



COMPETITORS INFORMATION No. 11
EAST AFRICAN SAFARI CLASSIC RALLY 2009

Date: 7th August 2009

To All Competitors, Service Crews and Officials,

ADVICE ON PHYSICAL PREPARATION FOR THE RALLY FROM OUR CHIEF MEDICAL OFFICER - DR. HARJINDER CHAGGAR

Physical and psychological health

Your physical and psychological health will be challenged before, during and after the rally. You must be medically well prior to the start. Endurance must be acquired by taking physical exercise at least two or three times a week.

Before the start

Vaccinations :

Compulsory vaccination: Yellow fever.
Recommended vaccination: Hepatitis A

Hepatitis A is on average 10 to 100 times more common than typhoid fever and 1,000 times more common than cholera. Have your vaccination card with you. Do not forget an adequate supply of your regular medication and if you wear spectacles, please bring a spare pair

Fatigue before the start

Proper psychological and physical preparation is absolutely essential. Preparation for such events can involve working long hours with the associated stress of organisation, finding sponsors, arranging travel etc. Last minute complications to the preparation can cause panic and a loss of sleep. Driving requires constant attention, intuition, anticipation and fast reflexes. When you are tired driving can become clumsy, imprecise and dangerous...

Psychological preparation

Manage your stress.

Most of the time rallies take place in groups. Fatigue combined with stress can adversely affect relationships between participants. Once home, these problems are soon forgotten but they can spoil things during the race. It is wise to be aware of these stresses and to be well prepared before the start.

- Pushing yourself and panic.

Competitive sports often entail the pursuit of personal goals. You need to know your own limits before the start.

Anxiety can raise its head at any time. Fear of open spaces exists just like fear of enclosed spaces and crowds, causing a panic attack.

Beware of dehydration

Dehydration can be very dangerous. It can be avoided by preventing diarrhoea and drinking regularly. You should therefore fill your water supplies as early as possible and drink regularly throughout the day.

What you need to know!

There will be changes in temperature between the day and night of up to 20 degrees in some locations.

In the tropics 1 traveller in 2 will have some kind of health problem and 1 traveller in 3 will get diarrhoea (see first-aid kit).

Malaria prevention is very important (see first-aid kit).

Malaria carrying mosquitoes bite almost exclusively between sunset and sunrise (maximum activity between 10 pm and 4 am). The best way to prevent malaria is to limit the risk of being bitten (mosquito nets, long clothing, and repellents).

Anti-malaria (Malarone): one tablet per day starting the day before you arrive in the risk area. Stop the treatment seven days after you return.

Continue taking Mefloquine for four weeks after leaving the risk area.

Note this is recommendation and you should consult your own doctor for advice on this.

Hygiene, food, dehydration

Diarrhoea is hardly ever due to chance or bad luck but rather the result of disregard for food / basic hygiene rules. Gastroenteritis is often contracted by infection and is a transmissible disease. Do not share water bottles. Hygiene / washing your hands are a minimum requirement before eating.

Unless you are in a reputable hotel as our rest halts you should not eat or drink:

1. Any Raw fruit or vegetables for they might not have been washed with clean water.
2. Water or ice (except for mineral water in sealed bottles and even ice in Hotels is not from Mineral water)

To avoid dehydration the only advice is drink... so please drink regularly.

In the morning have breakfast with about half a litre of drink (water, coffee, tea, fruit juice...). During the day, drink regularly and eat "rations" especially designed to maintain your body's water and energy balance.

Prepare a travel first-aid kit

Plasters and individual hypo-allergenic sterile dressings

Elastoplasts

Sterile compresses/dressings

Antiseptic (Chlorhexidine)

Analgesic, antipyretic (Paracetamol)

Anti-diarrhoea (Imodium)

Eyewash

My contacts for more information and advice prior to the EASR 2009 are:

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