



## MEDICAL INFORMATION

The health and safety of participants is a major concern for the rally organisers. This is why, this year, the medical team placed under the management of Doctor Florence Pommerie, will consist of 50 people. This team will be at your disposal throughout the rally, 24 hours a day, with three principal missions :

- To provide safety and first aid during the race thanks to its resources : 10 4x4s converted for medical purposes, one doctor in attendance in each of the four sweeper trucks, three helicopters with a team of two doctors on board (resuscitator, casualty officer, nurse-anaesthetist) ;
- To deal with all your medical problems at the medical tent located near the Race PC (team under the responsibility of Doctor Christophe Chapon) ;
- To organise your medical repatriation if required.

Despite the size of its human and material resources, the medical team cannot remove all the dangers inherent in a rally such as this. But, while some cannot be foreseen, others can be anticipated and avoided. For this reason, we feel it is necessary to inform you about potential medical risks in the countries crossed by the rally and the precautions to be taken in order to protect yourself against them.

### MALARIA

Caused by a parasite, plasmodium, it is transmitted by mosquito bite; it is a serious condition, sometimes even fatal. The risk, virtually nil in Morocco, is high in Senegal (even though January is not a high risk period) where malaria caused by a particularly resistant parasite is rife. The disease is not immediately apparent and can therefore occur after you have returned from the rally. As there is no vaccine, it is essential to protect yourself. To do this:

- avoid mosquito bites by wearing long sleeves and applying "anti-mosquito products" to any uncovered areas, particularly in the evening ;
- take a prophylactic drug:
  - either Méfloquine (tolerance to which is not always good) : start ten days before leaving to assess tolerance and four weeks on return at 1 table per week ;
  - or a combination of Atovaquone / Proganil frequently recommended today : begin the day before or the first day of exposure to risk and continue seven days after return. In this case the dose is taken daily.

If you are being treated for a chronic condition, beware of interaction between your prescribed medication and anti-malaria drugs.

### YELLOW FEVER

This is a viral infection transmitted by mosquito bites. Frequently very serious (and even fatal) it can now be avoided by vaccination. A vaccination certificate is moreover compulsory in West Africa (international vaccination card).

Valid for ten years, the vaccine is only administered in approved centres and must be carried out at least ten days before departure.

### DENGUE FEVER

This is also transmitted by mosquitoes. There is no vaccine or treatment for this disease which may be serious in its haemorrhagic form. Protection against mosquito bites is the only way of protecting yourself.

### RABIES

This exists in all areas crossed by the Dakar. It is transmitted by being bitten by infected animals or them licking a wound; dogs are not the only carriers. Certain animals which do not normally bite sometimes do so when they have the disease. A vaccine exists but is not worth it, because the risk is minor. It is however recommended to avoid all contact with animals. A vaccination after you have been bitten is also possible.

### CHOLERA

The risk is low, outside epidemics and provided you adhere to basic hygiene rules (oral contamination). During a recent epidemic in Senegal, no tourist or foreigner contracted the disease. An oral vaccine is available.

### HEPATITIS A

A disease rife throughout the whole world, even in the most developed countries, the risk of contamination is dependent on living conditions. The disease is caught orally. There is a vaccine. Some people have already contracted Hepatitis A without knowing it. A dose of antibodies may be taken in order to avoid vaccination, obviously not dangerous, but pointless. Treatment can only be given once symptoms appear.

### LA TURISTA

Most frequently due to viruses, this is caught orally. There is no preventive treatment. The only way to protect yourself is by complying with hygiene rules scrupulously.

### SHIGELLOSES SALMONELLA

These diseases are caught orally. There is a vaccine against typhoid fever (which is a form of salmonella) but not against all bacteria. These diseases can be serious despite the customary treatment which is usually very effective.

### "DIRT HANDS" DISEASES

CHOLERA, HEPATITIS A, TURISTA, SHIGELLOSES SALMONELLA all have one thing in common – they are caught orally, either through water or contaminated food or by touching the mouth after having touched a contaminated item. It is therefore important:

- to wash your hands,
- not to put your hands to your mouth,
- to peel fruit and vegetables and only eat products which have been properly prepared,
- only to drink products in sealed packaging that you open yourself without sharing them (oral contamination).

OTHER INFECTIONS, whether bacterial, viral or parasitic, exist in the countries crossed by the rally. The risk of being infected by any of them is low, or even zero. To protect yourself, we again stress the importance of protecting yourself against insect bites (not only mosquitoes). Always wear shoes, do not bathe in fresh water and avoid contact with animals.

### IN CONCLUSION, you absolutely must:

- protect yourself against malaria,
  - be vaccinated against yellow fever,
  - possibly be vaccinated against Hepatitis A and typhoid,
  - *and of course, do not forget normal vaccinations which must be up to date :*
- Diphtheria, Tetanus, Polio, Hepatitis B.**

***Only your GP is qualified to advise you on the best choice to make.***

### OTHER MEDICAL RISKS

We can only remind you of the frequency of the **AIDS Virus and sexually transmittable diseases** in the various countries crossed and that the rules applicable in your country are obviously equally valid there.

DEHYDRATION, which occurs insidiously, contributes significantly to fatigue and may be responsible for uncomfortable ailments such as renal colic. We lose not only water but also salts through the skin (particularly NaCl or cooking salt). You should therefore:

- check your water supply and top it up whenever possible,
- drink water, but also eat the rations which are given to you in the morning,
- or drink specially prepared products.

A good way of checking : your urine should remain clear.

### WOUNDS AND BURNS

These must be disinfected and covered with a dressing while awaiting the appropriate medical attention. Hence, you should have a minimum first aid kit consisting of:

- a disinfectant,
- a few compresses,
- a bandage,
- plasters,
- and a few anti-diarrhoea pills...

Be aware that this information, which is obviously not designed to worry you, is given to you as a preventive measure so that you can protect yourself effectively and have a good time on the Dakar.

Have a good rally

Doctor Florence POMMERIE  
Medical Director