Water Contact Diseases

Leptospirosis – Wading, swimming, other contact with water/mud contaminated with infected animal urine; unknown number of cases could occur

- Threat year-round; countrywide
- Symptoms fever, chills, nausea
- Hospitalization of 1-7 days

Prevention: Do not swim/wade in unapproved water; wash skin and clothing after exposure to freshwater streams/ponds.

ENVIRONMENTAL RISKS

Short-term health risks

- · Food contaminated with fecal pathogens
- Contaminated water with raw sewage
- · Extreme heat, high altitude, airborne sand

Long-term health risks

- Air contamination
- Chemical contamination of food and water

HAZARDOUS ANIMALS AND PLANTS

Venomous Snakes – Aggressive cobras, pit vipers, and vipers are present country-wide; some have venom that can cause death within hours: if bitten, seek urgent medical attention!

Prevention – Do not handle any snake.

Centipedes, Millipedes, and Solifugids – None with deadly venom, but capable of inflicting painful bites or secreting fluids that can blister skin

Prevention – Shake out boots/bedding clothing prior to use; never walk barefoot; avoid sleeping on the ground; seek medical attention if bitten.

Scorpions and Spiders – Some scorpions have potentially lethal venom; tarantulas and black widow spiders can deliver painful bites.

Prevention – Shake out boots/bedding/clothing prior to use; never walk barefoot; avoid sleeping on the ground; use caution when entering abandoned

Hazardous Animals and Plants (Continued)

buildings or bunkers; seek medical attention if bitten/stung.

Hazardous Plants – Numerous toxic plants can cause skin/lung irritation if touched/burned; poisoning can occur if plants are chewed / eaten.

Prevention – Do not touch, chew, eat, or burn unfamiliar plants; wash contaminated skin/clothing after contact.

HIGH ELEVATIONS

Operations at 6,000 feet can impact unit and individual effectiveness. Signs of **altitude sickness**: headache, nausea, vomiting, dizziness, fatigue, irritability, coughing

Acclimatization:

- Staged ascent: Ascend to moderate altitude (5,000 to 8,000 feet) and remain there for 3 days before ascending higher.
- Graded ascent: Limit daily altitude to allow partial acclimatization. Spend 2 nights at 9,000 feet and limit to no more than 1,000 feet per day above each night's sleep.

Treatment: The preferred method to treat any high altitude illness is to evacuate the individual to a lower altitude. See GTA 08-05-060, *A Soldier's Guide to Staying Healthy at High Elevations*.

DISTRIBUTION UNLIMITED

Prepared by:



U.S. Army Center for Health Promotion & Preventive Medicine

http://chppm-www.apgea.army.mil SIPRNet: http://usachppm1.army.smil.mil (800) 222-9698/ DSN 584-4375/ (410) 436-4375 SHG 040-0905

DEPLOYMENT HEALTH GUIDE: AFGHANISTAN



This country-specific guide should be used in conjunction with GTA 08-05-062, *Guide to Staying Healthy*, and is intended to provide information that can help reduce your risk of Disease and Non-battle Injuries (DNBI) when deployed. The health threat and countermeasure information is based on the most current data available from U.S. Department of Defense medical agencies at the time of production. In addition to the information in this guide, you should also receive force health protection, health threat, and preventive medicine countermeasures training/briefings prior to and, as required, throughout the length of your deployment.



AFGHANISTAN OVERVIEW

Location – Afghanistan is located in Southern Asia, north and west of Pakistan and east of Iran. It has a total land area about the size of Texas.

Climate – Arid to semiarid, with extreme winter highs and lows of 100° F to -3° F and extreme summer highs and lows of 118° F to -4° F.

Rainfall – The rainy season is October through April with around 15 inches of rain annually.

Terrain – The Central Highlands cover almost two-thirds of the country, with peak elevations reaching 25,000 feet. The Southwestern Plateau has elevations of 20,000 feet in the east and dropping to 500 feet in the west.

Forces of Nature – The "Wind of 120 Days" blows from June through September at velocities that can occasionally exceed 110 miles per hour.

RISK ASSESSMENT

Afghanistan is at **HIGH RISK*** for infectious diseases. Without force health protection measures, mission effectiveness will be seriously jeopardized.

*Based on a combination of all major infectious diseases that occur in a country, the Armed Forces Medical Intelligence Center (AFMIC) assigns an overall country risk level of low, intermediate, high, or very high risk, as compared to other countries.

INFECTIOUS DISEASES

Food-borne and Water-borne Diseases

Consuming contaminated food, water, or ice

Hepatitis A – A potential attack rate of 1 to 10 percent per month among unvaccinated personnel if local food, water or ice is consumed

- Threat year-round; countrywide
- Symptoms none to flu-like illness
- Severe, 1–4 weeks recovery, sometimes initially requiring hospitalization

Diarrhea, protozoal – A potential attack rate of 1 to 10 percent a month if local food, water or ice is consumed

- Threat year-round; countrywide
- Symptoms loose, watery or explosive bowel movements

Food-borne and Water-borne Diseases (Continued)

• Recovery of 1–3 days with antibiotics

Diarrhea, bacterial – A potential attack rate approaching 100 percent a month if local food, water or ice is consumed

- Threat year-round; countrywide
- Symptoms loose, watery or explosive bowel movements
- Recovery of 1–3 days with antibiotics

Typhoid/Paratyphoid fever – A potential attack rate of 1 to 10 percent among unvaccinated personnel consuming local food, water or ice

- Threat year-round; countrywide
- Symptoms fever, constipation, headache
- Hospitalization of 1–7 days

Prevention: Consume only U.S. military-approved food, water, ice; hepatitis A vaccine and/or typhoid vaccine if directed by medical authority.

Vector-borne Diseases

Malaria - Significant number of cases possible

- Greatest threat March through November; countrywide, including urban areas
- Symptoms fever, chills, sweats; mild to severe including coma and death
- Transmission night-biting mosquitoes
- Hospitalization of 1–7 days likely; prolonged recovery or death possible

Others: A small, or undetermined number of cases could occur: leishmaniasis (cutaneous and visceral; sand flyborne); Crimean-Congo hemorrhagic fever (tick-borne); sandfly fever (sand fly-borne); typhus (scrub typhus; miteborne); West Nile virus (mosquito-borne)

Prevention: N,N-diethyl-meta-toluamide (DEET) on exposed skin; permethrin-treated uniforms; permethrin-treated bed nets; malaria prevention pills as prescribed (critical)

Animal Contact Diseases

Rabies – Exposure to virus-laden saliva of an infected animal through a bite, scratch or breathing airborne droplets; risk is among the highest in the world

- Threat year-round; countrywide
- Initial symptoms pain, tingling, or itching from bite site: chills, fever, muscle aches
- Death likely in the absence of post-exposure prophylaxis

Animal Contact Diseases (Continued)

Prevention – Avoid all animals; if scratched or bitten, seek medical attention immediately; pre- and/or post-exposure vaccinations if prescribed by medical authority.

Others: Anthrax, Q fever

Respiratory Diseases

Tuberculosis – Breathing contaminated air droplets from other people (coughing/sneezing)

- Highest threat from prolonged close contact with local populations
- Threat year-round; countrywide
- Symptoms none to cough, chest pain, breathlessness, night sweats
- Severe illness or death if not treated

Prevention – Avoid close contact with local populations; early detection/treatment reduces severity.

Sexually Transmitted Diseases

Gonorrhea/Chlamydia – Unprotected sexual contact with infected person; potential attack rate of 1 to 50 percent

- Threat year-round; countrywide
- Symptoms (in men) none to burning sensation when urinating or discharge
- Symptoms (in women) none to burning when urinating to increased vaginal discharge
- Mild; outpatient treatment

Human immunodeficiency virus (HIV)/Acquired immune deficiency syndrome (AIDS) – Unprotected sexual contact with infected person; contaminated needles or blood into an open cut/membrane of an infected member; rare cases could occur.

- Threat year-round; countrywide
- Symptoms weight loss, night sweats, fatigue, swollen lymph glands, sores
- Very severe for individual; death likely

Prevention: Abstinence; latex condoms; not sharing needles; hepatitis B vaccine

Others: Hepatitis B