

JET LAG

By Walter Waldeck

MID-WINTER in southern Africa means that the wealthy and even the not-so-wealthy who are air travellers and migrate north like the swallows moan about the currently fashionable complaint: jet lag.

It is not so serious on north-south or south-north air flights, say between Jan Smuts Airport and Frankfurt or London's Heathrow. Its effects are more pronounced on flights flanking the equator, either eastwards or westwards.

Man's inner clock is a more complicated mechanism than the lay person might suspect. At night the blood pressure is automatically reduced and even in the course of the day your physical performance varies in accordance with a fairly regular pattern.

Heartbeat varies. So do body temperatures and breath intake patterns. What is more, the efficacies of many medicines depends on these natural rhythms.

Jet lag is not a myth, but a real result of the disturbance of biological rhythms. The most self-evident biological sequence is the pattern of waking hours and sleep; everybody knows when a nap or a long sleep will be a good thing.

ON A HIGHER LEVEL, more attention is being given to jet lag by such specialist institutions as the Military Medical Institute in Pretoria and by the International Academy of Aviation and Space Medicine, which held a congress in Johannesburg a few years ago.

More and more it is becoming a subject of international research. It has now been established that the greater the jet lag, the longer its effects last.

If you overfly more than 10 time-zones, your body may need up to four days to adjust to the change. A difference of only two or three hours can be offset in a day or so.

There is still no pill to combat jet lag, although it is claimed that many patent medicines do so. This is the firm view of Dr Helmut Baark, senior medical officer to Germany's Lufthansa airline. He recently published a booklet on

medical advice for air travellers.

His first point is that no one, not even the healthiest of people, is at his or her best in the post-flight period of adjustment. Everybody is slightly disorientated.

If you are flying east, say from Jo'burg to Perth or Hong Kong, Dr Baark reckons you should get in as much sleep as possible, even taking a mild sedative if need be. You should then find it much easier to adjust to the time difference on arrival.

If, on the other hand, you are flying west, perhaps from Jan Smuts to Rio de Janeiro or New York, it would be better to stay awake and get in the sleep you need when you arrive.

But you should postpone sleep until the appropriate time. If you go to bed the moment you arrive

you are sure to wake up in the middle of the night and find that you cannot get back to sleep again, the good doctor warns.

Dr Baark's book contains tables outlining his advice to a variety of pill-takers flying either east or west, and also those who need injections rather than pills. He cites the chronic diabetic, for instance. This sufferer now usually treats himself by taking an insulin jab in the morning or two jabs, one in the morning and a second, usually the weaker dose, at night.

Dr Baark's advice to the one-shotter on a long flight from east to west is to take a jab halfway, and on arrival perhaps administer an interim jab and go to bed after

a light meal. The same procedure would apply if flying eastward.

Roughly the same advice applies to patients taking pills such as those prescribed to prevent blood clots; but of course your personal doctor should be consulted.

The doctor's final hint is as simple as it is sensible; when you fly, don't pack your medicines away at the bottom of your case.

