

# Crew Health and Hygiene

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## Introduction

The following briefing provides a summary of the symptoms, treatment and prevention of some of the more common illnesses experienced by seafarers, as well as some guidance on health and hygiene.

### Disclaimer

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# Crew Health and Hygiene

## Diabetes

Of the diseases that affect people insidiously, one that is becoming a major global concern is diabetes. Along with some other medical conditions such as gout, diabetes is commonly thought of as a disease of the affluent. That may well be true, but it is actually a disease affecting people who are simply just prone to develop it regardless of their financial status. Nevertheless, a high-sugar diet and doing little physical activity are certainly also factors.

Increasing numbers of potential crew members are turned away after pre-employment medicals because it is found they suffer from diabetes. There are also many people already working at sea who suffer from the disease or who may be prone to develop it - particularly cooks and middle-aged officers.

## Symptoms

The classic symptoms of the condition are the three 'P's

- polyphagia - insatiable hunger
- polydipsia - insatiable thirst
- polyuria - frequent urination with an abnormally large volume each time.

In extreme cases an individual may be eating substantial amounts but actually losing weight. The paradox here is that, although in the midst of plenty, the cells of the body are being starved.

In such cases, sufferers may be either sleeping more than usual, or feeling quite slow, and will have blurring of vision and an 'acetone' like breath. It is this group who are most at risk of slipping into a coma, possibly with fatal consequences, if it is not managed adequately and in good time.

More commonly there will be a number of crew members who are experiencing mild symptoms, which they either ignore or, if they suspect it is diabetes, deny or delay consulting with a doctor. If the disease becomes uncontrolled for a significant period of time, complications can set in which affect

- blood circulation - thereby affecting major organs, primarily the heart and kidneys
- nerve sensation
- vision - blurring that may lead to permanent blindness

- sexual function
- wound healing - particularly in the extremities, leading to gangrene and possibly amputations
- physical stamina.

All of these symptoms will have an obvious and significant impact upon an individual's quality of life.

## Diagnosis

The main screening test for diabetes is fasting blood sugar. It is necessary to fast for a period of 8 to 10 hours before providing a blood sample to obtain an accurate assessment of the blood-sugar value. To establish an abnormality in blood sugar, the value should be taken on two separate occasions.

Other tests are available, such as the two-hour post-prandial blood sugar and HbA1c, and these help distinguish between those who are already diabetic and those who are in the pre-diabetic stage. It also determines blood-sugar control in those diabetics who are under some form of management.

## Treatment

The two methods of managing diabetes are

- pharmacologic - involving medicines
- non-pharmacologic - involving diet restrictions and exercise regimes.

It is often said that 'once a diabetic, always a diabetic', so it is far preferable to prevent the risk of developing diabetes by modifying lifestyle - and here the advice is the same for general good health

- keep weight within the normal range
- take both resistance and aerobic exercises regularly
- try to avoid or minimise diets that are high in calories, saturated fat and refined sugar
- eat healthy, high-fibre, low-calorie, sugar-free foods
- minimise alcohol intake
- do not smoke.

*This section was prepared with the assistance Joselito L De Guzman, MD of the Marine Medical Laboratory Clinic, Philippines.*

# Crew Health and Hygiene

## Food Poisoning

There have been press reports recently about food poisoning on board cruise liners. However, this growing problem also extends to passenger ferries and all other ship types – and can be extremely serious.

An attack of food poisoning on board a ship can have potentially life-threatening consequences for the crewmembers concerned but even a mild attack can cause a significant disruption to the safe operation of a vessel.

Where passengers are involved, there can also be significant financial damages involved. There have been a number of recent reports where courts have made large awards for the victims of food poisoning.

## Risk of disease and death

Whereas some years ago food-borne illnesses on ships may have been considered nothing more than an inconvenience, the likelihood of seafarers and passengers being seriously affected has now substantially increased.

- The move towards a global economy has facilitated rapid transport of perishable and unusual foods from around the world.
- Overall eating patterns have changed.
- Knowledge of safe food preparation may have declined.

Food poisoning has traditionally been considered a short-lived and mild illness, but it is now recognised to be associated with morbidity and, worryingly, mortality. Conditions such as arthritis, meningitis, auto immune disorders, renal failure and hepatitis can arise from a food-borne illness.

## Safe preparation guidelines

Although contaminated chicken is one of the main causes of food-borne diseases, it is recognised that another major factor is food preparation, irrespective of the type of food involved.

Members are thus urged to ensure that the following simple food-preparation guidelines are adhered to in their ships' galleys:

### Clean

All cooks should wash their hands and preparation surfaces often. Hands, counter tops, cutting boards, utensils and dishes should be washed with hot soapy water after preparing each food item and before going onto the next.

### Separate

Do not cross-contaminate. Separate all raw meat, poultry and seafood from other foods in the refrigerator and other food storage places. Use different cutting boards for raw meat products and fresh produce and never place cooked food on a plate that previously held raw meat or poultry.

### Cook

Use a thermometer. Never guess whether meat has been properly cooked. Cook meat and poultry to recommended temperatures. If the meat has been marinated in the fridge before cooking, throw out any used marinade, or bring to a boil before reusing.

### Chill

Do not over-pack refrigerators and ensure that they are set at 4°C or below for safe storage. Thaw frozen food in the refrigerator, or in cold water, changing the water often. It is also important to refrigerate left-over foods promptly.

*This section was prepared with the assistance of Elliot Bishop, Hill Dickinson.*

# Crew Health and Hygiene

## Haemorrhoids

Haemorrhoids, commonly known as piles, are swollen enlarged veins in or around the anus. The haemorrhoids occur because the engorged blood vessels slow down or obstruct the flow of blood.

## Symptoms

Some people with haemorrhoids may have no symptoms but, if they do, the most common are

- fresh bright-red bleeding from the anus – blood may be present on toilet paper or in the toilet bowl
- itchiness in the area around the anus
- a pain around the anus and lower rectum
- a feeling of something coming down, a bulge or a lump, at the anus giving the feeling that the bowel hasn't been emptied properly.

## Causes

The exact cause of haemorrhoids is unknown though, despite what is sometimes said, they are not caused by sitting on hot radiators or cold floors! There are several factors that may increase the chance of haemorrhoids developing, which could include

- genetic influence – you are more at risk if either of your parents suffered from haemorrhoids
- an unhealthy diet, especially one which is low in fibre
- heavy lifting jobs
- being overweight
- chronically straining with constipation or diarrhoea.

## Treatment

Most episodes of haemorrhoids come and go quite quickly but, if simple measures do not help or the problem is more long lasting, keeps returning or worsening, then a doctor should be consulted.

Cold compresses and even ice can be helpful, otherwise cream or tablets may be prescribed. If none of these simple measures work then surgery - which is usually very straight forward and effective - may be necessary.

## Heat Illness

Seafarers are aware that heat illness can frequently occur on board ships due to the extreme temperatures in which they sometimes need to work. However, the onset is usually recognised and resolved quickly, with no permanent effects.

Heat stroke though is far more critical. Unfortunately the Association is aware of a number of cases where this has caused the crew member to become seriously ill, and has even resulted in death.

## Heat exhaustion

Heat exhaustion usually develops gradually and is caused by loss of salt and water from the body through excessive sweating. Those who are unwell, especially with illnesses that cause vomiting and diarrhoea, are particularly vulnerable. As the condition develops there may be

- headache and dizziness
- confusion
- loss of appetite and nausea
- sweating
- pale, clammy skin
- cramps in the arms, legs or the abdominal wall.

Perspiration is the body's best heat-control mechanism, but the salt and water that is lost must be replaced. The salt is best taken with food and supplemented by drinks containing salt to prevent heat cramp. In conditions of moderate heat, at least 4 litres (7 pints) of fluid is required a day, but in high temperatures this increases to 6–7 litres (10–12 pints).

However, when the atmospheric temperature is the same or higher than the body temperature (37°C), it is no longer possible to lose heat by radiation. A humid atmosphere will only make matters worse as sweat will not evaporate so readily from the body.

Particular care must therefore be taken when working in hot temperatures, especially in engine rooms and other confined spaces. In very hot conditions, as well as drinking plenty of water, seafarers should wear protective clothing that ensures free circulation of air to allow evaporation of sweat.

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## Heat stroke

Heat stroke is caused by failure of the 'thermostat' in the brain and the body becomes dangerously overheated due to a high fever or pro-longed exposure to heat. In some cases it can follow heat exhaustion when perspiration ceases and the body cannot be cooled by evaporation.

Heat stroke can occur suddenly, causing unconsciousness within minutes and on occasion it can be fatal. Sometimes there will be no indication of what is wrong until it is too late, but there can be warning signs. There may be

- headache, dizziness and discomfort
- restlessness and confusion
- hot, flushed and dry skin
- a rapid deterioration in the level of response
- a full, bounding pulse
- body temperature above 40°C.

In the case of heat stroke the patient should be wrapped in a cold, wet sheet, which is kept wet until the temperature has fallen to 38°C. The wet sheet can then be replaced with a dry one, and the patient carefully monitored.

Should the patient's responses deteriorate, or they become unconscious, ensure their airway is open and check they are breathing. In all cases, expert medical advice should be sought as soon as possible.

## Hepatitis C

Each year the Association handles claims involving seafarers from all over the world who have been taken seriously ill, or even died, as a result of being infected with Hepatitis C. Many pre-employment medicals include testing for hepatitis, and these have identified a significant number of persons who were infected but had no prior knowledge of their illness.

Hepatitis C was formally discovered just 20 years ago and is a liver disease caused by the Hepatitis C virus found in the blood of infected persons. The majority of people infected with Hepatitis C carry the virus throughout their life without becoming clinically ill, or even feeling sick, although some may experience extreme fatigue and/or flu-like symptoms. However, others may develop serious liver damage leading to cirrhosis (scarring) and liver failure, although this usually takes decades to develop.

## Treatment

Testing for Hepatitis C is highly recommended so that, if infected, an early diagnosis can be made for those who otherwise have no indication that they may be ill. Some treatment is available in the form of antiviral medication, though this is effective in only 20-30% of people.

Those infected with Hepatitis C should see their doctor regularly to monitor their liver function. They are strongly advised not to drink alcohol and should check all forms of medication with their doctor first as there are drugs which can directly affect the liver. Clearly it is not appropriate to become either a blood or organ donor.

## Prevention

There is no vaccine available to prevent Hepatitis C, so the following prevention measures are therefore invaluable.

- Do not use non-prescribed intravenous drugs.
- Do not share razors, toothbrushes and other personal hygiene items that might still have blood upon them.
- Consider the health risk of getting a tattoo. If the artist is not careful, the tools may be infected.
- Wear gloves if you have to handle anyone's blood.
- Consider vaccinations against Hepatitis A and B.

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- Use latex condoms. It remains uncertain how effective this may be in preventing transmission but it is likely to reduce the possibility.

## HIV

The following are some facts, risks and prevention measures for HIV.

### The facts

- HIV infection kills your body's natural defences against disease.
- HIV infection cannot be cured.
- AIDS develops when the natural defences are destroyed.
- You become ill and AIDS eventually kills you.

### The risks

- Sex without using a condom.
- Injecting or tattooing with a needle someone else has used.
- Blood transfusions when blood has not been tested for HIV.

### The prevention measures

- Always use a condom
- Never touch a used needle
- Insist on proper medical care.

Avoidance of casual sex and no drugs are the safest policies.

# Crew Health and Hygiene

## Kidney Care

The Association unfortunately sees many cases of crew members affected by kidney damage, sometimes irreversibly, resulting in failure of these vital organs.

Kidneys undertake the following essential roles

- maintaining balance of water and level of chemical constituents within the body
- regulating blood pressure
- helping maintain acid base balance of the blood
- eliminating chemical waste from the body
- acting as a gland producing hormones and enzymes which, among other functions, regulates blood pressure, assists bone formation and stimulates the production of red blood cells.

## Symptoms of renal disease

As with all health issues, people need to listen to their bodies for warning signs that provide early recognition of symptoms can often mean quicker diagnosis and treatment. Such warning signs include

- painful urination, which can be caused by inflammation of the neck of the bladder due to infection, or to the presence of kidney stones in the urinary passage
- hematuria (blood in the urine) - a sign which must not be ignored and can result from the presence of kidney stones, an acute infection or even cancer of the kidney or bladder
- the need to pass urine frequently during the night.

Patients with gradual but progressive damage of the kidneys may have no signs of symptoms in the early stages and this can cause it to be detected too late. General symptoms include pallor and fatigue resulting from anaemia, weight loss and body malaise due to an increased metabolic rate, as well as loss of appetite and an accumulation of excess water presenting itself as facial puffiness or swelling of the lower extremities and abdomen. There may also be headaches, nausea and vomiting.

## Causes of renal damage

Kidney problems can be genetic, but other common causes are

- prolonged usage of antibiotics, pain relievers, epilepsy drugs and alcohol
- an excessive intake of red meat which the kidney is unable to process
- hypertension, where persistently uncontrolled
- uncontrolled diabetes mellitus
- excessive salty and spicy foods, which may lead to an increase in blood pressure
- inadequate water intake.

## Taking care of the body

Whereas it is impossible to control medical factors entirely, a healthy approach to life is as always the best form of prevention - and this relates to taking care of kidneys as much as anything else. People should follow a healthy diet, enjoy a sensible consumption of safe drinking water every day, keep fit and watch out for anything unusual.

*This section was prepared with the assistance of Dr Bacungan of SM Lazo clinic in Manila, Philippines.*



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## Malaria

The Association is frequently involved with cases where one or more crew members of a ship are diagnosed with malaria, and unfortunately several cases occur every year where this has fatal consequences.

Despite being a largely preventable and curable disease, malaria remains one of the world's biggest killers. In addition to the human cost, vessels on which malaria-like symptoms appear may be quarantined and denied entry into port until the precise nature of the illness is known. There are likely to be further delays if all crewmembers need to be tested and, where necessary, treated and possibly replaced.

Malaria is caused by parasites which are spread to people through the bites of infected mosquitoes. Transmission rates vary enormously depending on local factors, such as the proximity of mosquito breeding sites to people, types of mosquito species in the area and rainfall patterns – mosquitoes breed in wet conditions. Some regions have a fairly constant number of cases throughout the year and are termed 'malaria endemic', whereas in other areas there are 'malaria seasons' that usually coincide with the rainy season.

Travellers from malaria-free regions, with little or no immunity, who go to areas with high disease rates are particularly vulnerable, although all seafarers should take necessary preventative action.

## Prevention

Unfortunately anti-malarial medication is not 100% effective, but it will substantially reduce the likelihood of contracting malaria. Medication needs to be taken both before and during the period of exposure and medical advice should be taken as to which drugs are likely to be most effective for the area visited. The medication needs to be taken regularly and preferably after a meal, and should be continued for a short while after leaving the affected area.

People suffering from epilepsy, psoriasis, psychiatric problems, liver problems, kidney problems or who are taking beta-blockers for an irregular heart rate, or warfarin, should take extra care as certain anti-malaria drugs may have an impact on some of these conditions. It is also important to be aware that medication can cause side

effects such as nausea, diarrhoea, headache, rash, dizziness and mouth ulcers.

As anti-malaria medication does not guarantee prevention, it is also sensible to use insect repellent on the skin and in sleeping environments, and to wear trousers and long-sleeved shirts, particularly during early evening and night time when mosquitoes prefer to feed. If possible people should sleep under a mosquito net that has been appropriately treated, and keep doors and windows closed.

## Symptoms and treatment

The common first symptoms of malaria are fever, headache, chills and vomiting, and these usually appear 10–15 days after being infected. If not treated promptly with effective medication, malaria can go on to cause severe illness such as kidney, liver, brain and blood complications, and is often fatal.

Early treatment of malaria will shorten its duration, prevent complications and avoid the majority of deaths, although an increase in parasite resistance to traditional anti-malarial medicines means that a combination of drugs may be prescribed.

## Summary

Members should make every effort to ensure their crew members avoid malaria by taking the following precautions.

- Be aware when they are travelling to a high-risk area.
- Take appropriate anti-malaria medication.
- Dress appropriately and use necessary repellent sprays.
- If possible sleep under mosquito nets which have been treated.
- Seek medical attention immediately should symptoms appear.



# Crew Health and Hygiene

## Mental Health

In recent years the Association has noted an increase in incidents involving crew members who appear to be suffering from some form of psychological difficulty. This can range from mild anxiety attacks to aggressive behaviour to fellow crew members, including extreme physical violence. More tragically it can lead to suicide.

It is not clear what the main causes are, but a possible factor is the length of time spent away from home and sometimes an inability to get relieved from a ship. At the same time, there may be family pressure to remain at sea longer in order to earn more money and continue sending funds home.

In the modern world of shipping, turnaround times in port are also much quicker, creating more work for both officers and crew and less opportunity to relax, resulting in fatigue and stress. Another possibility, which has been discussed widely in recent years, is increasing anxiety about the criminalisation of seafarers. Whatever the cause, mental illness must be taken extremely seriously both to protect individual crewmembers, but also their colleagues on board.

Physical illness will cause many people to feel upset or irritable, but it can be expected that their temper improves along with their health. True mental illness occurs independently of any physical ailment.

Normally a difference in behaviour can be seen, ranging from just slightly unusual to completely abnormal, though the person suffering may not be aware that he is acting oddly.

## Diagnosing mental illness

It is very difficult to diagnose mental illness in detail and all that can be done at sea is to recognise the condition, handle the situation correctly and deliver the patient into skilled hands at the earliest opportunity. This can involve a great deal of time and effort with someone who may be irrational, violent or even suicidal.

### Anxiety

An anxious person is usually aware of his state of mind, but the situation may have got out of control; he may find it difficult to sleep and may have lost his appetite. Encouraging the crewmember to share his problems can help enormously. It is important to listen sympathetically to

what he has to say, but also to remain objective and apply common sense.

### Depression

Depression can be considered in two forms. The first has an obvious cause, such as the death of a close friend. The second kind of depression occurs without apparent cause; the symptoms are similar and can range from feeling low-spirited to being suicidal. The person may be emotionally up one day and down the next to the extent of being morose and even sullen. It may be difficult to get a clear story from a depressed crewmember because he simply wants to be left alone.

Very depressed people may commit suicide and it is therefore essential to recognise those at risk so that correct precautionary measures can be taken. A natural progression of questioning about the patient's general feelings might establish whether suicide has been contemplated.

### Obvious insanity

Any seafarer with very serious and obvious mental illness will require a great deal of care and attention. It is wise to assume that their behaviour may be so unpredictable as to become violent or suicidal, possibly without provocation or warning. Professional medical advice should be sought as a matter of urgency.

## Providing help and support

Anyone who appears to be deeply depressed or who talks of suicide should never be left alone. In practice this can be difficult, but the crew member should be confined to a cabin and remain there under supervision. The deck is a dangerous place and the ship's side may be a temptation. Obvious precautions should also be taken regarding the removal of medicines, potentially sharp objects and items such as string and rope. Again professional medical advice should be sought as soon as possible.

# Crew Health and Hygiene

## Strokes

A stroke is a brain attack and happens when the blood supply to the brain is disrupted, most commonly from a blood clot. Prompt action can prevent further damage to the brain, whereas delay can result in death or major long-term disabilities – such as paralysis, severe memory loss and communication problems.

When at sea it is particularly difficult to receive immediate and specialist treatment. This makes an early diagnosis all the more important, enabling radio medical advice to be sought immediately and arrangements put in place for urgent disembarkation.

## FAST symptoms

The acronym FAST provides an easy way to remind ships' crews how to assess three specific symptoms of a stroke and the action to take.

**F**acial weakness – can the person smile? Has their mouth or eye drooped?

**A**rm weakness – can the person raise both arms?

**S**peech problems – can the person speak clearly and understand what you say?

**T**ime to take urgent radio medical advice.

It could be that the patient is suffering a transient ischaemic attack (TIA) or 'mini-stroke'. This is similar to a full stroke but symptoms last just a few minutes, or perhaps a few hours, and have completely disappeared within 24 hours. However, a suspected TIA should never be ignored as it may lead to a major stroke, and again immediate radio medical advice should be sought.

## Testicular Cancer

Testicular cancer is one of the most common but treatable forms of cancer in men, especially if diagnosed early. Male seafarers should be encouraged to keep a regular check for anything unusual.

North has recently assisted a number of crew members with advanced testicular cancer and other serious but preventable illnesses which had developed over a period of time. In all cases the seafarers were probably aware of the symptoms but did not seek medical attention until the symptoms became serious – which in some cases can be too late.

Seafarers spend significant periods at sea, where the pressures of the job and the isolation can make it easy to forget that it is important to look out for tell-tale signs that something is not right.

## Regular checks

According to the UK Institute of Cancer Research, testicular cancer is the most common form of cancer in men between the ages of 15 and 45. If caught early, testicular cancer can be successfully treated in about 95% of cases. To stay safe, men should check themselves on a regular basis and this is more important for seafarers who are often away from home for long periods of time.

It is recommended that men follow a self-examination regime. Regular self-examination helps with becoming familiar with the normal feel and size of testicles so that any abnormalities can be spotted at an early stage. Medical advice should be sought without delay if anything unusual is noticed.

# Crew Health and Hygiene

## Tooth Care

The three main weapons in the fight against tooth decay and gum disease are

- oral hygiene and plaque control
- correct diet
- Fluoride.

## Removing plaque

Oral hygiene is important because it prevents the build-up of dental plaque which is the main cause of both dental decay and gum disease. The longer plaque is permitted to stick to teeth, the greater the risk of disease.

Dental plaque is a thin coating of bacteria and food particles that stick to teeth and cannot be rinsed off. It converts dietary sugars to acid which then dissolves the tooth material causing decay. Further, plaque can calcify and harden to become tartar, which can only be removed by a dentist or hygienist.

Plaque must therefore be removed every day by thorough brushing and flossing both after breakfast and before bedtime. It is important to ensure that the correct toothbrush is used and replaced at the first sign of wear, this would normally be every 4 to 6 months. The toothbrush should have a head that is small enough and correctly angled to reach all teeth, it should be multi-tufted and have a medium/soft texture as hard bristles can damage teeth and gums. Electric toothbrushes have proven to be very successful in maintaining good oral health and in removing plaque.

## Diet and fluoride

Diets which are rich in refined carbohydrates (sugars) assist the formation of plaque and tartar as are those foods and drinks which have added sugar, such as sweets, biscuits and cakes. Cutting out sugar is one of the best ways to reduce tooth decay.

However, chewing gum can help maintain oral health provided it is sugarless. It can help reduce tooth decay by removing food debris from the teeth and the action of chewing stimulates the flow of saliva which in turn neutralises mouth acids. Saliva also contains minerals that strengthen the teeth and an adequate flow is essential for a healthy and comfortable mouth.

Fluoride is also a valuable weapon against tooth decay as it makes teeth more resistant to mouth acids and can reverse the effects of decay in its early stages. Most toothpastes contain fluoride as do many mouthwashes. A daily rinse with a fluoride mouthwash is recommended.

# Crew Health and Hygiene

## Medication

The introduction and more widespread use of higher quality pre-employment medicals is proving highly beneficial to both shipowners and seafarers.

Members taking advantage of stricter pre-employment medicals are experiencing a decrease in the number of claims resulting from pre-existing illnesses as well as healthier and happier crews on board, which benefits all aspects of seafaring. The medicals have also resulted in many illnesses being diagnosed that would otherwise have been missed, many of which can be easily managed on board provided seafarers comply with the prescribed medication.

However, the Club is seeing an increasing number of claims where crewmembers have been taken seriously ill, or have died, as a result of not taking the necessary drugs in the frequency and amount required. Non-compliance with medication regimes on board results in a number of safety risks at sea, as follows.

## Accidents

Crew members who do not medicate as prescribed may feel unwell, and less alert, compromising watch-keeping and cargo-care duties, resulting in minor accidents and injuries but also potentially collisions and serious casualties.

## Medical emergencies

Seafarers who have unstable medical conditions, thus requiring on-going medication, may suddenly require medical care on shore, or even on board, if they do not continue to take the appropriate medicine. This can result in a disruption to ships' schedules but, more importantly, present a major threat to the health of the crew member when they are potentially a long way from emergency medical care.

## Death

Seafarers who do not medicate run the risk of developing complications or end-stage diseases to their condition, such as heart attacks or strokes.

It is important that crew members understand the importance of taking their medication properly and ensure they have sufficient medication on board for the duration of each voyage, plus ideally an extra two to three months' supply.

If there is any concern there may be insufficient drugs, this should be brought to the attention of the ship operator as soon as possible so an effort can be made to arrange for additional supply.

It is also important that crew-members discuss their illness, and the medication they need to take, with both the ship operator and the master. Should any problems occur the owner and master will be better able to identify the cause and seek appropriate emergency medical care.

*This section was prepared with the assistance of Dr Pascual Gutay, medical director of SuperCare Medical Services, Manila, Philippines.*

# Crew Health and Hygiene

## Radio Medical Advice

Radio medical advice is available from a number of places around the world and may, on occasion, be obtained from other ships in the vicinity which have a doctor on board. The Association strongly recommends that Members make use of these facilities should a crewmember be injured or taken ill at sea.

While some conditions may be considered straightforward and not require professional assistance, if there is any doubt whatsoever then external assistance should be sought.

Increasingly the Association is seeing claims where the shipowner is accused of negligence for not having cared in the appropriate manner for a crew member on board who required medical assistance. It is often easy to look at the treatment of a crew with the benefit of hindsight and find fault. In reality however, those administering medical assistance on board are not qualified doctors and have to make decisions on the information available to them at the time.

Seeking external medical advice enables the ship to provide the best possible care available on board to the patient. In extreme cases this can be the difference between life and death. More commonly it means that the crewmember has a better chance of recovering in full and more quickly.

By taking radio medical advice, Members are also able to demonstrate the seriousness with which they treat crewmembers health and that they took all appropriate measures as recommended by independent medical personnel.

## Necessary information

Before requesting radio medical advice, the appropriate form or notes should be completed. Any advice given should be taken down in writing as received and repeated back in order to avoid misunderstanding.

Members should ensure they have all relevant information to hand, most importantly

- routine particulars about the ship and its position
- routine particulars about the patient
- details of the illness or the injury
- results of examination of the patient

- details of all treatment given.

## Communicating with doctors

Whenever crewmembers are sent to see a doctor, as a matter of courtesy, information and a letter or form should always be sent with them. They will be strangers to the doctor and there may also be language difficulties. A written communication is often easier to understand than a spoken one and, in medical cases, clarity of meaning is particularly important. The letter should include routine particulars about the crewmember (name of ship, port, name of agent, owner) and should provide detailed information regarding the illness or injury.

Also to be included are copies of any information from doctors in previous ports.