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TITLE: Travel - Not without consequence

In 2017, the International Air Transport Association (IATA) reported that worldwide annual air passenger numbers exceeded four billion for the first time. In 2000, individuals on average flew once every 43 months. By 2017, this figure halved to once every 22 months. Cumulatively, the data reflects a global population on the move.

As our guest editors, Dipti Patel and Hilary Simons point out, global travel has repercussions. Concerns around biosecurity hazards of travel are well reported, with a wide range of threats such as tuberculosis, typhoid and influenza. New threats have emerged in recent years such as SARS and MERS coronaviruses, multi-drug resistant gonococcus and Carbapenem resistant enterobacteriaceae. In 2018 the United Kingdom had imported cases of monkey pox and Europe saw large outbreaks of measles stoking fears of travel-associated transmission during the summer months. Advancements of transport technology has meant that the modern traveller can now travel much greater distances, across different time zones and continents, and to previously remote locations. Addressing the scale and rapidity of global travel presents a significant challenge that requires the development of new biosecurity measures that are cost-effective and timely.

People travel for different reasons and in this themed issue we present a selection of articles that illustrate the changing traveller profiles. Pavli et al⁶ reports how travellers from Greece were increasingly not holidaygoers but business travellers, who often travel for longer durations and frequencies abroad. Many are increasingly travelling to developing countries but it appears with insufficient travel health precautions. Likewise, in the paper by Bhuvan et al⁷, the profile of trekkers visiting Nepal has changed. Previously visitors from high-income countries in the West predominated but increasingly more trekkers come from other parts of the world including China, with differing health needs and behaviours with regards to precautions taken.

Travellers today can access health information from diverse sources, both formal and informal. Squiers et al.⁸ describe how Zika risks and prevention measures were often communicated by the news media. This highlights a possible avenue for pushing out public health messaging for safe travel. However, as we have previously reported⁹ there is also a potential risk of misleading or inaccurate health information being disseminated by mass media that are beyond the control of public health agencies.

Also of note, travel health risks in destination countries are dynamic. In their paper, Jakobson et al¹⁰ report how better sanitation levels and lower Hepatitis A prevalence in several countries mean Hepatitis A vaccination may no longer required for travellers. Consequently, having up-to-date and accurate health intelligence on destination countries is essential in order for health services to prepare for and to deal with the health consequences associated with travel.

As a final thought, the ability (and desire) to travel is increasingly an expectation of those who can afford to travel. However, there are also environmental and climatic consequences that we may uncomfortably choose to ignore. Global travel has a carbon footprint that contributes to global warming and climate change. Most modes of transport generate some form of pollution that have direct health consequences; air pollution from vehicular emissions affects lung health as well as vascular diseases. Stopping travel entirely is unrealistic, but there remains a vital public health need and challenge to alter public behaviour, to advocate for less travel and less polluting modes of travel. Small changes in travel behaviour at the individual level cumulatively may bring considerable public health and planetary health benefits. As was reflected on the agenda at the recent World Economic Forum in Davos, sustainability and the need to tackle climate change remain key global health issues. Our actions are not without consequence.

Andrew Lee, Fiona Sim, Phil Mackie

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