

If any Hujjaj experience the above symptoms:

- Move the individual into the shade
- Remove excessive clothing
- Offer water or a salty drink to the Hujjaj
- Keep the individual as cool as possible (i.e. fanning, spraying them with water)
- Contact a member of your medical team

FEMALE HUIJAJ

For female hujjaj who anticipate the start of their period during the Hajj, there are several options available for either stopping or postponing the menses. The 2 most commonly used methods include taking the combined oral contraceptive pill (COCP) pill or Norethisterone tablets. The COCP contains both oestrogen and progesterone, and usually comes in packs of 21 tablets. Women are advised to start the pill on the 1st day of their period. After 21 days there is a 7 day break, during which a woman will usually experience a withdrawal bleed. For the purpose of the Hajj, it is permissible to run two packs together: i.e. to start a second pack as soon as the first is finished, in order to avoid the withdrawal bleed. If a woman is using the COCP pill for the first time, it is advisable to contact your doctor at least a few months prior to the Hajj to ensure a suitable pill is found.

Norethisterone contains a synthetic progesterone, and is usually started 3 days prior to the period starting. Women will need to take 3 tablets a day. Menses resume within a few days of stopping the tablets.

Prior to the journey, women are therefore advised to visit their doctor to discuss these, or the various other options currently available.

DEEP VEIN THROMBOSIS

Deep Vein Thrombosis (DVT) is when a clot forms inside one of the deep veins in the body, usually in the calf or leg. Clot formation can be caused by immobility, for example from sitting for long periods on planes, trains or coaches. The risk of developing a DVT is also increased in those with previous clots, cancer, obesity, smokers, those on the contraceptive pill, people who have had recent surgery, and in pregnant women. Such individuals should seek advice from their doctor prior to travelling.

In order to prevent DVTs, the following is advised:

- Stop smoking
- Weight loss through a sensible diet and exercise programme prior to travelling
- Ensure that you drink plenty of water on a long journey
- Avoid taking sleeping tablets on planes or buses, as they stop the body from naturally moving about while asleep
- Wear compression stockings
- Perform regular leg exercises (every hour) and walk around the

cabin when you have been advised that it is safe to do so

GENERAL ADVICE

The Hajj can be strenuous for individuals who are not used to regular exercise, and it is therefore advised that Hujjaj start their physical preparation at least a month prior to their journey, concentrating on: healthy eating; increasing their exercise tolerance (aim to walk/exercise for 30 minutes at least 5 times a week); and improving their general well-being.

Hujjaj with long-standing medical conditions and/or allergies should inform their group doctor in advance. It is also advisable to carry an adequate supply of all your regular medication, plus a written record in case further supplies are needed or in the case of an emergency.

We also advise taking:

- Simple pain-killers (such as Ibuprofen) to help with muscle-aches
- Paracetamol
- Energy sweets
- A water-spray to keep cool during hot days

And when not in Ihram (unless for medical reasons), to use:

- Sun-block
- Moisturiser/Vaseline for damaged skin (including feet)

It is advisable for all hujjaj to ensure they have adequate travel insurance in the event that hospitalisation is required.

Specific Advice for those with Diabetes

Hujjaj with diabetes should be aware that they are at a greater risk of becoming unwell during the Hajj due to poor diabetic control. This can be a result of changes in weather, increased exercise, irregular eating habits, or illnesses such as chest infections, heat stroke, and diarrhoea.

Hujjaj with diabetes should ensure that they:

- Establish good diabetic control prior to travelling
- Contact their doctor for flu vaccines prior to your journey. This is also recommended by the Saudi Health Check directive
- Carry an adequate supply of all medication, as well as a written record of your medication, and a record of your normal sugar control.
- Carry a working blood sugar monitor with them (or at least taken on the journey)
- Eat regularly and carry appropriate snacks

The rigours of the Hajj (heat, excessive exercise and irregular meal times) can increase insulin absorption leading to hypoglycaemia. Be wary of the symptoms and let your fellow travellers know of them too.

Hujjaj may suffer from:

- Headache
- Sweating
- Palpitations
- Confusion
- Slurred speech
- Double vision
- Fits

In the event that you may suffer from a hypoglycaemic episode, always carry a sugary drink, chocolate or glucose tablets with you. These must be taken straight away to end the episode. Follow this up with a more substantial item of food such as a sandwich to help maintain blood sugar levels. If at all worried, please contact a member of the medical team.

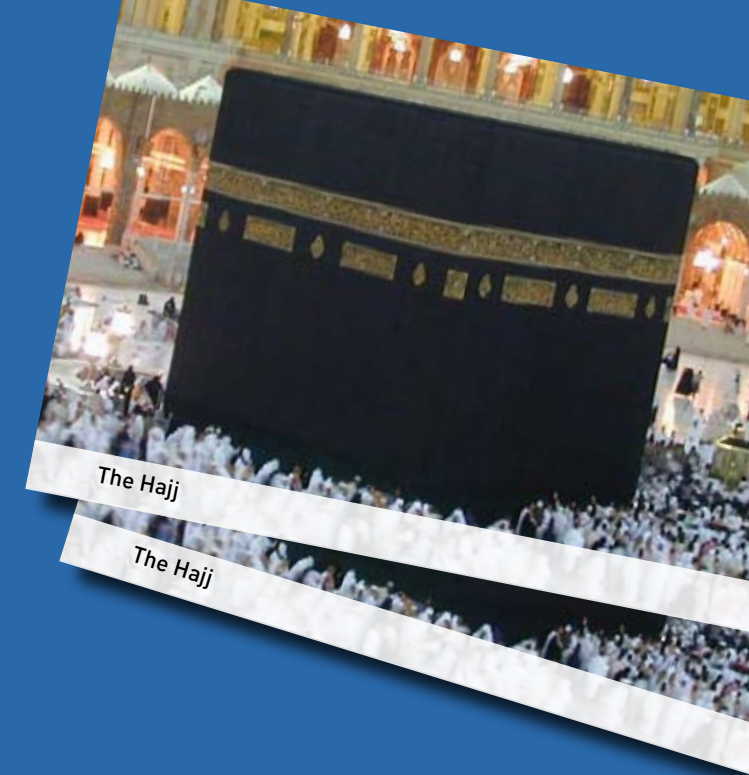
People with diabetes are more susceptible to damaging their feet, but in Hajj it can be even worse: feet can become burnt after standing on hot surfaces for long periods of time; and they can easily become injured due to the large crowds, stampedes and exercise. Please ensure that you: have comfortable footwear; maintain good foot care during the Hajj (for example, by regularly applying moisturiser); do not stand on hot surfaces for long periods; and where permissible wear socks.

Further Advice

You may know many people who have been for Hajj previously, some of whom have been numerous times. It might be beneficial to have a chat with them, as they may be able to offer some further advice to help you keep healthy, both during the Hajj and just after you return. For example, some people find that taking vitamin supplements, such as vitamin C helps them to stay healthy, and there is some medical evidence to suggest that taking vitamin C supplements in advance can shorten the length of a chest infection you might develop (but won't prevent you from getting a chest infection).

We wish you the best of health during your Hajj, and on your return home

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HEALTH ADVICE FOR HUIJAJ



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Medical Advice for Hujjaj

Hajj is a momentous journey; it is immensely rewarding, but it can also put the human body under strain. We have therefore compiled this document, hoping to advise Hujjaj of some medical issues to be weary of. All of the information we have given is medically accurate.

IMMUNISATIONS

It is important to get immunised against infections that are commonly contracted during Hajj. The vaccines work by preparing the body to fight infection before it comes into contact with the infection, so if it does, it is able to fight it better. It is best to contact your GP about 2 months before going for Hajj, in order to have enough time to get the immunisations you require. Some Hajj groups provide an immunisation service to Hujjaj.

Meningitis

It is a visa-entry requirement by the Saudi Authorities, that Hujjaj need to have the quadrivalent (effective against 4 major strains) vaccination against meningitis, called the ACWY vaccination. This needs to be given at least 2 weeks before departure; but if you are taking a child under 2 years old, the child will need 2 vaccinations, 3 months apart. The meningitis vaccination lasts for between 3-5 years, depending on the vaccination used; but you will still require a valid certificate for your visa, which are normally valid for up to 3 years. Having the meningitis vaccination will protect you, as well as your family and friends upon your return.

Other Recommended Immunisations

Tetanus is contracted through dirty cuts and scratches. Children in the UK will have had a course of 3 vaccinations providing immunity into adulthood, but booster vaccinations are required as adults, which give a further 10 years of immunity.

Poliomyelitis (commonly abbreviated to “polio”) is spread through contaminated food and water. Again, children in the UK will be immunised until adulthood, but a booster is required for immunity for a further 10 years. Please be aware that there have been reported cases of Polio during Hajj over recent years.

Hepatitis A is a disease affecting the liver, and can be spread through contaminated food and water, and between people as well. A single vaccination provides immunity for about a year, but if a booster is given between 6-12 months after the first vaccination, it will provide immunity for up to 10 years.

Further Immunisations (not Essential)

Yellow Fever causes people to have fever, vomiting, bleeding and jaundice. People in the UK are not at risk, and do not need to be immunised before Hajj. However, where the disease is prevalent,

such as in East Africa, a certificate of immunity is required for a Hajj visa, so that those going for Hajj are not put at risk.

Typhoid fever causes people to have a high fever and diarrhoea. It is not essential to be immunised before Hajj, but immunisation gives immunity for 3 years.

Children in the UK will have been immunised against Tuberculosis (having a BCG vaccine). It is not essential to be immunised before Hajj, unless you plan on remaining in the area for many months.

Immunisation against Influenza is recommended for those at higher risk from suffering from the virus, such as the elderly, those with recurrent chest infections, and heart conditions. This has also been recommended by the Saudi Ministry of Health.

Malaria

In the usual areas visited by Hujjaj, the risk of getting malaria is not significant enough to warrant taking medication to prevent the infection. The only areas that are of significant risk in Saudi Arabia are those in the far South, which are not usually visited by Hujjaj.

Further Information

Following some immunisations, you may have a slight fever, and/or a rash at the site of any injections. If any problems are persistent, please return to see your doctor.

Having immunisations does not guarantee that you will not get the disease. During Hajj, when it is extremely crowded, it is important to exercise caution, and be careful which restaurants you eat from.

DIARRHOEA

Food poisoning is a very common problem for Hujjaj. It can cause mild symptoms, such as a mild stomach upset with some diarrhoea for a day, to sever watery diarrhoea for many days. Cramps are common, and a fever may also develop.

How to avoid infectious diarrhoea

It is always important to wash your hands before and after going to the toilet, and before touching food. However, due to the volumes of food prepared at the time of Hajj, the hygiene is often not at its best, so it is important to be vigilant and choose clean restaurants to eat in. It is also important to drink bottled-water and zamzam water, and not tap-water. Please also be careful of salad and fruits, as they may have been washed with tap-water, and may have therefore become contaminated; please also be cautious of ice, as it is usually made from tap-water.

What to do if you develop food poisoning

- Have plenty to drink: the main problem with having diarrhoea is

that people commonly become dehydrated, which can be severe. As a rough guide, try to have about 200ml (about a glass-full!) of water each time you have diarrhoea or vomit, in addition to the normal amount of water you drink (which should be at least 1.5 litres per day). If you are vomiting, wait a few minutes before trying to drink again, but keep drinking slowly, starting with a few sips. It is best to use rehydration drinks, but it is not essential, so if these are not available, drink water or diluted fruit juices.

- Eat as normally as possible: although you may have a low appetite, and you may feel nauseated or need to go to the toilet after, eat as much as possible, as you will need the energy from the food.

- Medication: although not usually necessary, it may be useful for convenience when wanting to spend some time in the Holy Mosques. The most commonly used medication for diarrhoea is Loperamide (also called Imodium), which can be bought from pharmacies.

When to seek advice from a Doctor:

You should seek advice from a doctor if:

- The diarrhoea hasn’t settled after 3-4 days, or is worsening
- If you have been vomiting for 1-2 days, or is worsening
- If you are weak, drowsy, or confused
- If you have developed a fever
- If you are passing only small amounts of urine
- If you have developed joint pains
- If there is any blood in the diarrhoea

DEHYDRATION

Our bodies are made up of about 70% water, but only a tiny decrease in the percentage of our total water can cause dehydration. The young and elderly are more prone to developing dehydration. Water loss is common when in a hot environment, when access to water is limited, when you are more physically active, and when people develop food poisoning; all these problems are common at the time of Hajj. It is therefore essential to make sure you drink enough.

Symptoms of dehydration

The symptoms of dehydration vary depending on how much water the body is deficient of. The easiest way to monitor your dehydration is to use your thirst as a guide. If you feel thirsty, you are likely to need at least 500ml of water (about 2-3 glasses of water). You should also use the amount and colour of the urine you pass as a guide: if the volume of urine becomes less, and it becomes more concentrated, you need to drink more.

Other symptoms you might have when dehydrated are:

- Feeling tired, or getting tired quicker than usual
- Having dry lips
- Having headaches
- Feeling light-headed or dizzy

- Losing your appetite
- When severe, having sunken eyes and/or clammy hands/feet

Advice on dehydration

If you regularly keep an eye on your thirst, as well as your urine, you should drink water regularly to maintain the normal amounts of water in your body. Tea, coffee, fizzy drinks and fruit juices do not replace enough water; if you want to drink these, in addition drink enough water to maintain the normal amount of water in your body. It best to always keep a bottle of water with you.

However, if the dehydration worsens, or you develop diarrhoea/ vomiting, it is better to drink rehydration drinks, as they also provide salts, minerals and sugar. If they are unavailable, try drinking a diluted fruit juice, as well as eating as normally as possible.

You should seek advice from a doctor immediately if you become drowsy or confused, faint, or are dehydrated and are unable to keep liquids down.

HEAT STROKE

Heat Stroke is a common but avoidable medical problem during the Hajj period. The desert climate of Saudi Arabia is characterised by extreme heat during the day, and abrupt drops in temperature at night even during the winter months, with temperatures fluctuating between 9 degrees at night to over 30 during the day. Heat exhaustion and heat stroke occur in Hujjaj un-acclimatised to both the weather and the strenuous regimen of the Hajj, and is a result of excessive salt and water loss through sweating. Men (as they are prohibited from covering their heads), children, the elderly and diabetics are most commonly affected. Symptoms include hot dry skin, weakness, muscle cramps, impaired memory, drowsiness, and confusion.

To ensure replacement of both the body’s fluid and salt loss (up to 5 litres of water and 20g of salt can be lost a day), Hujjaj are encouraged to drink plenty of fluid. A good practice is to add salt to any food or fluid taken (approximately ¼ - ½ tsp/litre) and to carry a bottle of water with you. People often advise to take salt tablets; however the high concentration of salt in these tablets can cause individuals to have problems such as diarrhoea.

We therefore advise some precautionary measures to avoid heat exhaustion or heat stroke:

- Where possible, avoid walking in the sun for extended periods of time, especially during the hottest times (between the hours of 11am – 3pm)
- When and where permissible keep your head covered (i.e. with a cap or umbrella)
- Ensure adequate fluid intake during the day
- Always carry a bottle of water with you
- Add salt to water or food eaten