

Men's Journal

Alaska's
First
Dude

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Can Train
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in Six Weeks
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ANTIBIOTICS

Cipro (ciprofloxacin)

"No antibiotic covers everything, but Cipro is a great multipurpose option," says Dr. Luanne Freer, who heads the Everest Base Camp Medical Clinic and last used the drug to treat several climbers with a bacteria-induced gastrointestinal illness. You'll need a prescription, but most doctors are willing to help you get it and tell you how to use it.

Bactrim (sulfamethoxazole/trimethoprim)

"For infected wounds, ear or throat infections, or soft tissue infections common to an aquatic environment, it's a better drug than Cipro," says Freer. Bactrim is also the first line of defense against staph infection. As with Cipro, you'll need to discuss your travel plans with your doctor, who can write you a prescription.

ALTITUDE

Diamox (acetazolamide)

Diamox accelerates acclimatization and can be taken prophylactically or used to treat altitude sickness at its onset. "It's safe and very effective," Freer says. Though Diamox is usually used for big-mountain climbing, she notes it can be taken for less extreme cases. "About one-fourth of visitors to U.S. ski resorts develop altitude sickness that can be cured with Diamox," she says. Most doctors will prescribe the drug if you're traveling to high altitudes.

Mind & Body

NAUSEA

Zofran wafers

Zofran was developed to treat the extreme nausea caused by chemotherapy. "We've used it in the clinic on Everest to treat patients who can't keep a pill down," says Freer. As with all prescription drugs, Freer suggests consulting your personal physician for help in determining when Zofran is appropriate.

Pepto-Bismol

"The initial discomfort of nausea can be treated with an over-the-counter drug," says Freer, who always carries Pepto-Bismol tablets because they're lighter and easier to carry than liquid anti-nausea drugs. Though not as effective as Zofran, Pepto doesn't have the sedative side effects.

ESSENTIALS

Superglue and duct tape

"I once had a clean inch-long cut on the bottom of my foot," says Doug Lansky, author of *First-Time: Around the World*. "I ruled out ligament or tendon damage after a phone call to my wife, who's an ER doctor. She said to clean it and superglue it; I put some duct tape over that and was good to go."

A plastic film canister

While in Pokhara, Nepal, a case of diarrhea kept Lansky within 10 yards of his toilet. He put a stool sample in a film canister and sent it to the local clinic via a compassionate fellow traveler, who returned with the appropriate antibiotics. "They'll take a look under a microscope and dispense the right drugs immediately," Lansky says.

Copies of your prescriptions

They'll make getting refills easier while you're on the road, plus they provide a legit explanation for your "just in case" stash of high-powered painkillers. Otherwise, says Lansky, you run the risk of being busted by — or being forced to bribe — various border agents to get your drugs into their country.

SteriPEN

The SteriPEN, placed in a glass of water, kills bacteria, viruses, and protozoa (like giardia) using ultraviolet light. More effective than other purification methods, it's also quick: It can dispatch the unwelcome guests from half a liter of water in less than 50 seconds. Freer also advises bringing iodine pills in case you run out of batteries. —JOSH FULMER

THE TRAVEL KIT PROS USE

For your more adventurous trips, these are the items you can't leave behind.



PAIN RELIEVERS

Ibuprofen

The anti-inflammatory properties of ibuprofen make it useful for much more than pain relief. "It's exceptionally good for the aches and pains you're going to get while trekking, but I also use it frequently for the prevention and treatment of frostbite because it prevents the inflammation from causing additional damage," says Freer.

Narcotic painkillers

"There are a lot of ways to find yourself in excruciating pain when you're far from definitive care," says Freer, who reached for the Vicodin herself when she tore the labrum in her shoulder while rafting the Colorado. "You should always have a strong prescription narcotic for situations like broken bones, dislocations, or burns." Freer recommends that you work with a doctor who will prescribe narcotics and help you decide when to use them.