



Date 01.10.2018.

## Health Advice for Indonesia

An earthquake of magnitude 7.5 and a subsequent tsunami struck Palu city and Donggala regency of Central Sulawesi province on 28 September. Multiple aftershocks have been reported. There are reports of damage to infrastructure and there is an ongoing risk from further aftershocks.

### Standard of Health Care

Medical facilities may be overwhelmed and might have reduced ability to treat patients. There remains a danger to people in the area from aftershocks, landslides and interruptions to essential services. Temporary shortages of safe food and water and medical supplies may occur. Transportation issues may delay the appropriate treatment of injuries and illnesses. Medical facilities may be overwhelmed and might have reduced ability to treat patients. Disease outbreaks may increase in the coming days. There is an increased risk of diarrhoeal illness from contaminated food and water, and food that has spoiled due to lack of refrigeration. There is an increased risk of Mosquito borne disease.

### Out Patient Care

Selected outpatient clinics in Jakarta and Bali have well trained doctors and are well equipped. Elsewhere, most outpatient care facilities are basic and are therefore not recommended except in an emergency.

## Dental Care

Selected dental facilities in Jakarta and larger cities can provide good basic dental care, such as fillings and drainage of an abscess. Outside of these main urban areas the quality of dental care is generally low.

## Blood Supplies

The blood supply in Indonesia is considered unsafe as the extent of screening is limited and regular donor screening is not performed. If a transfusion is required, evacuation to Singapore or Australia is preferred. In-country transfusions should be limited to life-saving treatment. There is often a shortage of Rh-negative blood; the Indonesian Red Cross has a volunteer service to aid supply.

## Medication Availability

In Jakarta use selected outpatient clinics which stock many -- but not all -- international brands of medication. This reduces the chance of purchasing counterfeit medications sold in Indonesia. Pharmacists may not speak English.

Outside Jakarta, pharmacies stock a more limited range of international medications. Locally produced medications may be offered but these may have quality issues and are not recommended. Supply of medication had been inconsistent at times, and short notice discontinuation of previously available brands or generics is a possibility.

Pharmacies may record passport numbers of foreigners asking for or receiving prescription narcotics. Since brand names vary, know the generic (chemical) names of your medications. It is always advisable to bring an adequate supply of prescription and other medications from your home country. Check the expiration date on all medications.

## Precautions to protect the health of staff

### Vaccinations

Basic vaccinations should all be updated: **Measles, Mumps, Rubella, Hepatitis A and B, Rabies, Tetanus, Polio, Diphtheria, Cholera, Typhoid, and Seasonal Influenza. Yellow fever** vaccination certificate is required for entry for anyone arriving from a country with a risk of yellow fever transmission. **Typhoid** fever is a serious infection caused by a type of salmonella bacteria spread by contaminated food or water. Choosing safe food and water will greatly reduce the risk of developing the disease.

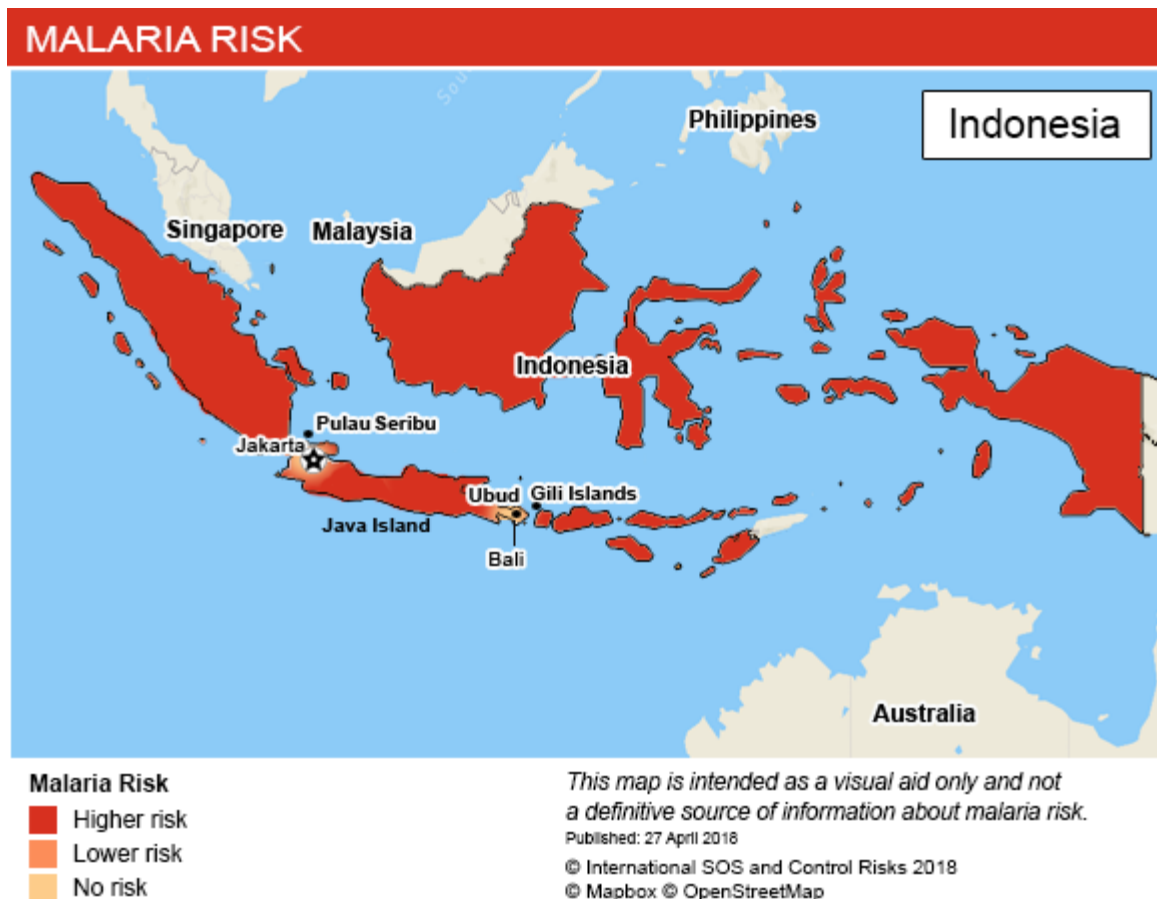
### Malaria

Malaria is transmitted by mosquitoes that usually bite from dusk to dawn. Symptoms can develop as early as six days or as late as several months after exposure. Early malaria symptoms are flu like, such as head/body aches and generally feeling tired and unwell. Untreated, it can cause complications including anaemia, seizures, mental confusion, kidney failure and coma. It can be fatal.

**Malaria is present in most of Indonesia:** whole provinces of Maluku, Maluku Utara, Nusa Tenggara Timur, Papua, and Papua Barat; town of Labuan Bajo and Komodo Islands in the Nusa Tenggara region; rural areas of Kalimantan (Borneo), Nusa Tenggara Barat (includes the island of Lombok), Sulawesi and Sumatra. Low risk of

malaria is present in rural areas of Java including Pangandaran, Sukalumi and Ujung Kulong.

There is no malaria in the cities of Jakarta and Ubud; resort areas of Bali or Java; Gili Islands and the Thousand Islands (Pulau Seribu).



Follow the ABCDEs to minimise malarial risk:

**A:** Awareness - Be **Aware** of the risk, the symptoms and malaria prevention.

**B:** Bite Prevention - Avoid being **Bitten** by mosquitoes, especially between dusk and dawn.

**C:** Chemoprophylaxis - If prescribed for you, use **Chemoprophylaxis** (antimalarial medication) to prevent infection and if infected reduce the risk of severe malaria.

**D:** Diagnosis - Immediately seek **Diagnosis** and treatment if a fever develops one week or more after being in a malarial area (up to one year after departure).

**E:** Emergency - Carry an **Emergency** Standby Treatment (EST) kit if available and recommended (this is the kit which contains malaria treatment).

## Preventing malaria

### Prevent mosquito bites.

**Chemoprophylaxis.** If visiting malarial areas, use a medication to prevent chloroquine-resistant *P. falciparum* malaria. These include:

- Atovaquone plus proguanil (Malarone® and generics)
- Doxycycline (many brands and generics)

**Continue malarial prophylaxis while exposed to malaria. Stopping the medication while still exposed leaves you susceptible again to the dangerous consequences of malaria.**

## Zika

Zika is present in some areas. Pregnant women should not travel to Zika-affected areas. Those who are in affected areas should protect themselves against mosquito bites and sexual transmission. After travel to the affected areas, ongoing precautions against sexual transmission are recommended.

The first locally-transmitted cases were reported in 1977. The disease is considered to be an ongoing risk. A locally-acquired case was detected on Sumatra during a dengue outbreak in early 2015. There have been sporadic cases in travellers since 2013.

## Dengue fever

Dengue fever is present throughout Indonesia, including major cities. Cases peak annually during the rainy season, March through May.

Dengue, or "break-bone" fever, is a viral disease of the tropics and sub-tropics. It is transmitted by the *Aedes aegypti* mosquito that bites during the daytime and is found in and around human habitation. Symptoms include high fever, severe headaches, joint and muscle pain. A rash often follows. The acute illness can last up to ten days, but complete recovery can take two to four weeks.

Occasionally, a potentially fatal form of dengue called severe dengue (previously known as dengue haemorrhagic fever or DHF) occurs. Severe dengue is mostly seen in persons who have been previously infected with dengue - the fatality rate is about 2.5%.

A new dengue vaccine (Dengivax®) has been developed, although its availability is limited. In September 2016, a dengue vaccine was licensed for use in the country. Pre-screening is recommended and only previously dengue infected individuals are vaccinated. Wear long sleeves and long pants and use insect repellents to prevent mosquito bites.

## Water and hygiene

Tap water is unsafe.

- Drink only bottled or boiled water or carbonated drinks.
- Avoid ice, as it may have been made from unsterile water.

Be aware of drink spiking especially in tourist areas. There have been several cases of serious illness and even death caused by the ingestion of alcoholic drinks containing methanol. Symptoms of methanol poisoning can include fatigue, headache, nausea and visual disturbances. If you suspect you have been affected by drink spiking seek medical attention immediately. Consider avoiding drinks made with spirits, especially cocktails and arak, a traditional rice based spirit.

Always **wash your hands** with soap before eating or use an alcohol-based hand sanitizer often.

## Food Risk

Food-borne illness is common. To reduce your risk:

- Food served in larger hotels and well-known restaurants should be safe.
- Busier restaurants may be safer as they are more likely to serve freshly cooked food.
- Always choose food that has been freshly cooked and is served hot.
- Avoid food that has been stored warm – such as in a “bain marie.”
- Avoid raw foods, shellfish, pre-peeled fruit and salad.
- Fruit that you wash and peel yourself is safe.
- Avoid street vendors and market food because the standard of hygiene may be low and food may not be fresh.

## Travel

Long flights (more than 4 hours) increase the risk of deep vein thrombosis (DVT). Avoid dehydration by drinking at least 2dl of beverage / hour and doing some exercises during the flight.

## Other precautions

Basic knowledge of first aid, security measures and stress management is important and good preparation for travel even if with very short notice.

## Insurance

Before travelling you must check that you have a valid insurance coverage for international travel.

For further advice you can contact Staff Health Officer Hannele Haggman

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You can find more information by going to [www.internationalsos.com](http://www.internationalsos.com) and typing the IFRC code **22AMMS000091**