



How to avoid and treat seasickness

Professional ocean cruiser John Neal has treated over 400 seasick crew. Here he explains how you can avoid the worst feeling in the world



PHOTO: TOR JOHNSON PHOTOGRAPHY

My experience is that lying down, on deck or below, reduces nausea, I believe by preventing antihistamines reaching the brain

When day sailing, seasickness goes away once land is reached or the anchor is down.

However, for coastal or offshore passages longer than 24 hours, preventing or effectively treating seasickness matters as, untreated, it could result in incapacitation.

Seasickness is caused by sensory conflict and/or stress, both of which result in histamine production. Nausea results when histamine reaches the brain. Some are more susceptible than others but given the right – or should that be the wrong – conditions anyone can be seasick.

The responsibility for the safety of the vessel doesn't go away

'Given the right conditions anyone can become seasick'

if you're seasick. A continual watch for hazards, other vessels, navigation and weather monitoring must be maintained. It is extremely important to maintain your full watches no matter how you feel; lying in your bunk is not an option. Helping others get over seasickness as quickly as possible must be the focus and responsibility of all on board. Frequently seasick crew will ask to be left alone, saying they don't feel like drinking or eating anything. Leaving

them alone is a mistake. Keep them awake, sipping fluids and regularly eating small amounts.

Having dealt with over 400 seasick sailors over the past 40 years, my wife Amanda and I have become very experienced at prevention and treatment. To avoid seasickness or recover quickly, follow these steps.

Before sailing

- For 2-4 days before the passage, avoid coffee, black tea, colas and alcohol (all diuretics), fatty and histamine-producing foods including tuna, tomatoes, salami, hard cheeses and sauerkraut.

- Increase your water intake to 2-3 litres per day.

- Give each crew member their own one-litre water bottle labelled with their name.

- Start appropriate seasickness medication at least 24 hours prior to departure, which may be 2-3 grams of Vitamin C, which inhibits histamine production, or one of the medications below.

- Before departure, minimise time required below decks once underway by having meals planned and ready, bunks made up and lee cloths rigged, navigation organised and appropriate clothes laid out.

Once underway

- Whether or not you feel seasick, maintain a steady fluid intake of one litre per 2-3 hour

watch ensuring a total of 2-3 litres per day.

- As soon as seasick symptoms appear (mild headache, queasiness, sweating, drowsiness, depression) a more disciplined response is required.

- Add Berocca, Emer'gen-C (available in health food shops) or a similar vitamin-mineral drink mix containing Vitamin C, potassium and electrolyte replacement minerals to your drink bottle. The electrolyte replacement helps your cells absorb fluid more quickly and completely.

- Eat little and often: crackers, biscuits, crystallised ginger, tinned fruit or boiled sweets. Bananas provide potassium and are an excellent choice.

Feeling queasy?

- Take the helm, focusing on the horizon. If the boat is overpowered, reduce sail. If you are close-hauled, ease sheets and fall off.

- When going below, take your foulies off in the cockpit so you're not struggling out of them below. Minimise time working below. The faster you get back on deck or lie down, the better. Lying down is thought to decrease nausea by stopping histamines reaching the brain.

- Avoid lying down in your foulies for extended periods, to lessen the chance of hypothermia.

Offshore sailing offers a world of wonder but seasickness can blight the experience. Here's how to deal with it



PHOTO: TOR JOHNSON PHOTOGRAPHY

- Maintain medications and decide whether you need more, or different, medications.

Going to vomit?

- To avoid going overboard don't lean over the lifelines; use a two-litre plastic container with tight-fitting lid that you can use on deck and below.

- Most people feel much better afterwards, but make sure you keep up your fluid-electrolyte intake. Take small sips, stay hydrated, and keep your blood sugar level up.

- Repeated vomiting causes dehydration quickly, along with hypothermia (even in the tropics), anxiety, confusion, depression and shock. Once in shock, an

enema or IV is the next step to rehydration and your survival.

After departure, coastal wave refraction and associated chopiness should be followed by more regular ocean swells, so do not be initially discouraged by seasickness. In almost all cases sailors recover from seasickness within 1-4 days if they follow the above advice.

Remember it's your responsibility to do everything you can to get over, or help your crew get over, seasickness as quickly as possible. No one wants to be a liability onboard. Those who come through seasickness appreciate that managing it well is key to unlocking the pleasures of cruising under sail. ▲



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Research which medication works best for you, as medical issues can affect your choice. Try it ashore first to check for side effects

Find the right medication

Whether prescription or OTC (over-the-counter), most drugs have published side effects so do your research. If you have heart, blood pressure or prostate problems, tell your doctor or pharmacist, as some drugs may not be suitable. Test it ashore well before you leave to check for side effects.

Stugeron (Cinnarizine)

I've found that, in 15mg tablets, this OTC antihistamine is one the most effective anti-seasick medications, causing less drowsiness than other antihistamines. Stugeron Forte (75mg tablets) seems a bit too strong in my experience.

Buccastem (Prochlorperazine)

As 3mg buccal tablets (held under the tongue), I've found

this to be the most effective prescription anti-nausea and anti-anxiety medication that importantly causes minimal drowsiness. Anxiety can cause nausea and Prochlorperazine treats both. In many countries Prochlorperazine is available in 5, 10 or 25mg suppository form, which can be more effective than tablets once vomiting has started.

Transderm Scop

1.5mg Scopolamine patches may work when no other drug does, but try it on land first as documented side effects include blurred vision, restlessness and insomnia. Extreme side effects include confusion, disorientation and dizziness and, in a few cases, hallucinations and even acute psychosis.



PHOTO: TOR JOHNSON PHOTOGRAPHY

Always have your drink bottle handy, and dissolve rehydration powders or tablets in your bottle to rehydrate effectively



PHOTO: LESTER MCCARTHY/VM

Make meals, stow kit, rig lee cloths and passage plan before leaving to minimise time spent working below once on passage