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Summertime Fun in the Sun, and Other Perils

It's a Peak Time for Accidents. Courses, Websites and Other Resources Offer Protection Tips Beyond Bug Spray

By LAURA LANDRO



Ah, summer. Swimming, biking, gardening, hiking, adventure travel—and a rise in injury and illness related to all that fun in the sun.

For me, summer is always a scary season. We have 12 children under 12 in our extended family. And, kids being kids, I worry about the fact that nearly half the kids killed in biking accidents, and about two-thirds of fatal drownings, occur in the summer months. As my husband heads off to golf courses, I think about the recent rise in tick-borne infectious conditions, like Lyme disease, around the U.S. and Europe. I even have difficulty walking past a lawn mower; when I was a kid, a fellow day-camper was killed when the blades of a nearby mower propelled a sharp rock into the back of his neck (my mom was the camp nurse who tended to him).

As the family worrywart, I've taken a course in CPR, and stocked up on first-aid essentials, bug spray and waterproof sunscreen. I've also checked travel-health advisories for an upcoming family trip to France (no major concerns there). For travelers to other parts of the world, such as Africa, Southeast Asia and South America, there is a resurgence in infectious-disease threats ranging from yellow fever and malaria to dengue fever and Japanese encephalitis.

The Red Cross is updating its arsenal of courses to help Americans stay safe with a broader range of outdoor activities. The organization's Wilderness and Remote First Aid course, being offered for the first time this summer, targets the growing numbers of hikers, eco-tourists and adventure vacationers with skills on how to respond to emergencies when they are far from an ER and professional help is delayed.

"People who are not necessarily as healthy or in shape as they should be are accessing the back country and national parks more, and they end up getting injured," says Jeffrey Pellegrino, a Red Cross volunteer adviser who researches fire and emergency services at Kent State University. The course helps participants, among other things, to recognize altitude sickness and heat-related illness, learn how to control bleeding, and make field assessments of head and joint injuries.

Swimming and water sports are some of the most common sources of accidents. The American Academy of Pediatrics (pediatrics.org) last month issued a revised policy on the prevention of drowning for children. Previously, the group took the position that children aren't ready for swimming lessons until after their 4th birthday. Now, it says parents should exercise their judgment on the issue, but use swimming lessons as part of a comprehensive drowning-prevention strategy. That should include installing fencing around pools and in-pool alarms, as well as staying within touching distance of small children when they're in the water.

"Summer is what we call trauma season," says Matthew Denenberg, division chief for pediatrics at Helen DeVos Children's Hospital in Grand Rapids, Mich. The hospital in 2007 treated then 8-year-old Tanner Gentry after he lost part of a leg in a boating accident. Tanner's uncle had been in a personal watercraft pulling him along on an inner tube, when the child slipped off in shallow water to wait for the boat to swing around and pick him up. A neighbor pulling tubers with his own boat failed to spot Tanner and ran over him. His right leg was severed below the knee and his left nearly severed.

The hospital managed to save Tanner's left leg and he wears a prosthetic below the knee on the right leg, which enables him to

play sports, says his mother, Mary Jo Gentry. "I'm not telling anyone to discontinue what you do as families to have fun in the summer," says Ms. Gentry. "But be very aware of your surroundings." Boating-safety courses, including online lessons approved by the U.S. Coast Guard, are advisable. But don't assume others have taken them, warns Ms. Gentry.

Kathleen Cowling, an emergency physician and vice-president of the American College of Emergency Physicians, says families often don't recognize risks at home, such as lawn mower injuries, ladder falls and improper use of gardening chemicals, which can be especially hazardous to kids. And seemingly innocuous injuries, left untreated, can turn into bigger problems—an infected mosquito bite, for instance, can result in cellulitis, a potentially dangerous skin infection. Her group offers summer safety tips at emergencycareforyou.org.

One lesser known risk that's a growing concern for hikers and endurance athletes in summer: hyponatremia, a dangerous condition caused by drinking too much water without replacing lost sodium and other electrolytes. Paul Auerbach, a Stanford University emergency physician and author of the handbook "Medicine for the Outdoors" says a drop in blood sodium levels drop can result in coma and seizures. Salty snacks and sports drinks without a lot of added sugar can help, but Dr. Auerbach advises adding a product that restores electrolytes, such as elete, to some drinking water.

For overseas trips, check the Centers for Disease Control and Prevention's CDC.gov/travel website for advisories and vaccination recommendations. The CDC this month warned of polio outbreak in Tajikistan and possible cases in Uzbekistan, two countries which have been luring adventure travelers in recent years. And since early 2009, the CDC says, a higher number of cases of dengue fever, carried by mosquitoes, have been reported in several regions around the world, including tourist destinations in the Caribbean, Africa, the South Pacific, and South and Central America.

To guard against disease carrying insects anywhere, the CDC recommends using repellents with 30% to 50% DEET; another repellent, Picardin, available in 7% and 15% concentrations, needs to be applied more frequently. Also recommended: permethrin, an insect repellent in spray form that can be applied to clothing, tents, shoes and camping gear and lasts after repeated laundering.

Henry Murray, an infectious disease specialist at New York's Weill Cornell Medical College, says that of particular concern this summer is a continuing rabies problem in Bali and other parts of Southeast Asia. He advises considering pre-exposure vaccinations for those who may travel to areas where they are more likely to encounter animals; the shots can buy time before full rabies vaccinations are needed. People traveling to jungle regions should ask about vaccines such as Japanese encephalitis and yellow fever. And if they return home with any fever, they should be tested for malaria, Dr. Murray says.

While many insurers don't cover overseas medical costs, a number of companies offer travel medical insurance and medical evacuation policies. Travel-medicine clinics can advise on vaccinations and provide medications such as an antibiotic to treat the most common problem, diarrhea, and anti-malaria drugs.

Fran Lessans, a nurse and founder of Passport Health, which runs 170 travel and immunization clinics around the U.S., says her company is seeing more travelers heading to exotic destinations in Africa, the Middle East and Asia. "In many cases, people skate by and don't get anything when they travel to these places," Ms. Lessans says. "But if you are the one that gets sick, does it really matter how many people skated by?"

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