



HEALTH

GUIDELINES

& REQUIREMENTS

Nepal: Development and Social Change

TABLE OF CONTENTS

BRIEF SUMMARY	2
GENERAL INFORMATION	2
PREVENTION OF FOOD- AND WATER-BORNE ILLNESSES	3
OTHER ILLNESSES	5
IMMUNIZATIONS FOR NEPAL	7

BRIEF SUMMARY

Prior to Departure:

- Schedule an appointment with your primary care doctor or a travel medicine clinic at least 8 weeks prior to departure.
- Take an adequate quantity of all your necessary and prescription medications to last your entire stay.
- Ensure you are up to date on all routine vaccines. An annual flu shot and covid vaccine is recommended if available.
- Discuss your specific travel itinerary (including various in-country locations you plan to visit) with your physician and discuss:
 - Recommended vaccines including but not limited to: rabies, typhoid, TDap booster.
 - Prevention and treatment of traveler's diarrhea.
 - Malaria prophylaxis (if conducting ISP in a lower altitude or malaria endemic area).

While you are in Nepal:

- Take measures to prevent traveler's diarrhea.
- Take preventive measures to avoid mosquito bites.
- Do not travel alone and maintain an awareness of your surroundings at all times.
- Remember motor vehicle accidents remain the biggest risk for international travelers. Ride in the back seat, wear seatbelts, and do not be afraid to ask your driver to slow down.
- Use condoms if you are sexually active.
- While traveling abroad, minimize high-risk behaviors.
- Notify your Academic Director if you become ill.

GENERAL INFORMATION

To protect your health in Nepal, you need certain pre-departure immunizations followed by reasonable health precautions while in the country. The following health guidelines and requirements are based on years of experience and the current recommendations from the US Centers for Disease Control and Prevention. It is designed to inform you of health concerns that may be present in Nepal especially as you venture to smaller cities off the usual tourist track or spend time in small villages and rural areas for extended periods. Although no information sheet can address every conceivable contingency, the following health guidelines and requirements are an attempt to provide you with a standard, which if followed, should optimize good health during your stay abroad.

You may find that local customs and practice, as well as varying US physicians' approaches, at times conflict with these guidelines. It is essential that you review these health guidelines and requirements with your physician, to discuss individual issues such as pre-existing medical problems and allergies to specific drugs. Any further questions or concerns should be directed to the US Centers for Disease Control and Prevention (CDC) (www.cdc.gov/travel) or to your own physician.



SIT Study Abroad programs may venture off the usual tourist track. Pay careful attention to health and safety guidelines.

PREVENTION OF INSECT-BORNE ILLNESSES

Insect precautions are recommended for this program. Since Kathmandu and the Himalayas are above malaria-endemic altitudes, chemo-prophylaxis is unnecessary there. For your five-day stay in the Chitwan Terai district, insect precautions are also recommended. However, if you plan to venture to lower altitudes especially during the ISP period or after the program you must protect yourself. Inquire as to specific precautions for the areas concerned. The CDC guidelines suggest that prevention of malaria is possible if you follow personal protective measures carefully as described below and take one of the following antimalarial drugs (listed alphabetically) as directed by your health care provider: atovaquone/proguanil (Malarone), doxycycline, mefloquine, or tafenoquine (Arakoda). **The selection should be discussed with your physician or health care provider.** For full protection you should take your first pill before any travel to lower altitudes and continue for four weeks after your return to non-malarial regions. If, in spite of adherence to these preventive measures, you develop symptoms of malaria, prompt medical attention lessens the severity of the illness.

The following measures should be followed, especially after dark, **to prevent mosquito bites** that may transmit malaria and other insect-borne illnesses:

- Wear long-sleeved shirts and long pants.
- Use mosquito netting over bedding.
- Use insect repellents on bedding and netting. (e.g. permethrin – commonly known as Permanone).
- Use insect repellents on skin and clothing. DEET-containing products, e.g., Off, Off Deep Woods, Jungle Juice, Muskol. These products may be used on skin in concentration up to 30–40% and on clothing in higher concentration. Permethrin (Permanone) may also be used on clothing.

SIT Study Abroad suggests that if you have further questions, do not hesitate to contact the Malarial Division of CDC at 888-232-3228 for recorded information or visit the CDC website:

<http://www.cdc.gov/malaria/travelers/index.html>

Dengue

This is a viral disease and is transmitted by mosquitoes which bite primarily in the daytime. It occurs in urban as well as rural areas including areas surrounding Kathmandu. There is no licensed vaccine against it, but personal protective measures against mosquito bites are effective in prevention. The disease causes considerable discomfort (fever, body aching), but is self-limited in adults.

Japanese Encephalitis

Japanese Encephalitis is a viral infection affecting the brain, which occurs in rural tropical areas, primarily during the rainy season (May-October), and is passed by mosquitoes mainly during the evening hours. Significant risk exists in the Terai and rural areas of the Kathmandu valley. A vaccine, which is helpful in prevention, is currently licensed in the United States. Vaccinations should be considered if during the rainy season you are planning to do your independent study project (ISP) in a rural area, or if you plan to travel to a rural or agricultural area for a significant time before or after the program. In addition all travelers should follow personal protective measures to avoid mosquito bites (see under malaria section).

Rickettsial Infections: Typhus

Typhus is a bacterial disease that is transmitted by the bite of fleas, mites (chiggers), lice, or ticks. Symptoms may vary depending on the type of infectious typhus and its severity but are typically headache, fever, chills, and rash. Risk exists in Nepal including Kathmandu and Chitwan National Park. There is currently no vaccine to prevent typhus. Insect precautions are recommended.

PREVENTION OF FOOD- AND WATER-BORNE ILLNESSES

Diarrhea-producing infections

“Traveler’s diarrhea” is the most common form of diarrhea in Nepal. This is a self-limited diarrhea lasting from a few to several days, characterized by watery, non-bloody bowel movements. Traveler’s diarrhea usually requires no treatment other than fluid replacement including ORS (World Health Organization’s Oral Rehydration Solution which

comes in package form) or other home-made solutions such as: 1 teaspoon salt, 1/2 teaspoon baking soda, and 2–3 tablespoons sugar or honey in 1 liter of **clean** water; another option is carbonated soda diluted by one half. Antidiarrheals such as Imodium or Lomotil may be used short-term in some circumstances. Pepto Bismol in large amounts and certain antibiotics (doxycycline, sulfa-TMP, ciprofloxacin) can prevent or attenuate the infection. Antibiotics may be indicated for more severe cases of traveler's diarrhea.

More protracted and disabling diarrheal illnesses may be due to giardiasis and amoebic dysentery (caused by parasites) and bacillary dysentery (caused by bacteria), including cholera and typhoid. These infections (as well as "traveler's diarrhea") are caused by contaminated food and water. Therefore, the best way to avoid such infections is to follow certain do's and don'ts:

DO WASH your hands scrupulously with non-contaminated water and soap before eating and snacking.

DO DRINK

- Bottled or canned beverages (water, soda, soft drinks) from a trusted source (ensure caps are sealed).
- Hot coffee, tea.
- Water that reached a rolling boil for at least one minute at sea level (longer at higher altitudes).

DON'T DRINK

- Tap water, even in ice; don't risk using it for brushing your teeth either.
- Tap water in larger cities is often safe, but the water in rural areas is probably not, so be sure to check with a reliable source before using, and if in any doubt, take all the recommended precautions.

DO USE

- Commercial iodide or tinctured liquid iodine to treat water, **ONLY** if bottled water (from a trusted source) is not available and boiling water is not possible. Chlorine in various forms is less reliable than iodine. These provide substantial protection when added to tap water.

DO EAT

- Cooked vegetables, fruits with thick covering (citrus, bananas, and melons); and well-washed raw fruits and vegetables.
- Meat or fish that is thoroughly cooked (pork and lamb should be very well done).
- Pasteurized dairy products.



DON'T EAT

- Unwashed or unpeeled raw fruits and vegetables.
- Fruits that do not have a thick, disposable outside covering.
- Rare or raw meat, fish or shellfish.
- Dairy products from small, independent vendors without pasteurizing facilities, including food of any kind that has been left out in the sun, especially custards, creams, and mayonnaise.
- Raw (unpasteurized) milk or milk products.

There may be times when refusing an offer of food or beverage, even a drink with ice or avoiding a salad, will be considered rude. You must decide for yourself, but polite refusals, thought out in advance, are often handy.

Discuss these alternatives with your Academic Director(s).

Hepatitis A

Hepatitis A is a highly contagious virus that causes liver inflammation. It is most commonly spread through contaminated food and water. Most Americans have not previously been exposed to the hepatitis A virus and are at risk of contracting the disease during travel to areas where the disease is more prevalent. It is prudent for all travelers to this

region to be immunized. A very effective vaccine is available and should be administered 2–3 weeks prior to travel.

Typhoid Fever

Typhoid is an infection caused by a particular species of the salmonella bacterium. It is spread by contaminated food and water. Symptoms include fever, severe toxicity, rash, and in about half the cases, bloody diarrhea. Untreated, there is a 30% mortality rate. Vaccines are 60–70 % effective in prevention. One vaccine involves a single injection, with immunity lasting 2 years. A second one is administered orally every other day for 4 doses, and lasts 5 years. Antibiotic resistance has been developing, but treatment of the disease with certain well-known antibiotics is usually effective. As with all diarrheal illnesses, careful dietary discretion continues to be the main line of defense.

Cholera

Cholera is an acute intestinal infection caused by a bacterium (*vibrio cholerae*). It is usually mild and self-limited but can be associated with severe, profuse watery diarrhea requiring medical attention for fluid replacement. *The guidelines for preventing diarrheal infections apply to preventing cholera as well including strict food and beverage precautions and hygiene measures.* The Cholera vaccine is now available in the US and should be administered at least 10 days prior to travel.

A note on swimming: Avoid swimming or wading in fresh water. Many parasites and bacteria live in water and can cause serious illness. Properly chlorinated pools and salt water are generally safe from infectious diseases.

OTHER ILLNESSES

Rabies

Rabies is a viral disease almost always caused by animal bites (especially dogs, monkeys, bats). Risk occurs in Nepal and, therefore, you should take measures to prevent it. Given the serious danger posed by rabies as a uniformly fatal disease, follow these important guidelines:

- Consider pre-exposure immunization (if available).

- Avoid bites from all animals and especially avoid handling or feeding puppies, kittens, monkeys or other animals. They can have rabies before it is obvious.
- If you have been bitten or have had direct contact with the saliva of a suspected rabid animal, immediately wash the affected area with a soap solution and running water thoroughly to neutralize and to rinse out the virus. ***Then proceed immediately for post-exposure treatment.***
- If possible, the animal should be captured and kept under cautious surveillance until the diagnosis and therapy are completed. If capture is not possible, a clear description of the animal and the circumstance of contact should be carefully recorded.



Tuberculosis

Tuberculosis (TB) is a bacterial disease spread by airborne droplets from a person with untreated pulmonary TB or by ingestion of TB-contaminated unpasteurized milk products. Transmission is more likely in conditions of crowding and poverty. A TB skin test can indicate prior exposure to tuberculosis and is recommended prior to travel (unless already known to be positive). A repeat test is also recommended after returning to the US even if the pre-departure test was negative.

Hepatitis B

Hepatitis B is a serious and often chronic viral infection of the liver. Since this type of hepatitis is most often acquired from contact with infected blood, or sexual contact (as with HIV), or from skin-to-skin contact of mutual open cuts and sores, appropriate precautions to avoid these types of exposure are necessary. This includes avoiding

tattooing, ear/body piercing, and cuddling children with sores and draining insect bites. A series of three immunizing injections is recommended. This series should be initiated as early as possible so that at least two doses are taken prior to departure. This will provide partial protection. The third shot should be taken five months after the second dose, and may be given after returning home to achieve full, long-lasting immunity. An accelerated schedule can also be used as an alternative.

Coronavirus COVID-19

COVID-19 is a newly identified respiratory virus that has spread through direct contact with an infected person as well as through respiratory droplets produced when an infected person coughs or sneezes. The World Health Organization (WHO) has declared this disease a global pandemic for the worldwide spread of a new disease for which most people do not have immunity. Symptoms of COVID-19 may appear **2-14 days after exposure** and may include fever, cough, and shortness of breath. The illness can also cause muscle or body aches, sore throat, vomiting and diarrhea. Reported illnesses have ranged from mild symptoms to severe illness and death for confirmed coronavirus disease (COVID-19) cases. There is currently a vaccine to protect against the coronavirus disease 2019 (COVID-19). CDC states that a person is considered fully vaccinated two weeks after receiving the last recommended dose of vaccine.

The best way to protect yourself is to obtain the COVID 19 vaccine (if available) and to continue to follow COVID 19 precautions!

- **Clean your hands often**-wash your hands carefully and frequently with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing. If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry. Avoid touching your eyes, nose, and mouth with unwashed hands.
- **Cover your mouth and nose** with a tissue when you cough or sneeze or use the inside of your elbow. Throw used tissues in the trash.
- **Clean AND disinfect** frequently touched surfaces daily. This includes tables, doorknobs,

light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.

- **Avoid close contact. Practice physical distancing**-stay at least 6 feet apart. Put distance between yourself and other people if possible.
- **Inform your Academic Director immediately** if you have a pulmonary disease or any respiratory illness; have a fever or feeling sick; if you have been in close contact with a person known to have COVID-19; and/or have recently traveled from an area with widespread or ongoing community spread of COVID-19.
- **Contact ISOS and a medical doctor**, if you develop symptoms.
- **Avoid travel if you are sick or have a fever.** Your Academic Director will make appropriate accommodations for students who are ill.
- **Wear a facemask**, especially when you are around other people (e.g., sharing a room or vehicle) and before you enter a healthcare provider's office. Masks must have two or more layers of washable, breathable fabric. Do not wear masks intended for healthcare workers (e.g. N95 respirators) or face shields alone (evaluation of the effectiveness of face shields is ongoing but is unknown at this time)
- **Most importantly, stay connected:** especially during your Independent Study Project or Internship. Communicate daily with your SIT Academic Director. SIT continues to update its contingency and evacuation plans to ensure that we are prepared to take appropriate action in the event of a change in circumstances.

SIT recommends that students check the country's consular website for up-to-date information on entry and exit requirements.

Air Quality

Students with a history of asthma or allergies should be warned that air pollution in the Kathmandu Valley is steadily worsening, resulting in an increasing incidence of respiratory illness. Asthmatics should carry emergency medicines for severe asthma attacks.



Altitude

Even healthy, athletic individuals may become ill at altitudes over 10,000 ft. Common symptoms are unbearable headache and severe shortness of breath out of proportion to the mild fatigue most people experience while becoming acclimatized. Ascending gradually and resting during the first 12-24 hours can minimize the risk of altitude sickness. You may also wish to consult your physician about obtaining some acetazolamide (Diamox). Note that this is contra-indicated for those allergic to sulfa drugs and that this possibility should be discussed with your physician. Also note that alcohol and sedatives may have greater effect at high altitudes.

Any symptoms of severe altitude illness should result in *immediate* descent. Individuals with chronic heart and lung disorders, such as asthma, and any other preexisting medical condition including sickle cell or diabetes should consult a physician before traveling to high altitudes. If your physician has given approval for high altitude travel, do let us know about the condition so that we can advise the Academic Director(s) and our local doctors accordingly. Bring full medical notes with you to help local doctors in case of need.

Avian Influenza H5N1

The Avian Influenza H5N1, a particularly virulent strain of influenza virus, is excreted in the droppings of infected birds, including poultry. This virus has been confirmed in Kathmandu, Nepal in birds and poultry. The last human case was reported in May 2019. Currently, the risk to travelers is minimal, but it is important to avoid poultry farms and live animal

markets. Well-cooked chicken is safe to eat. Current influenza vaccines are not protective. The anti-viral medicines Oseltamivir ("Tamiflu"), and Baloxavir are effective.

HIV/AIDS and Blood Supplies

HIV/AIDS is a concern worldwide. The HIV virus is transmitted by way of bodily fluids from an infected person. HIV is spread mainly by having anal or vaginal sex or sharing drug injection equipment with a person who has HIV. AIDS is an acquired immune deficiency that can result in life-threatening infections and is the most advanced stage of the HIV infection. It is the student's responsibility to protect him /herself from acquiring the disease through sexual transmission. Students anticipating even the possibility of sexual activity are strongly urged to bring their own condom supply. Other potential routes of infected blood transmission such as tattooing, body piercing and needle sharing must be strictly avoided.

With regard to blood transfusions, our Academic Directors have identified hospitals, through consultation with the local US embassy, where safe blood is available. In a life-threatening situation, the risks versus benefits of an emergency blood transfusion must be examined carefully and a decision made based on the best information available at the time

IMMUNIZATIONS FOR NEPAL

Immunizations are recommended to protect *your* health and well-being by building up your immune defenses against specific prevalent diseases. Plan ahead at least 8 weeks, since some immunizations require more than one dose for effectiveness. *SIT recommends that you bring a copy of your immunization record with you and insert this document in your passport so that it is easily accessible.*

REQUIRED (for participation in program):

- **COVID 19:** Immunity is provided against COVID 19 disease two weeks after being fully vaccinated.

RECOMMENDED (as a health precaution - consult your physician):

- **MMR (Measles, Mumps, Rubella):** Two (2) doses of live measles vaccine are recommended.
- **Tetanus, Diphtheria, and Pertussis:** The primary child series is recommended. Boosters (Td or Tdap) are effective for 10 years. If you are uncertain when you had your last injection, we recommend that you get another booster.
- **Varicella (chicken pox):** you should have received the vaccine or have documentation of having chicken pox.
- **Japanese Encephalitis:** This is given as a 2-dose series. The second dose should be given at least 1 week before departure. Certain conditions apply-see section on Japanese Encephalitis.
- **Influenza:** Influenza vaccine should be considered for any individual wishing to decrease risk of influenza or non-specific respiratory illness- especially those who are at high risk for complications from influenza including those with asthma, COPD, diabetes, chronic cardiovascular disease and immunocompromised conditions.
- **Typhoid:** This vaccine is strongly urged as a viable protective measure. The vaccine is given either orally or by injection. Discuss the relative merit of each with your doctor.
- **Rabies:** Follow carefully the special instructions in the section on Rabies.
- **Cholera:** This single dose oral vaccine should be given at least 10 days prior to travel to a cholera endemic area.
- **Hepatitis A:** Hepatitis A vaccine, which provides long-term immunity, is recommended. It needs to be given at least 3 weeks prior to departure, with a booster at 6 months to one year.
- **Hepatitis B:** A series of 3 immunization injections is required. See section on Hepatitis B.

With reasonable attention to health and hygiene rules, your stay in Nepal should be a healthy one. Aside from minor ailments due to adjustments to the new food, water and climate, this is the experience of the large majority of SIT Study Abroad students. We do, however, recommend you see your physician upon returning to the US in order to test for any possible lingering infection contracted overseas.

Take good care of yourself!

