduction of new leaders since our inception. In some instances, individuals have served simultaneously as officers and as chairmen of key committees, essentially giving them control of this Society.

I suggest we should broaden our leadership. In most organizations, chairmanship of key committees is a stepping stone to becoming an officer. It is generally inappropriate for individuals to have dual positions of authority, as is the case in ISTM. There are many members capable of filling these roles, and they should be encouraged. There should be term limits for officers and committee chairmen. I would also like to see a limit on the number of sessions that someone could chair at our meetings. Ideally, it would be one, but certainly no more than two. This would apply to our regular sessions, not to satellite symposia that are under the control of their sponsors. New faces should be seen at the podiums.

These goals could be met by voluntary action of our current leaders. If necessary, change could be made by amendments to the bylaws.

Institutional memory is very important and change can progress at a reasonable rate. New leaders would be well advised to seek guidance from their predecessors. Our founders did a very good job in creating this organization. We should have an advisory committee of former officers so we could continue to benefit from their experience and suggestions.

With one business meeting every two years, limited space in our newsletter for editorial comment, and a list serve which forbids chat room discussion of non-clinical issues, it is difficult to get full democratic expression of opinion by our members. I hope these comments and suggestions will be a stimulus for others to respond and to get more involved in Society activities.

Leonard C. Marcus, V.M.D., M.D.
Travelers’ Health and Immunization Services
Newton, MA, USA

Response to letter, from Charlie Ericsson continued on page 5

New Feature on the ISTM Website: Educational Resources

The Education and Training Committee has established a website on the ISTM webpage listing educational centers (schools and organized courses) and other facilities that offer training and/or advanced education in pre-travel, post-travel and migration health worldwide. The list includes the country where the course is given, main subject, duration, and the name and address of the contact person. Some courses offer a diploma in travel medicine. Three facilities offer training in migration health. Presently the list includes about 20 courses in 11 countries. This is only the beginning. Please send additional listings to my email address.

Eli Schwartz, MD, DTMH, Chairman, Education and Training Committee
Email: elischwa@post.tau.ac.il

Letters to the Editor

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Response to letter, from Charlie Ericsson continued on page 5
To the Editor:

In his letter to the editor, Dr Leonard Marcus raises important issues for the leadership of ISTM to consider. His comments relate mostly to the desire to broaden representation and infuse our society with new perspectives and opportunities.

The Executive Board could not agree more. The problem, frankly, has been lack of persons willing to step forward and work. For instance, none of us could realistically expect to be solicited to fill the role of committee chair without prior experience on that committee. Volunteering to work on a committee is simple. Working toward a position of responsibility requires mostly willingness to devote time and energy to the tasks at hand.

For the purpose of fostering fresh ideas and perspectives, term limits for committee chairs already exist. Of course, a major concern of the Executive Board has been losing someone with technical skills who cannot easily be replaced. The role of committee chair is not honorary. Regrettably, the work of some committees is done by the chair alone despite cajoling and pleas for help from committee members, who seem more infatuated by a title than willing to work.

The suggestion to spread around leaders of symposia is a very good suggestion. The critique is well taken. The scientific program committee will need to comment on how many assigned chairs of symposia renge at the 11th hour forcing them to rely on the same willing but familiar faces.

To insure institutional memory, we already have a Long Range Planning Committee chaired by the immediate past president and composed of the new and past presidents. Operationally, the Executive Board already asks that each committee chair attend Executive Board meetings in an effort to improve worldwide representation and to coordinate initiatives that often cross defined lines of authority.

The concept of a chat room has been discussed. To my knowledge no final decision has been made. The hope is that a chat room would not be simply a gripe session, but a means to foster constructive criticism and new ideas, which the Executive Board, in my experience, fully welcomes. I would urge that those interested in having a chat room step forward to help with its design and rules for behavior. I suspect someone new will need to be responsible for sifting through the chaff in order to summarize the wheat that might be presented to a committee or the Executive Board for action. While I cannot speak for the Electronics Committee, I suspect their plates are much too full for a chat room to be a success without additional and serious volunteers to help.

In the spirit of more open discussion the Executive Board at its last meeting in NY asked committee chairs to supply regular updates of their work and initiatives for dissemination in NewsShare. I believe this demonstrates a sincere willingness to come to grips with some of the important criticism that Dr. Marcus rightfully raises. Clearly one business meeting every other year is not an adequate forum for member participation.

I suggest two major approaches by our members:

- Contact either the chair of the committee you wish to serve on, or contact our secretariat at istm@istm.org who can direct you to the correct person. I guarantee you the committee chairs will kiss the feet of anyone actually willing to work. However, expect to be kicked off a committee if you are not willing to work.

- Feel free to write to the counselor(s) of your choice or to the president about your concerns, but first consider writing to committee chairs about your ideas so that the committee can consider, debate and bring forward a finished product for consideration by the Executive Board.

Continued on page 6
Bottom line: please do not be passive or simply critical. No organization is perfect and a volunteer organization is dependent greatly on the willingness of its members to devote time and energy without compensation. Get involved. You will be welcomed with open arms.

Sincerely,
Charles D. Ericsson, MD
Past President, ISTM
Chair, Publications Committee

Dear Editor:

There is a need within ISTM for a multi-faceted program that provides a listing and information on diverse types of opportunities in travel medicine. The descriptions should clearly specify targeted participants, as some programs are only appropriate for physicians whereas others are appropriate for nurses as well as physicians. Some examples follow:

1. Formally organized educational courses – for example, the Travel Medicine course in Seattle, regional courses relevant to Travel Medicine, and any ISTM-sponsored courses.
2. Training programs – for example, the Gorgas Course in Peru. List hospitals and clinics where travel medicine practitioners can learn about local diseases.
3. Exchange possibilities – travel clinics around the world where practitioners can visit, exchange ideas and experiences, and send travelers for evaluation while in those areas, arranged individually.
4. Listing of additional organizations that may have opportunities appropriate to Travel Medicine – for example, Health Volunteer Overseas and the Physician Volunteer Fair held by the Massachusetts Medical Society.
5. Listing of grants, funding, and awards applicable to the field of travel medicine.
6. Listing of job opportunities – a separate list from the programs above (in a separate section of the web site or in NewsShare).

The program should be available on the web site, through both NewsShare and a section on Education and Training. The program should also be available through NewsShare in print form.

The program should be updated regularly and continuously.

The listings should be validated with supporting information.

I would be happy to serve on the Committee on Education and Training, and help coordinate this initiative.

Lin H. Chen, M.D. Boston, USA

Editor’s note: Lin has agreed to work closely with Eli Schwartz, Chair, Professional Education and Training Committee. Please see the Calendar in NewsShare and the new listing, Educational Resources, on the ISTM website. These areas will be expanded in the future.
Calendar: Travel Medicine Conferences, Courses, Educational Travel

(Note: This calendar is a service for the travel medicine community. The listings come from reputable individuals within the community but are not checked or necessarily endorsed by ISTM.)

Conferences

**Aug 9-13**


**Nov 13-14**


**Nov 17-22**

Havana Travel & Tropical Medicine Course 2003. Havana, Cuba. November 17-22, 2003. Organizer: Instituto de Medicina Tropical “Pedro Kouri” (IPK), Havana, in collaboration with Medical Services for the Tropics (MST), Maastricht, Netherlands. For physicians -- (especially those working in general practice, occupational, aviation, tropical and public health medicine), pharmacists, microbiologists, nurses, and other health scientists. Lectures by leading specialists (Cuban and others) and visits to hospitals, research laboratories, and community health centers. Lab training available on request in bacteriology and parasitology, and extra module, public health. Official language: English. Medical education credits applied for from Dutch accrediting authorities. Course Coordinator: Peter de Beer, MD; PO Box 1660;6201 BR Maastricht, Netherlands. Email: mstropics@mail.com and pedebeer@hvision.nl. Web address of MST: www.tropenkliek.nl. IPK information: Director, Training programs, Dr. Nereyda Cantelar. See Web address IPK: www.ipk.kl.de.

**Feb 8-11**

Africa-European Conference on Travel Medicine (AECTM), Cape Town, South Africa. February 8 - 11, 2004. Organized jointly by International Society of Travel Medicine (ISTM) and South African Society of Travel Medicine (SATSUMA). Although this is the “Africa European” Conference, we welcome colleagues from ALL over the world to attend. Leading experts from all parts of the world will present the very latest in travel and migration medicine. Many interactive sessions. Special workshops on travelers in Africa, visitors of game parks, medical services for long-term expatriates etc. Contact: Ken Brown, African Conferences and Incentives (CAI) e-mail: aectm@acitravel.co.za Phone: (++27) (11) 475 2902. Fax: (++27) (11) 475 0366 Web address: www.istm.org; www.sastm.org.za

**Feb 13-17**


Opportunities in Travel Medicine

University of Minnesota, Minneapolis, Minnesota, USA

We are starting a new city-wide international pathway for residents. There are 5 residency programs currently involved (pediatrics, medicine, and pediatrics/medicine) with over 300 residents in the 5 programs. Within a few years we hope to initiate a course accredited by the American Society of Tropical Medicine and Hygiene.

We have clinical sites both internationally and locally. Locally, two travel clinics are participating as well as a Somali clinic, TB clinic, HIV clinics, Center for International Health Clinic, the Center for Victims of Torture and others. We would be willing to consider having residents or staff from other programs visit and/or do electives at our facilities. For more information, visit our new web site at www.medpeds.umn.edu/travel, go under International Resident pathway and click on Introduction.

There are also over 30 lectures and 30 cases on the web site.

William Stauffer, MD
Minneapolis, MN, USA

I will be retiring from the U.S. Army next summer. My career has allowed me to do a great deal of travel medicine both from the military deployment and civilian travel perspectives. I am interested in transitioning these skills to the civilian community, preferably in Europe for a few (5-10) years. I would like to determine if there are opportunities for such employment. Curriculum vitae available.

Stephen Craig MD, USA
SCCRIAG393@earthlink.net

Continued on page 8
I would like to recruit a nurse practitioner or physician’s assistance to work with me at the Fresno International Travel Medical Center. We have been selected as a new, in development, GeoSentinel site. Fresno is a culturally diverse agricultural community in the center of California. We will take advantage of that fact in recruiting information on returning travelers and immigrants to feed into the GeoSentinel database. The ideal candidate has a passion for travel as well as a background in internal medicine, cardiology and travel medicine/infectious diseases. Most important is a willingness to learn and assist in the care of a busy private internal medicine practice.

Michael W. Lynch, MD, FACP
Fresno, California, USA
lynch@npimmg.com

--- Opportunities, cont. from page 7 ---

Calendar continued

### April 25-28


### March 4-7


### March 6-11


**4th European Conference on Travel Medicine (ECTM4).** Rome. March 29-31, 2004. Travel Medicine and Safety. Sponsored in part by WHO and CDC, Atlanta. An interdisciplinary approach to travel medicine, preceded and followed by meetings held in close collaboration with leading societies in dermatology, occupational health, sports medicine, pediatrics, psychology and psychiatry, environmental health, cardiology, and other subjects. These meetings will be held in Venice and in other Italian cities of cultural interest. Abstracts accepted from those wishing to take part. Send abstracts to: wpasini@rimini.com by November 30, 2003. Other information: Veneziacongressi, Accademia 1056, 30123 Venice. Tel +390415228400, fax +390415238995, email info@veneziacongressi.com.

**9th Conference of the International Society of Travel Medicine (CISTM).** Lisbon. May 1-5, 2005. Biennial meeting of the International Society of Travel Medicine. Detailed information about the meeting will be available in the next issue.

Courses/Educational Travel

### February 2-2 April 2

**The Gorgas Course in Clinical Tropical Medicine.** Lima, and the Andes and Amazon regions, Peru. Course scheduled for February 2-April 2, 2004 (waiting list only) and January 31-April 1, 2005. Sponsored by the University of Alabama and the Tropical Medicine Institute UPCH, Lima, Peru. Includes lectures, case conferences, diagnostic laboratory procedures, and bedside teaching in a 36-bed tropical medicine unit. Official language: English. International Faculty. 380 contact hours. Contact: David O. Freedman, M.D. Gorgas Memorial Institute, University of Alabama at Birmingham, 530 Third Avenue South, BB&B 203, Birmingham, AL 35294. Fax: 205-934-5600. Email: info@gorgas.org. Web address: www.gorgas.org.

**Tropical Medicine Expeditions to East Africa: 9th Uganda Expedition.** Scheduled for February 15-27, 2004, and 11th Kenya Expedition scheduled for March 7-19, 2004. In collaboration with Kay Schaefer, MD, PhD, MSc, DTM&H, of Cologne, Germany and the Universities of Nairobi and Makerere. Two-week expeditions designed for up to 8 health care professionals (doctors, public health experts, scientists, pharmacists, nurses). Participants visit hospitals and health projects in urban and rural areas. Includes individual bedside teaching, laboratory work, and lectures in epidemiology, diagnosis, treatment, and prevention and control of important tropical infectious diseases. Also update on travel medicine and visit to the “Flying Doctors.” 50 contact hours. Official language: English. Medical education credits applied from German accrediting authorities. Contact: Dr. Kay Schaefer, Tel/Fax: +49-221-3404905, E-Mail: contact@tropmedex.com. Web address: www.tropmedex.com.
the ISTM will continue to expand. Challenges for the Society will lie in integrating and embracing travel medicine practitioners from all parts of the world, despite language barriers and regional differences. The ISTM should also strive to play a key role in defining standards of practice in travel medicine, and to serve as a resource for those who are new or expanding their interest in this field. I hope to bring to the ISTM presidency a mix of western medical training and practice with 10 years experience in the world’s busiest destination travel medicine clinic.

Travel has become an essential part of human life. Only by travel will we understand each other in this global village. Travel and travel medicine will have its ups and downs but it is a specialty that will continue to grow. We need to continue to embrace and encourage new practitioners and support the ones who are already in the field. There is a strong need to educate our medical colleagues about our role in keeping people healthy while they travel. I hope that we all learn from each other, share ideas, and build bridges toward a safer and friendlier world.