

CLINIC CARE

Your health is our priority | Issue 3

PERSONAL HYGIENE TIPS

Keeping things clean
for your own health
and for others

EBOLA

The situation is
likely to continue
well into 2015

FATIGUE

Under-rested people
can threaten your
workplace, roadways
and relationships

COMPLIMENTARY COPY
International SOS Clinic Magazine

Kids'
Activities
Inside

INTERNATIONAL SOS ASSISTANCE APP

STAY INFORMED, HEALTHY AND SAFE WHILE TRAVELLING ABROAD

International SOS' Assistance App is an essential tool for business travellers and expatriates. Innovative, intuitive and effective, the Assistance App keeps you informed and gives you peace of mind.

To help you stay healthy and safe while travelling, our app delivers essential information and advice to the palm of your hand. If the unexpected should happen, you will be one tap away from advice and help from experts within our global assistance network.



Use the International SOS Assistance App before and during your next trip:

- 1 Click-to-Call the Assistance Centre closest to your location
- 2 Talk to medical and travel security experts for everyday advice and in an emergency
- 3 Access the latest medical and travel security information on your destination

Available for:



CONTENTS



Fatigue

4



Protect your eyes

6



Hepatitis – Quick Facts

7

It's time to quit!

8



Ebola

10

Get fit, get healthy!

16

Heat at the workplace

18

Keep it healthy and clean!

20

International SOS Clinics: Assisting corporations with their duty of care

22



Kids activities

24

Ebola poster on centre spread!

LETTER FROM THE EDITOR

This year International SOS will celebrate 30 years of pioneering medical and travel security services, stretching across various continents to a diverse client base. Through the years, we have successfully provided our clients with unrivalled service, supported by our invaluable knowledge and expertise in the medical and security fields.

30 YEARS

WORLDWIDE REACH. HUMAN TOUCH.

In this edition of the Clinic Care magazine we strive to offer you interesting, factual information on health topics. Key emphasis is placed on the Ebola virus outbreak that has had a dramatic impact throughout especially Africa and other countries. The article provides more information on the cause of the virus, how it is spread and which preventative measures can be taken. We explore the most common causes of fatigue and how it can be managed more successfully.

Personal hygiene and physical activity are other topics covered in this edition. We also take a look at some facts on Hepatitis and have a special section on eye protection, especially in remote workplaces.

This edition's poster is the 2015 Health Risk Map — a tool towards better understanding medical risks in our market place and will assist you to identify or anticipate possible health threats to yourself, your family or employees. We also have an Ebola pull-out section in the centrespread of the magazine.

As we embark on our 30th year of **WORLDWIDE REACH. HUMAN TOUCH.** we want to thank our clients who have walked this journey with us. Success of this magnitude can only, and will continue to be, achieved through collaboration and collective efforts... caring for humanity.

Lizette Klingenberg
Marketing Manager Africa (EEMEA)



Disclaimer

These articles were developed for educational purposes only. It is not a substitute for professional medical advice. Should you have questions or concerns about any topic described here, please consult your medical professional.



FATIGUE

What is it and why does it matter?

Fatigue is everyone’s problem. Even if you get enough rest, under-rested people can threaten your workplace, roadways and relationships.

If you are constantly tired, weary and sleepy, you may suffer from fatigue. This may result from insufficient sleep, prolonged mental and physical work or extended periods of stress or anxiety.

We differentiate between two types of fatigue:

Acute Fatigue	Chronic Fatigue
Short-term sleep loss or from short periods of heavy physical or mental work.	Constant, severe state of tiredness that is not relieved by rest.
Relieved by rest.	

Fatigue is not just about sleep. Mental or physical exhaustion which prevents your from functioning normally also plays a role, but lack of sleep or quality sleep is the major two causes. Fatigue develops over time and is a message from your body telling you to get rest.

Common symptoms

Physically, the body may signal “I need more rest” by making you feel the following:

- ✦ Tired
- ✦ Sleepy — someone may fall asleep without meaning to (“micro” sleeps)
- ✦ Less hungry
- ✦ Headaches
- ✦ Red watery eyes which become sore
- ✦ Sick more often
- ✦ Uncoordinated actions

Mental and emotional signs

- ✦ Irritable, short-tempered
- ✦ Hard to concentrate, feels easily distracted with wandering/disconnected thoughts
- ✦ Less alert than usual
- ✦ Lack of motivation — feels ‘lazy’
- ✦ Have a hard time cooperating or talking to others
- ✦ Emotional extremes
- ✦ Trouble making decisions
- ✦ Can’t pay attention
- ✦ Slowed reaction times

Fatigue and workplace danger

Research shows the number of hours awake can be similar to the effects of drinking alcohol.

- ✦ 17 hours awake is similar to having drunk a glass of beer or wine.
- ✦ 24 hours awake is similar to having drunk 3 glasses within an hour.

Accident risk is higher when people work longer shifts, or work overnight.

- Accident risk increases by 30 percent by the fourth night shift.
- Accident risk increases by 27.5 percent on 12 hour shifts, compared with 8 hours on duty.
- Working at least 12 hours per day was associated with a 37% increased risk of injury.

Fatigue is regarded as having an impact on work performance. Sleep deficit has been linked to large scale events such as the Exxon Valdez oil spill and the nuclear accident at Chernobyl.

What causes fatigue? What can make it worse?

- Physical activity — too much or too little
- Not enough sleep/mental rest
- Alcohol
- Poor diet
- Some medications
- Certain health conditions
- Emotional or physical stress
- Short intervals between work shifts
- Boring or repetitive tasks can intensify feelings of fatigue

Sleep and your performance

After a night of too little sleep, people often:

- Have lower energy levels
- Lack concentration
- Make poor decisions
- Forget things
- Cannot learn as well
- Are clumsier and have more physical accidents

A study of people who did not sleep for 35 hours found:

- Sleep-deprived people did poorly on memory testing.
- They insisted they were right, even when they were wrong.
- They couldn't tell that their memory had been impaired.
- Caffeine did not improve their scores.

People who work extended hours, work in shifts or work far away from home are at risk for fatigue.

How much sleep do I need?

- If you do not sleep enough in a 24 hour period, your body goes into 'sleep debt'.
- It demands 'payment' with short-term symptoms:
 - Tiredness
 - Mood changes
 - Trouble working and paying attention
- Sleep debt is so common for some people that they do not notice the symptoms.
- Sleeping late on a day off does not pay your body back for multiple days of sleep debt.
- Some people say they feel refreshed after just a few hours of sleep — but their performance on tests show they are sleep deprived.



Most working-age adults need 7 to 8 hours of quality sleep at a time (uninterrupted sleep cycles).

Lifestyle and sleep

Healthy lifestyle habits that help you stay fit, cancer-free and heart healthy can also help you sleep better.



Exercise

- Physically active people fall asleep easier and sleep deeper.
- Be sure to finish exercising a few hours before bedtime.



Avoid tobacco

- Nicotine is an addictive stimulant — some users wake up to get a dose.
- Non-smokers breathe better, sleep deeper and physically relax better.



Use alcohol moderately, or not at all

- Alcohol makes people feel tired, but results in poor-quality sleep. ■





PROTECT YOUR EYES

Eye safety in the workplace

Eye injuries are common in the workplace. Some seemingly minor injuries such as eye scratches may lead to long term vision problems.

Industries associated with a high risk of eye injuries include inter alia, construction, auto repair, carpentry, manufacturing, welding and plumbing.

There are a number of eye protectors available such as safety goggles, safety face shields, safety spectacles and welding helmets which offer protection in different hazardous conditions.

Common causes of eye injuries

Eyes should be protected against the following:

Mechanical	flying debris, dust or molten metal
Chemicals	fumes, gas or liquid splash
Radiation	heat, ultraviolet or glare
Laser	over a wide spectrum of wavelengths
Infection	bacterial or viral contamination i.e. hepatitis, HIV



Approximately 1 million eye injuries occur each year and 90% of these injuries are preventable

What to do in case of an eye injury

Seek immediate medical help whenever there is an injury to the eye, particularly if it is painful, vision is reduced, bleeding or discolouration occurs.

Simple first aid measures until help arrives:

Particles or specks in the eye

- + Avoid rubbing the eye.
- + Splash water to wash out the speck.
- + If the particle does not wash off, keep the eye closed and seek help.

Cuts, punctures or foreign objects

- + Do not wash the eye.
- + Do not try to remove the object and seek urgent medical care.

Chemical

- + Flush the eye immediately with water and continue to do so for at least 15 minutes.
- + Do not bandage the eye and seek immediate medical help.

Blows to the eye

- + Apply ice pack or cold compress gently over the affected eye. Seek urgent care if pain persists or vision is affected.

Protecting your eyes

- + Be aware of dangers at work which can cause eye injuries.
- + Make use of machine guards, work screens or other controls wherever available.
- + Wear proper and well fitted eye protection and only remove it when you are out of the hazardous zone.
- + Ensure all eye protection equipment is in good condition.
- + Follow good work practices such as avoiding rubbing eyes with dirty hands or clothing and keeping eye wear clean. ■

HEPATITIS QUICK FACTS

Hepatitis means inflammation of the liver. Common causes of hepatitis include viruses, bacterial infections, toxins, certain drugs, excessive alcohol use and other diseases.



Viral Hepatitis – How do you get it?

FAECAL-ORAL (CONTAMINATED FOOD AND WATER)	Hepatitis A and E <ul style="list-style-type: none">• Spread by accidental ingestion of particles of faeces (even microscopic particles) from an infected person.• Ingestion of contaminated food or water especially where conditions are unsanitary.• Close contact with an infected person.• Accidental self-contamination (e.g. when changing a nappy of an infected baby).
BLOOD-BORNE	Hepatitis B and C <ul style="list-style-type: none">• Spread through direct contact with infected blood or body fluids for example:<ul style="list-style-type: none">◦ sexual contact◦ contaminated needles◦ infected mothers to their newborns• Hepatitis D infection is spread in the same way, but only to people infected with hepatitis B.

Preventing Hepatitis A and E

- Good personal hygiene and sanitation practices.
- Select safe food and water.
- Adequate and clean water supplies and proper waste disposal.

Preventing Hepatitis B and C

Avoid risky behaviours:

- Unsafe sex.
- Direct contact with blood.
- Unsterilised needles.

Hepatitis A and E: Types of food and drinks most likely to be contaminated are fruits, vegetables, shellfish, ice and water.

Many people, especially children, have no symptoms of Hepatitis A. Adults are more likely to have symptoms.

Vaccination

Consider vaccination for almost everyone who is not immune. It is a routine vaccination for children in many countries which requires three injections over six months. No vaccine is available against hepatitis E.

Washing your hands not only helps prevent the spread of hepatitis A and E, it also can prevent a number of other diseases and illnesses. ■

IT'S TIME TO QUIT!

Interview with Dr. Michael Couturie
Clinic Doctor in Beijing



Tobacco is a killer. Smokers and other tobacco users are more likely to develop certain diseases and die earlier than those who do not use tobacco. If you smoke, you may worry about what it's doing to your health and how hard it might be to quit. In this interview Dr Michael Couturie answers some common questions on quitting smoking.

What are some of the recommended ways to help a person quit smoking?

Research consistently shows that a multifaceted approach leads to the best chances of success. Medication for smoking cessation aims to reduce the symptoms of nicotine withdrawal, however, smoking is both a learned behaviour AND a physical addiction and changing the behaviour is more challenging than dealing with the withdrawal symptoms. Thus support and counselling should be a key part of any person's plan to quit.

What is your opinion about nicotine patches and gums? Do you think they are effective ways to help a person quit? Why or why not?

Patches and gum do reduce withdrawal symptoms and research bears this out as well. Nicotine replacement therapy increases quit rates at six months as much as two-fold and while no individual method has been shown to be superior to another, the combination of a long-acting method (patch) plus a short-acting method (gum) has been shown to be better. These are great for people who smoke with physical addictions and should be offered to anyone willing to make a quit attempt unless medically contraindicated.

For most people who smoke, a pattern of behaviour has developed over years, with positive reinforcement at the level of their brain chemistry not only from the nicotine itself, but in various and complicated ways from our cultures, our peers and ourselves.

Tobacco addiction is like any other addiction in that it convinces the user that they are in control even as they cede more control over to the addiction. I would literally schedule my day around cigarettes, but for most of my smoking life, I considered myself in control, able to stop when I wanted to. People come into my office worried about the pollution but with a pack of cigarettes in their shirt pocket almost every week. They know the contradiction, but the greater health risk by far has already been normalised for them, internalised and codified as to who they are.

What are eCigarettes and can they help smokers quit?

E-cigarettes (electronic cigarettes) were invented in China in 2003 and brought to international markets a few years later. It is an electronic nicotine delivery system that uses a battery to vaporise a liquid that users inhale. As the product has only been around for a short time, the long-term health effects are unknown.

However, there is little evidence to support their effectiveness as a tool to help smokers quit. In one

study, the effectiveness was about equal to people who quit smoking with the nicotine replacement patch. There is also concern that electronic cigarettes will introduce previous non-smokers (especially teenagers) to an addictive substance which may lead to increased smoking of traditional cigarettes. Thus, it is difficult to recommend electronic cigarettes as a tool to quit smoking when other methods are available and the long-term risks are unknown.

What kind of mental, emotional or even physical challenges can a smoker expect to face on their way to becoming smoke-free?

Nicotine withdrawal can cause people to have trouble sleeping; be more irritable; more easily frustrated or even feel like they are not thinking clearly. Some people gain a couple of kilograms. And you can expect to cough for a few months as your lungs begin to heal.

I know when I smoked I looked forward to the first cigarette of the morning with my coffee and the last cigarette after dinner. Changing those habits probably made me more irritable than actual withdrawal symptoms and is rarely easy. It can also be challenging to maintain a commitment to not smoking when others around you are.

The real problems are not so much about withdrawal but about unlearning all of the rituals of tobacco use.

Does the severity of those challenges depend on how long a person has been a smoker?

The longer we perform any pattern of behaviour the more automatic it becomes, and most people who smoke quit several times before quitting for good. The more cigarettes you smoke daily, the more likely you are to have a physical addiction, but even those who smoke 2–3 cigarettes a day (and are thus likely not physically addicted) have patterns of behaviour that can end up trapping them.

How long can a smoker expect to face these challenges before feeling “normal” again?

Most people who stop smoking for six months stay off, but that’s not the same as feeling normal. At six months, most people feel physically better than they

did before — more stamina, less cough, they don’t smell like an ashtray, they can taste food again and their energy improves.

Smoking changes how we think about smoking and how we think about ourselves, just like any regular habit. We codify the behaviour and set it as a norm for ourselves. Working to build a new normal is one of the most challenging parts of quitting smoking.

What are some helpful methods a smoker can practice to overcome these challenges?

Every person who smokes should work with his supporters (doctors, counsellors, friends, family) to identify their smoking triggers and plan for ways to cope for situations where they would usually smoke.



Exercise is an excellent way to release tension, overcome smoking urges and relieve withdrawal symptoms. Walking is great exercise for almost all fitness levels. Current recommendations for most people include aiming for at least 30 minutes of moderate intensity exercise most days of the week. Ask your doctor about the best level of activity for you.



One quick and easy strategy is to use **Relaxation Breathing Techniques** whenever you feel yourself getting tense. Most counsellors can teach you different types of breathing techniques in more detail.



Change your routines. Take a different route to work. Drink tea instead of coffee. It might seem counter-intuitive that additional changes to routines will decrease stress, but by developing new, smoke-free routines, you are smoothing the way for long-term success.



Reward yourself. Successfully quitting smoking has rewards — better health, improved ability to smell and taste food, a feeling of accomplishment, better hygiene — but these rewards often don’t come quickly enough to satisfy the immediate reward impulse that you’ve been feeding with cigarettes. Set up some rewards to keep you motivated:

- Stay in bed late and read or watch television
- Buy something practical
- Buy something frivolous
- Take yourself out to dinner
- Invite a friend to a movie ■





EBOLA

Expert analysis of data to date indicate the outbreak might be under control by mid-2015.

Dr. Salwan Ibrahim, MD
Medical Director of Medical Services, International SOS,
Middle East and Africa

The current world status

It is now over a year since the largest ever Ebola outbreak began in West Africa. It is yet to be brought under control in three countries — Guinea, Liberia and Sierra Leone — where transmission is still “widespread and intense”. So far there have been over 21,000 cases documented, with more than 8,000 fatalities. The situation is likely to continue well into 2015, and whilst it does, the risk of cases being imported into unaffected areas and other countries is present, along with the potential for new outbreaks to ignite.

How did the outbreak start?

This outbreak began with a single case, an eighteen-month old boy, in Guinea in December 2013. The child probably was infected through playing in a tree used by bats. Like all previous outbreaks, Ebola spread to relatives, healthcare workers, a traditional healer, and to mourners at funerals. However, the disease was not recognised to be Ebola until March 2014.

This significant delay meant that control measures were not enacted for months, allowing the virus to take hold in the community. Soon after the disease was brought to international attention, cases were also reported in neighbouring Liberia. This progression was concerning, unprecedented, but not unpredictable: Borders in the affected area are often porous, with people walking from one country to another on a daily basis.

Control measures were enacted in both countries and seemed effective. By the beginning of April, it looked like the outbreak was heading to its end. However, unexpectedly, cases spiked again in late May. New areas were affected. Ebola struck people in areas that had never had an Ebola infection before. The disease also intensified in places where people had previously been infected. By late May, the disease began actively spreading in Sierra Leone.

How does Ebola spread?

Just how Ebola actually gets from animals or the environment to humans is unclear. The virus probably “resides” in bats. From there it may occasionally infect humans that directly handle or eat bats. Ebola may also infect an intermediate species such as monkeys or gorillas (non-human primates), that eat contaminated, partially-eaten fruit that bats have fed on. Humans may find the dead intermediate animal and eat its meat. Either way, in each outbreak, the first human to be infected is called the “index case”. This person can then infect others, especially in areas where hygiene, sanitation and infection control levels are low.

Human to human transmission

The Ebola virus is contained in the blood and body fluids of infected people (vomit, diarrhoea, urine, nasal secretions, sweat and ejaculate). These fluids are contagious. If someone has contact with an infected person’s body fluids, they can get Ebola. The more symptomatic a person is, the greater the risk of catching the virus from their body fluids. In addition, it is possible to become infected by touching contaminated objects (objects that have the virus from an infected person on them). The virus gets onto the toucher’s hands and then may accidentally be transferred into the nose, mouth or eyes, or enter the blood stream via cuts on the hands.

Clearly, family, carers and medical staff are at high risk. Funeral practices that require touching, washing or kissing the dead body promote the spread of the virus. Once a human has been infected, an outbreak can occur if proper precautions are not taken.

Signs and symptoms of Ebola

The incubation period is the time between infection (when a person is contaminated by the virus) and when they start to feel ill. For Ebola, the period can range from 2 to 21 days. However, on average, it is about 7 to 9 days.

Usually, the infected person suddenly feels weak, has a fever, muscle and/or joint pain, headache and a sore throat. Vomiting, diarrhoea, rash and abdominal pain follow in most cases. Some people may develop redness of eyes and hiccups.

Organ failure and bleeding (both internally and externally) occur in some people. These lead to death. About 50% (up to 90%) of cases are fatal.

High risk activities for Ebola transmission

- Contact with infected people
- Touching or eating sick or dead wildlife, especially high risk infected animals such as fruit bats and primates
- Hunting or eating bats
- Caring for Ebola patients, attending their funerals or handling and burying their bodies

Is there any treatment?

There is no proven cure for Ebola at this time, although research is underway and a number of experimental treatments are being used.

Nevertheless, sick people should seek medical care promptly as early supportive treatment improves the chances of survival. These measures may include:

- Intravenous fluids (IV fluids)
- Supplemental oxygen
- Blood transfusions
- Antibiotics if the person develops a bacterial infection along with their Ebola virus infection (Ebola itself cannot be treated with antibiotics because antibiotics do not work on viruses.)



Currently, there is no approved vaccine against Ebola but several are being developed. Some are now being tested in human volunteers. Nevertheless, an effective vaccine is unlikely to be available for many months.

What about travel?

Business travellers are strongly advised to defer non-essential travel to the countries with widespread and intense transmission (Guinea, Liberia and Sierra Leone). Some commercial airlines have suspended flights to these countries and charter air movements are extremely limited. There is almost no reliable access to medical care available. Illnesses, including potentially life-threatening conditions, cannot be managed adequately. Less serious illnesses may become life-threatening.

Recommendation for avoiding the virus in affected areas

- Stay away from sick people. Do not touch their bodily fluids or objects contaminated with their fluids.
- Pay strict attention to hygiene. Wash your hands often. (The US CDC and WHO state waterless alcohol-based hand sanitiser may be used as long as hands are physically clean [not visibly soiled].)
- Do not go to funerals or touch dead bodies in affected areas.
- Do not go to hospitals treating patients with Ebola.
- Do not handle bats, even if they seem healthy.
- Do not touch animals that are dead or appear sick.
- Thoroughly cook animal products (meat, blood) before eating.
- People with Ebola symptoms should not engage in sexual activity. Semen can contain the virus for weeks after recovery, so men who recover from Ebola should either avoid intercourse or use condoms for three months after their recovery.

For more Ebola information, latest news and updates please visit: internationalsos.com/ebola ■

Statistics as supplied by February 2015.

Ebola poster for you to keep on page 14 and 15.

new

INTERNATIONAL SOS EBOLA APP

STAY INFORMED, HEALTHY AND SAFE WHILE TRAVELLING ABROAD



Key features include:

- Latest news and development on Ebola
- Outbreak outlook
- Maps showing affected areas
- Live International SOS Twitter feed
- Educational video on staying safe whilst travelling
- Push notifications for key alerts to keep you informed and safe
- Access to the International SOS Ebola website with downloadable resources

Available for:



internationalsos.com/ebolamobileapp

EBOLA FACTS

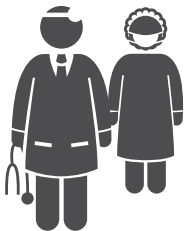


EBOLA IS AN INFECTIOUS DISEASE

THAT IS ONLY SPREAD BY DIRECT CONTACT WITH AN INFECTED PERSON OR THEIR BODY FLUIDS, INCLUDING VOMIT, DIARRHOEA AND BLOOD



PEOPLE AT **HIGH RISK**



HEALTHCARE
WORKERS



FAMILY CARING
FOR PEOPLE WITH EBOLA



PEOPLE
MANAGING BODIES



PEOPLE
ATTENDING FUNERALS

EARLY SYMPTOMS OF EBOLA INCLUDE:



FEVER



WEAKNESS



VOMITING



BLEEDING

STAY SAFE

WHEN IN AN AFFECTED AREA



DO NOT
VISIT HOSPITALS



DO NOT
VISIT HOMES WITH
EBOLA PATIENTS



DO NOT
ATTEND
FUNERALS



DO NOT
TOUCH
YOUR MOUTH,
NOSE OR EYES



WASH
YOUR HANDS
WITH SOAP FREQUENTLY,
CARRY SANITIZER

THERE IS **NO**
SPECIFIC
TREATMENT



EARLY MEDICAL
MANAGEMENT IMPROVES
THE CHANCE OF SURVIVAL

GET FIT,



According to the World Health Organisation, inactivity is the fourth leading risk factor for death. Participating in some physical activity is much better for you than doing none. Choose a type of physical activity that you enjoy. All physical activity is exercise and will make you fitter and healthier.

Walking is exercise (to the shop, up the stairs, to work, from the station, to the bus, around the park, on the beach).

Ride a bike, go swimming, play tennis, go to the gym, do aerobics, dance to music, learn a martial art, join a walking club, go rock climbing).

Find an activity that you enjoy! Get out and do some exercise!

Having an exercise partner increases the chance that you will exercise regularly.

What are the benefits of regular physical activity?

Regular physical activity reduces your risk of diseases such as heart disease, diabetes, stroke, colon cancer and high blood pressure. It can also reduce anxiety, stress and depression, improve your sleep, control your weight and improve your overall health and wellbeing.

Regular physical activity benefits every age group and particularly people trying to manage their weight, high blood pressure, physical disabilities and people under stress.

How much exercise should I be doing?

It depends on your goals. For adults:

To reduce risk of chronic disease	At least 150 minutes of moderate-intensity aerobic physical activity per week or at least 75 minutes of vigorous-intensity aerobic physical activity per week or an equivalent combination.
To prevent gradual weight gain	At least 60 minutes, 5 days per week of moderate to vigorous physical activity.
To lose weight	At least 60 to 90 minutes, 5 days per week of moderate physical activity.

Muscle-strengthening activities should be done involving major muscle groups on two or more days a week. Longer, more vigorous sessions may give even greater health benefits. Children should do at least 60 minutes of moderate to vigorous physical activity every day.



Having an exercise partner increases the chance that you will exercise regularly.

GET HEALTHY!

What is light, moderate and vigorous exercise?

Intensity	Voice test	Heart rate	Examples	Average energy used
Light	You will still be able to sing	Less than 50% of your maximum heart rate	Walking slowly, vacuuming, light stretching, warm-up	< 210 calories per hour
Moderate	You will still be able to talk	50% - 70% of your maximum heart rate	Walking briskly, tennis (doubles), cycling on flat ground, scrubbing floors, weightlifting	210 – 420 calories per hour
Vigorous	You will not be able to talk	70% – 85% of your maximum heart rate	Running, cycling uphill, aerobics, soccer, tennis (singles)	> 420 calories per hour

Before you begin exercising

If it has been a long time since you have been active or if you have any pre-existing medical conditions, in particular chest pain (especially on exertion), loss of balance, dizziness or passing out, it is recommended you talk to your doctor **BEFORE** beginning any new exercise.

Five fundamentals of fitness

Aerobic fitness

You build aerobic fitness through activities such as running, cycling, aerobic dance, soccer and tennis. This type of exercise is great for the heart, lungs and blood flow.

What happens to your body during aerobic exercise?

- You breathe faster and more deeply.
- Oxygen is absorbed through your lungs and into your blood.
- Your heart beats faster, delivering oxygen-rich blood to your muscles.
- Your muscles release waste materials back into your blood, and then it is expelled as you breathe out.
- Your body produces endorphins (natural painkillers) which promote an increase in sense of wellbeing.

Muscular fitness

You build muscular fitness through activities such as weight lifting and strength training which can help you:

- Reduce body fat
- Increase lean muscle mass
- Burn calories more efficiently
- Protect your joints from injury
- Increase bone density
- Boost your stamina

Stretching

Most physical activities will cause your muscles to contract and flex. Stretching will:

- Increase flexibility and range of motion
- Promote better posture and circulation
- Help prevent injury
- Relieve stress

The best time to stretch is when your muscles are warm. Stretching at least 3 times a week will help maintain flexibility.

Core stability

Core stability is gained from strengthening your core muscles, being the abdomen, lower back and pelvis. It uses exercises such as sit-ups and pilates. The benefits gained by core stability exercises are improved posture and reduced risk of back problems.

Warm-up and cool-down is just as important as the exercise itself.

Drinking enough fluids

When exercising it is important to replace lost fluids by drinking water.

- Drink a cup before you start your exercise.
- Drink half a cup every 15 minutes during exercise. ■

**Exercising only, does not mean that you are healthy!
Diet plays an important role in maintaining good health.**



HEAT

Guidelines for employers and employees working in high heat conditions.

Body temperature basics

Our bodies are meant to stay at a fairly constant temperature of around 37°C (98.6°F). Bodies automatically balance heat gain and heat loss. It gains heat using muscles during physical activity and from the surrounding environment. It loses heat through exhaling hot air, by sweating, the skin by heat transfer and excretion of urine or faeces.

When the body can't stay cool the inner "core" temperature can rise too high, the body symptoms break down, organs become damaged which can result in death.

Remember:

Sweat isn't just water, it also contains salts and minerals such as sodium, potassium, chloride, magnesium and calcium. If you sweat a lot, your body needs water AND salts replaced.

Heat stress:

It is important to identify heat stress early, and take it seriously. If the body cannot get rid of extra heat, its temperature rises and the heart rate goes up.

Hydration: A key to prevention

Bodies need fluid to sweat and handle heat. When people do not drink enough they become dehydrated and are at higher risk for heat illness. Thirst is not an accurate indicator of dehydration.

Take in as much non-alcoholic fluid as you sweat out — which could average $\frac{3}{4}$ liter per hour at work. In hot environments, people need $\frac{1}{2}$ to 1 litre (16 to 32 ounces) of fluid per hour. Eat a balanced diet to replace the lost salts.

Are you at risk?

Anyone can be overcome by heat, even people who are fit and healthy.

People who are outside in high temperatures are at higher risk, especially

- ⚙ If it is humid
- ⚙ If they are in the sun
- ⚙ If they are working or exercising

Some indoor places are also a higher risk

- ⚙ If stationed near radiant heat sources, e.g. a furnace or direct heat sources
- ⚙ If the air is still and not moving

Job-related tasks

- ⚙ Working with hot objects
- ⚙ Firefighting, baking, farming, mining, construction, laundry
- ⚙ Staffing a boiler room or factory
- ⚙ Wearing heavy clothing or protective gear
- ⚙ Long shifts

Same job, different day

Heat tolerance changes every day based on the temperature, humidity and your level of hydration. You may get sick one day even though you have been doing the same job for 5, 15 or 50 weeks.

AT THE WORKPLACE

Things employers can do:

Engineering

- ⚙️ Ensure worksites are ventilated.
- ⚙️ Air condition spaces when practical and necessary.
- ⚙️ Insulate equipment that generate heat.
- ⚙️ Reflect heat away from people where possible.
- ⚙️ Monitor work conditions: Keep track of the heat, humidity and other factors that add to heat stress.
- ⚙️ Repair faulty, leaking or inefficient equipment.

Schedules

- ⚙️ Do maintenance and repair jobs in cooler months.
- ⚙️ Schedule hot or physically active tasks for the cooler part of the day.
- ⚙️ Schedule rest periods into the day and ensure all workers take them.
- ⚙️ Provide cool water or other liquids.
- ⚙️ Break spaces should be cool and out of the sun.
- ⚙️ Workers should take several breaks throughout the day.

Personnel

- ⚙️ Give workers pre-assignment medical checks to determine fitness for working in hot environments.
- ⚙️ Manage underlying medical problems and medications.
- ⚙️ Educate staff about heat-related illness and how to prevent it.

Things workers can do:

Work in a buddy system

- ⚙️ Heat stress sometimes makes people confused and unable to tell if they are sick.
- ⚙️ Have a partner who watches you for signs of illness, your water intake and do the same for them.

Be smart about breaks and fluids

- ⚙️ Take scheduled breaks in cool places.
- ⚙️ Encourage others to take breaks.
- ⚙️ Drink water or natural juice on schedule — about every 20 minutes, before you feel thirsty.
- ⚙️ Be aware of your daily fluid intake, particularly if you have been advised for low salt or limited water consumption.

Take charge of your health

- ⚙️ Follow an acclimatisation schedule when you arrive, and when you come back after leave.
- ⚙️ You may like to monitor your heart rate, temperature or body fluid loss while working.

Take symptoms seriously and report them

- ⚙️ Everyone is different. Do not try to keep up with your coworkers or “push through” illness.

Dress smart

- ⚙️ Loose clothing is cooler than tight.
- ⚙️ Natural fibers (cotton, linen) are cooler than synthetics (polyester, nylon).
- ⚙️ In the sun, wear a hat to shade your face, ears and neck.

Live healthy

- ⚙️ Get enough sleep.
- ⚙️ Be careful with drugs or alcohol, as they change how your body handles heat.
- ⚙️ Choose nutritious foods and eat several smaller, lighter meals.

Healthier at home

- ⚙️ Spend a few hours a day somewhere cool.
- ⚙️ Use air conditioning or a fan.
- ⚙️ Open windows at night or whenever the air outside is cooler than inside. ■



Always call for immediate help, heat stroke is an EMERGENCY.



KEEP IT HEALTHY AND CLEAN!

EVERYDAY PERSONAL HYGIENE TIPS

Hygiene means keeping things clean for your own health and for others. In this article we take a look at everyday things that we should do all the time to protect ourselves from viruses and bacteria — wash our hands, cover coughs and sneezes, safe food and water as well as cleaning our homes. These simple things play a major role in our every day health.

Washing hands

Washing your hands frequently and properly is one of the best ways to stay healthy. Your hands touch many things, some of which can be contaminated with an infectious disease. Your hands are then contaminated and can make you sick if you transfer the infectious particles to your food, eyes, nose or mouth. Hand washing can reduce your risk of getting sick and passing illness on to others. Wash your hands for at least 10 — 20 seconds using soap and uncontaminated water.

Many common diseases spread through contaminated hands, including:

- Respiratory illnesses (colds, flu).
- Vomiting and diarrhoea (gastroenteritis).

When to wash your hands

- Before you eat or drink.
- Before, during and after preparing food.
- After toilet use.
- Before and after attending to sick people.
- After participating in clean-up activities.

- After touching animals, animal toys or animal waste.
- After touching your nose or mouth.
- After changing diapers.
- Before treating wounds or giving medication.
- Before inserting or removing contact lenses.
- After handling garbage.
- After touching something that could be contaminated such as shoes or cleaning cloths.

Coughing and sneezing spreads illness

Reduce the spread of disease by always covering your cough or sneeze with a tissue or your upper sleeve. Do not use your hands since you can easily pass on an infection by touching shared objects (doorknobs, copy machines, microwaves, etc.).

✓ DO

- Dispose of used tissues and other waste in the nearest trash can.
- Keep your distance from sick people. Ideally, stay at least 1 meter (3 feet) away.
- Wash your hands (or use hand sanitiser) after covering a cough or sneeze, or after touching anything that might be contaminated.
- Use your upper sleeve if a tissue is not available.

✗ DON'T

- Touch/get close to others if you are sick.
- Touch your face or rub your eyes.
- Cough or sneeze near someone.

Choosing safe food and water

Water that looks clean may contain harmful substances that make it unsafe to use — even for washing your hands and showering. If you know water is contaminated, do not open your mouth while bathing or showering. You may prefer to use treated/bottled water for bathing, especially during a disease outbreak or if you have any open cuts or immunosuppressive conditions.

If you are eating out, some foods are less likely to be a risk for illness. To reduce the risk of getting sick:

- Always wash your hands before eating.
- Drink only boiled or bottled water, water that has been treated with chlorine or iodine, or carbonated beverages.
- Avoid ice, as it may have been made with unsafe water.
- Choose food that has been thoroughly cooked while fresh and is served hot.
- Avoid food that has been left unrefrigerated for more than two to four hours, especially if it was kept warm.

Preparing food

- People who are sick should not prepare food for others.
- Keep animals/pets away from food preparation areas.
- Wash your hands before, during and after handling food.
- Keep raw meat and cooked foods separately.
- Wash food in safe water before cooking.
- Do not place cooked food on the plate which was used for raw ingredients.

- Use separate implements (such as knives, chopping boards) for raw foods and do not let it in contact with food which is ready for consumption.
- Thoroughly wash and dry cooking tools between uses.
- Cook foods thoroughly (internal temperature 70° Celsius/150° Fahrenheit or more).
- Meats should have no visible pink. Juices should run clear.
- Dispose of all waste into a covered bin.

Storing food

- Ideally, store food below 5° Celsius (41° Fahrenheit).
- Separate raw and cooked foods in your fridge.
- Put raw meats in sealed containers at the bottom of the fridge to avoid leaking juices contaminate other foods.
- Food that comes in jars, cans or packets should be used promptly after opening.
- Don't re-freeze any thawed foods — prepare them promptly.
- Cooked food that has been left between 5 to 60° Celsius (between 40 to 140° Fahrenheit) for more than 2 — 4 hours should be discarded.

Keeping your environment clean and safe

Viruses and bacteria can survive for days on surfaces, so keep your living and eating areas clean and clear of waste.

- Keep surfaces clean and dust free.
- Clean regularly using household detergents, disinfectants and bleach.
- Vacuum floors that cannot be washed or wiped.
- Pay attention to frequently touched objects and things that are touched by many different people, e.g. light switches, door knobs and handrails.
- Bathrooms and kitchens should be cleaned often.
- Don't forget to keep your cleaning tools clean — wash mop heads and cleaning cloths. ■



INTERNATIONAL SOS CLINICS:

Karl Heimke

Corporate Medical Services and Operations Manager



Healthcare is a top priority whenever employees are sent overseas. Many companies are finding that although international markets are developing rapidly and new markets continue to emerge, many of these markets lack the adequate standards of healthcare in the cities they deploy their people to.

In order to meet the needs of our clients, International SOS has established a network of 54 International SOS Clinics providing international standards of care to members. These include 41 primary care focused clinics, the majority of which are in countries where medical care of international standard is not yet available, is limited or where cultural and language barriers make it difficult for foreigners to receive appropriate care.

Our clinics are managed and overseen by a team of internationally trained medical professionals who work alongside a competent team of medical professionals.

Each primary care focused clinic offers primary care, diagnostic care and 24/7 emergency care. Doctors are available to provide many types of treatments, ranging from simple vaccination to emergency treatment. Specialist care is also available in other fields, including gynaecology, paediatrics and ophthalmology.

For expatriate families settling into a new environment, family medical practice is especially important. Many of our doctors offer complimentary health and wellness information sessions as well as well-woman and well-man care. Immigration health checks, first aid training and occupational health programmes are also available.

The clinics provide international-standard pharmacies, laboratory services and diagnostic

services such as X-Ray and ultrasound tests, dentistry, physical therapy and counseling.

In addition to the primary care focused clinics, we also run Occupational Health clinics, mainly in locations where the occupational health legislation is well established and complex to manage, especially for harsh offshore working conditions.

Our clinics have been set up at the request of our corporate clients to serve the health care needs of their expatriate and traveller populations, as well as meet their occupational health requirements, as they expand into international markets. The health care infrastructure and medical professionals that we place into these markets require significant investment to meet our client's expectations. The locations in which we operate these clinics also present significant diversity in local laws, availability of supplies, prices of goods and services and types of users. We have therefore arranged clinic access and usage procedures in three different categories.

Fee for Service Clinics

As a membership benefit, International SOS provides full access to eight clinics on a fee for service basis:

- + Cambodia: Phnom Penh
- + China: Beijing
- + Indonesia: Bali, Jakarta (2)
- + Myanmar: Yangon
- + Vietnam: Hanoi, Ho Chi Minh City

ASSISTING CORPORATIONS WITH THEIR DUTY OF CARE



Clinic Plan Clinics

Due to the limited number of patients accessing the clinics listed below, we operate these clinics on a Clinic Plan basis in order to maintain high quality services of an international standard. By knowing in advance how many of our corporate clients are reliant on us, we ensure that our Clinics are appropriately staffed and equipped with adequate resources.

Use of the clinics listed below is available to International SOS members; however members are also required to purchase a Clinic Plan to pay for medical care within that clinic. Clients will need to enter into separate Clinic Plan agreements per identified clinic.

- + Afghanistan: Kabul
- + Algeria: Hassi Messaoud (2), Adrar
- + Angola: Luanda, Ilha da Luanda
- + Azerbaijan: Baku
- + Chad: N'Djamena
- + China: Nanjing, Shenzhen, Tianjin, Tianjin — TEDA, Dalian
- + Ghana: Accra, Takoradi, Kumasi
- + Iraq: Erbil, Basra — International Energy City
- + Kazakhstan: Almaty, Atyrau, Aktau, Astana
- + Mongolia: Ulaanbaatar
- + Mozambique: Pemba
- + Nigeria: Lagos, Port Harcourt (3), Warri
- + Papua New Guinea: Port Moresby
- + Russia: Yuzhno — Sakhalinsk
- + Vietnam: Vung Tau
- + Yemen: Sana'a

Occupational Health Clinics

There are 16 clinics solely focusing on and delivering occupational health services in the following locations:

- + Brazil: Rio de Janeiro
- + India: Mumbai
- + Norway: Haugesund, Kokstad, Stavenger
- + Peru: Arequipa
- + United Kingdom: Aberdeen, Dyce, Stockton-on-Tees
- + United States of America: Anchorage (2), Kenai, Deadhorse

Quality Management Programme

Over the past 20 years, we have developed an internal set of quality control measures/operating standards in each area of our business to ensure consistent and high quality service delivery across our network of companies. The Quality Management System comprises of the following:

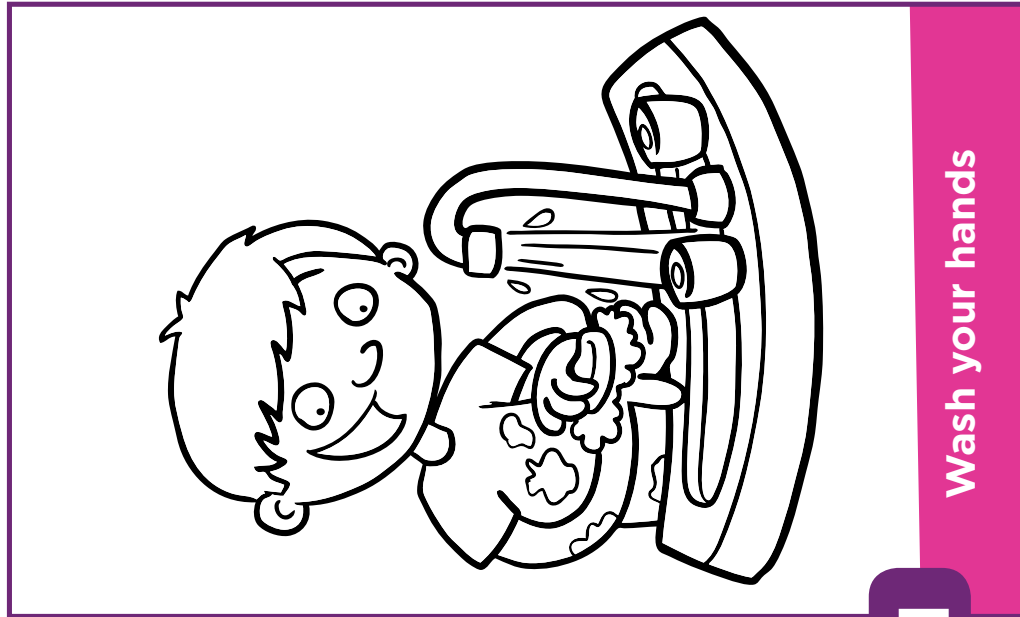
- + Regional and Local Medical Management/Supervision
- + Installation of Relevant Operating Standards
- + Installation of Standardised Reporting Tools
- + Comprehensive Corporate Quality Audits
- + Corrective and Preventative Action
- + Continuous Quality Improvement ■

Our clinics are well equipped with the facilities needed to stabilise a critically ill or injured person before evacuation.

STAY HEALTHY WASH YOUR HANDS!

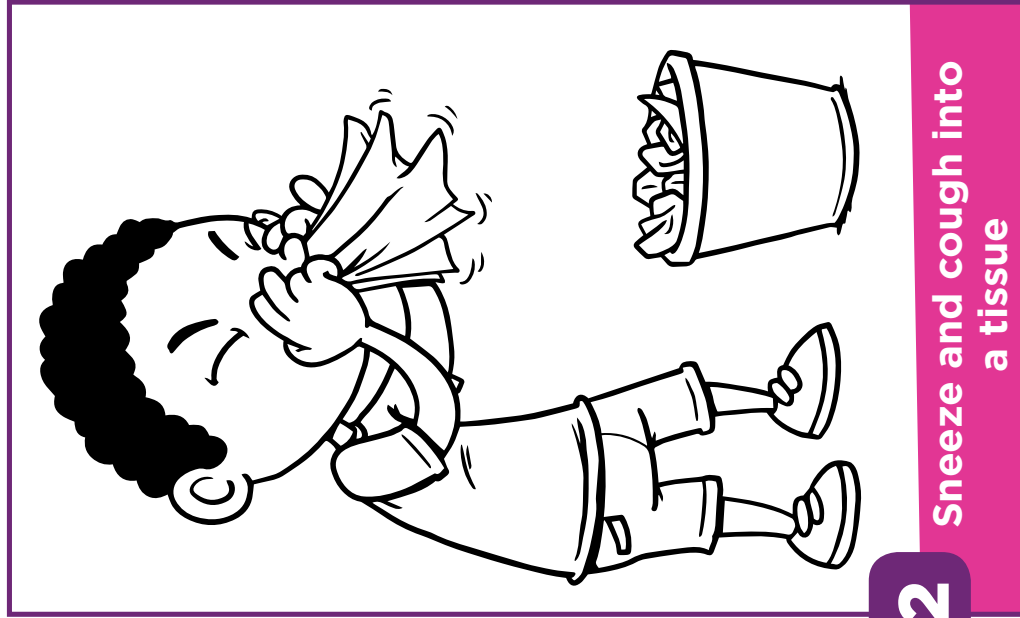


HOW TO FIGHT THE FLU



1

Wash your hands



2

Sneeze and cough into
a tissue



3

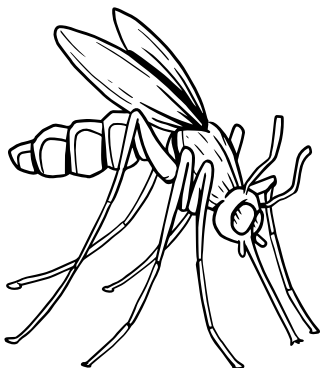
Rest and drink lots
of fluids

TAKE CARE OF YOURSELF



Find the hidden words below in the crossword.
Words run from left to right, top to bottom or diagonally.

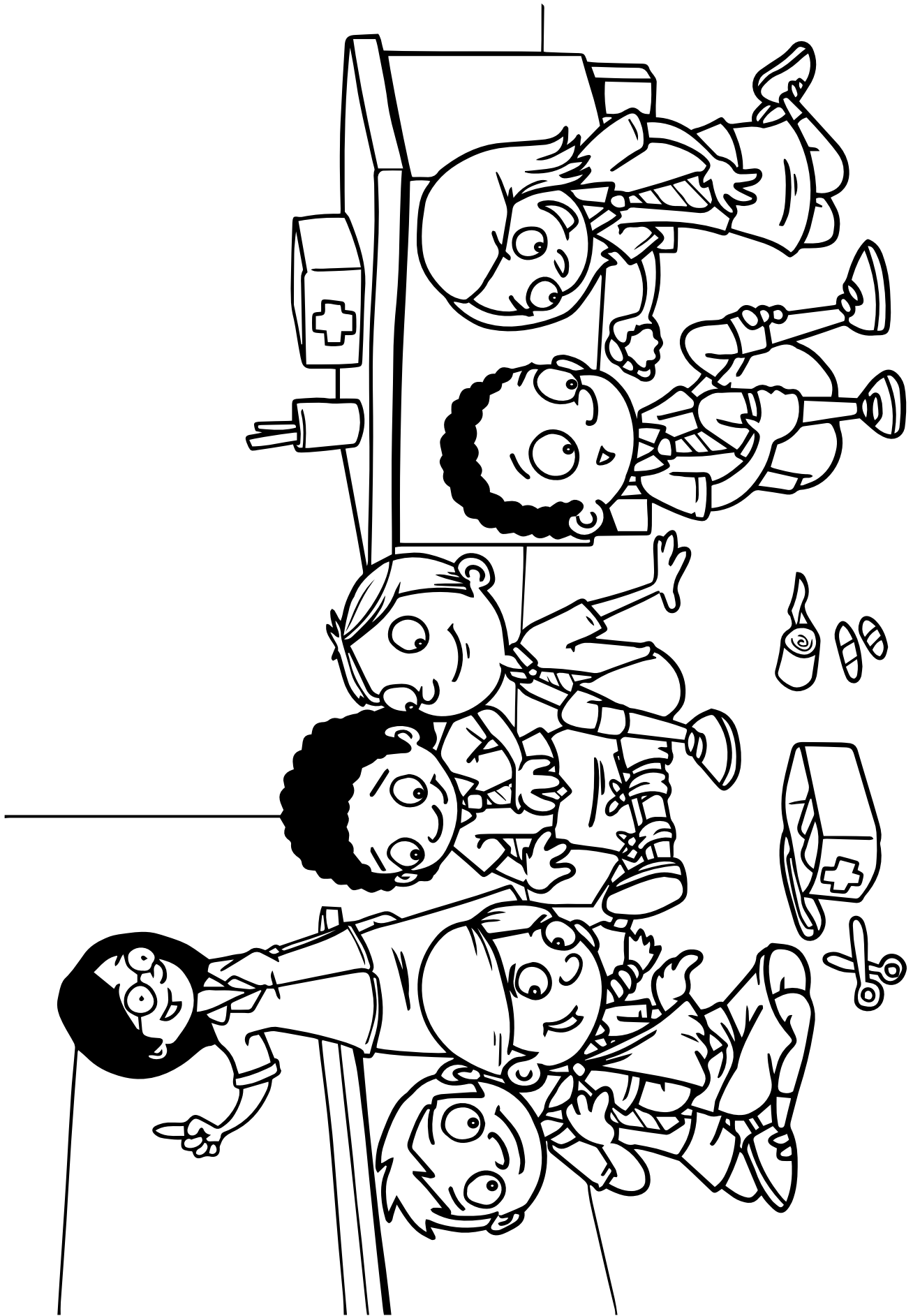
A	M	P	O	A	U	W	S	D	I	E	O	P	O	A	D	W	E	O	A
D	O	A	I	S	J	E	E	U	O	M	V	O	T	P	I	O	F	L	S
E	K	P	A	O	O	E	R	S	N	O	E	R	R	E	U	R	I	R	E
H	R	O	O	P	S	S	R	O	O	L	T	T	O	R	U	H	E	E	G
P	E	L	R	E	R	I	A	T	T	K	T	E	S	I	A	N	N	C	U
Q	L	I	E	Y	E	C	B	U	E	C	E	D	T	U	M	E	I	M	I
J	V	C	T	K	T	R	N	L	W	A	O	C	U	H	L	S	S	O	P
G	P	A	M	O	T	E	M	J	S	P	C	D	N	A	K	O	I	P	T
M	O	U	C	W	C	X	O	E	A	E	U	P	E	T	S	L	D	S	I
O	I	M	B	C	I	E	B	O	L	A	L	U	O	I	E	U	E	R	O
E	U	N	H	E	I	C	T	D	U	I	W	B	P	L	R	Y	M	E	R
I	R	A	C	S	W	N	A	C	M	O	I	H	A	P	D	C	E	M	D
S	E	E	S	Y	A	I	A	A	R	V	M	A	A	T	U	X	N	I	E
G	T	F	A	L	P	P	H	T	E	U	I	U	M	I	E	A	O	U	S
Y	A	U	U	O	F	M	K	O	I	R	N	P	U	N	T	G	M	T	C
O	W	I	I	M	E	K	P	I	A	O	P	A	I	E	U	E	E	T	U
E	L	O	K	B	I	L	A	L	P	A	N	E	D	R	O	O	A	V	T
U	H	O	E	E	O	E	A	L	E	W	X	L	E	U	S	M	W	E	H
A	C	T	S	C	K	M	N	T	S	Y	A	U	E	N	E	I	G	Y	H



Hidden words:

1. Malaria
2. Exercise
3. Vegetables
4. Doctor
5. Medicine
6. Ebola
7. Fruit
8. Water
9. Vaccination
10. Hygiene

LET'S LEARN FIRST AID!



PROTECTING YOUR PEOPLE IS OUR PRIORITY



International SOS is the world's leading medical and travel security risk services company. We care for clients across the globe, from more than 850 locations in 92 countries.

We pioneer a range of preventive programmes strengthened by our in-country expertise. We deliver unrivalled emergency assistance during critical illness, accident or civil unrest.



Our 11,000 employees are passionate about helping you put Duty of Care into practice. With us, multinational corporate clients, governments and NGOs can mitigate risks for their people working remotely or overseas.

30 YEARS

A GLOBAL INFRASTRUCTURE YOU CAN DEPEND ON:



27 ASSISTANCE CENTRES

With our local experts available globally, you can speak to us in any language, anytime 24/7.



5,600 MEDICAL PROFESSIONALS

Immediate access to experts with extensive experience in all fields of medicine coupled with a thorough knowledge of the local environment and healthcare system.



200 SECURITY SPECIALISTS

24/7 access to travel security reporting, analysis and expert advice from our security consultants, analysts and tracking experts around the world.



53 CLINICS

An integrated network of 53 International SOS managed clinics around the world, practising international standards of medicine - mostly in emerging countries.



77,000 ACCREDITED PROVIDERS

A network of accredited healthcare, aviation and security providers ensuring we provide you with the best logistics in the air, on the ground and at sea.

**WORLDWIDE REACH.
HUMAN TOUCH.**

internationalsos.com