



SUGGESTED VACCINATIONS FOR FOREIGN TRAVEL

No. 26b, 2015

EUROPE:	Grp 1	Grp 2	Grp 3	Grp 4
Albania	A	A	A	ABs
Belarus	A	A	ABf	ABfrs
Bosnia/Herzegovina	A	A	ABf	ABfs
Bulgaria	A	A	ABf	ABfrs
Croatia		A	Af	ABfs
Czech Republic		A	Af	ABf
Estonia		A	Af	ABfrs
Hungary		A	Af	ABfs
Latvia		A	Af	ABfrs
Lithuania		A	Af	ABfrs
Macedonia		A	Af	ABfs
Moldova	A	A	ABf	ABfrs
Montenegro		A	ABf	ABfs
Poland		A	Af	ABfrs
Romania	A	A	ABf	ABfrs
Russia	A	A	Aj ⁷ ₉ Bf	Aj ⁷ ₉ Bfrs
Serbia		A	ABf	ABfs
Slovakia		A	Af	ABfs
Slovenia		A	Af	ABf
Turkey	A	Av ⁵ ₉	Av ⁵ ₉	ATBrsv ⁵ ₉
standard tourist areas	A	A	A	ATBs
Ukraine	A	A	ABf	ABfrs
THE CARRIBEAN:				
Anguilla (UK)	A	A	A	ATB
Antigua and Barbuda	A	A	A	ATB
Aruba	A	A	A	ATB
Bahamas	A	A	A	ATB
Barbados	A	A	A	ATB
Bermuda (UK)	A	A	A	ATB
Cayman Islands (UK)	A	A	A	ATB
Cuba	A	A	A	ATBr
Dominica	A	A	A	ATB
Dominican Republic	Av	Aq	ABq	ATBrsq
Dutch Antilles	A	A	A	ATB
Grenada	A	A	A	ATB
Guadeloupe (FR)	A	A	A	ATB
Haiti	AX	AX	ABX	ATBrSX
Jamaica	A	A	A	ATB
Martinique (FR)	A	A	A	ATB
Montserrat	A	A	A	ATB
Puerto Rico (US)	A	A	A	ATB
Saint Kitts and Nevis	A	A	A	ATB
Saint Lucia	A	A	A	ATB
Saint Vincent/Grenadines	A	A	A	ATB
Trinidad and Tobago	Ag*	Ag*	Ag*	Ag*TB
Turks and Caicos (UK)	A	A	A	ATB
Virgin Islands (UK & US)	A	A	A	ATB
CENTRAL AND SOUTH AMERICA:				
Argentina	A	A	A	ATBs
Border districts: Brazil, Bolivia & Paraguay	A	AG*V	AG*V	AG*TBsv
Belize	Av	Av	Abv	ATBrsv
Bolivia	AgX	Agq	AgBq	AgTBrsq
Amazonas	AGX	AGX	AGBX	AGTBrSX

The vaccination suggestions have been slightly updated; see EPI-NEWS 25/15 and 26a/15. All travellers should have received diphtheria and tetanus vaccination. Symbols showing this are thus not included in the table.

The journey

As previously, suggestions are divided into four groups according to the type of journey undertaken:

1. Business or conference trip of some days' duration to a capital or other major city.
2. Tourist trip of up to four weeks' duration including day excursions. If the specific type of journey is associated with a risk of intense exposure, **Grp 2** may be supplemented from **Grp 3/4** e.g. with B in case of sexual contact to locals, T in the event of extremely poor hygiene, M in case of close personal contact to locals, j in case of bug exposition (trekking).
3. Individual journey of some months' duration, e.g. back-packing.
4. Prolonged individual journey with a minimum duration of six months, immigrants visiting relatives (irrespective of duration of stay), persons stationed abroad or similar frequently repeated visits.

Note: Suggestions will often need to be adapted to individual needs.

Symbol typography

CAPITAL LETTERS are used where a recommendation applies to all travellers, lower case letters where the application is limited. Malaria prophylaxis is in **bold type** and placed last in each column. Consequently, f, g, j, r, s refer to vaccination of selected travellers, while **v, q, x, z** refer to risk of malaria in a limited part of the country, www.ssi.dk/rejser (in Danish language). Seasonal variations are stated as numbers. When the risk is seasonal, usually limited to the rainy season, the first and last months of the relevant period are stated in superscript and subscript after the letter, e.g. Afghanistan **x⁵₁₁**. Note that rainy seasons may vary from year to year, so the numbers only serve as a rule of thumb.

A: Hepatitis A
B: Hepatitis B
f: FSME/TBE
g/G: Yellow fever

g/G*: Yellow fev. (possible certain risk only)
j: Japanese encephalitis
M: Meningococcus A+C+W135+Y
r: Rabies

s: Tuberculosis
T: Typhoid fever
(T): Typhoid fever >2 weeks
V: Mosquito bite prophylaxis

Q: Chloroquine
X: Mefloquine/Malarone/doxycykline
Z: Doxycykline/Malarone



	Grp 1	Grp 2	Grp 3	Grp 4
Brazil	A	Ag	AgB	AgTBrs
Amazonas	AGX	AGX	AGBX	AGTBrsX
Chile	A	A	A	ATBs
Columbia	Ag*	Ag*x	Ag*Bx	Ag*TBrsx
Amazonas	AGX	AGX	AGBX	AGTBrsX
Costa Rica	A	Av	ABv	ATBrv
Ecuador	A	Ag*x	Ag*Bx	Ag*TBrsx
Amazonas	AGX	AGX	AGBX	AGTBrsX
Galápagos Islands	A	A	A	ATB
El Salvador	A	Av	ABv	ATBrsv
French Guiana	AG	AGx	AGBx	AGTBrx
Guatemala	A	Aq	ABq	ATBrsq
Guyana	AG	AGx	AGBx	AGTBrsx
Honduras	AV	Aq	ABq	ATBrsq
Mexico	A	Av	ABv	ATBrsv
Nicaragua	Aq	Aq	ABq	ATBrsq
Panama	A	Agx	AgBx	AgTBrsx
Paraguay	AG	AGq	AGq	AGTBrsq
Peru	A	Ag*q	Ag*Bq	Ag*TBtrsq
Amazonas (Loreto)	AGX	AGX	AGBX	AGTBrsX
Surinam	AG	AGx	AGBx	AGTBrsx
Uruguay	A	A	A	ATBs
Venezuela	Ag*	Ag*q	Ag*Bq	Ag*TBrsq
Amazonas, Bolivar, Margarita Island	AGX	AGX	AGBX	AGTBrsX
Margarita Island	A	A	A	ATB

OCEANIA:

Caroline Islands	A	A	AB	ATBs
Christmas Island (AU)	A	A	AB	ATBs
Cocos Islands (AU)	A	A	AB	ATBs
Cook Islands	A	A	AB	ATBs
Fiji	A	A	AB	ATBs
French Polynesia	A	A	AB	ATBs
Guam (US)	A	A	AB	ATBs
Kiribati	A	A	AB	ATBs
Micronesia	A	A	AB	ATBs
Nauru	A	A	AB	ATBs
New Caledonia (FR)	A	A	AB	ATBs
Niue	A	A	AB	ATBs
Northern Mariana Islands	A	A	AB	ATBs
Papua New Guinea	AX	AX	ABX	ATBsX
Pitcairn Islands	A	A	AB	ATBs
Samoa	A	A	AB	ATBs
Solomon Islands	AX	AX	ABX	ATBsX
Tokelau (NZ)	A	A	AB	ATBs
Tonga	A	A	AB	ATBs
Tuvalu	A	A	AB	ATBs
Vanuatu	AX	AX	ABX	ATBsX
Wake Island (US)	A	A	AB	ATBs
Wallis and Futuna (FR)	A	A	AB	ATBs

AFRICA:

Algeria	A	A	AB	ATBrs
Angola	AGX	AGX	AGBX	AGTBrsX
Benin	AGX	AGMX	AGMBX	AGMTBrsX
Botswana	A	Ax ¹¹ ₆	ABx ¹¹ ₆	ATBrsx ¹¹ ₆
Burkina Faso	AGX	AGMX	AGMBX	AGMTBrsX
Burundi	AGX	AGX	AGBX	AGTBrsX
Cameroon	AGX	AGMX	AGMBX	AGMTBrsX

Key to symbols

- A: Hepatitis A (from 1 year of age). Recommended to all immigrant children born in DK, EPI-NEWS 35/02. Immunoglobulin may be given to children < 1 year.
- B: Hepatitis B (from birth). Revaccination is not recommended, EPI-NEWS 11/13.
- f: Tick borne encephalitis (FSME/TBE), for regular activities in grassy deciduous woodlands during the summer half of the year.
- g/G: Yellow fever (from 9 months).
g/G*: Yellow fever, possible certain risk only. See country specific advice at www.ssi.dk/rejser (in Danish)
- j: Japanese encephalitis (from 2 months), EPI-NEWS 37/09, 6/12 and 10/13.
- M: Meningococcal disease A + C + W135 + Y (from 1 year, poss. from 2 months EPI-NEWS 10/13). Mandatory for pilgrimage to Mecca, EPI-NEWS 34/14.
- r: Rabies.
- s: Tuberculosis. BCG for children (from birth) and adolescents in case of stay in high endemic areas and regular contact with local population living in poor conditions. Potentially also in the event of prolonged occupational exposure.
- T: Typhoid fever. Injection from app. 2 years, special risk cases from 18 months. Capsules from app. 5 years of age. Recommended to immigrants visiting relatives and friends, irrespective of duration of stay.

Malaria prophylaxis:

- V: Very limited risk, mosquito bite prophylaxis sufficient.
- Q: Chloroquine, alternatively V or X depending on infection risk.
- X: Mefloquine, Malarone or doxy-cycline.
- Z: Doxycycline or Malarone.

Basic vaccination of children and persons who have not received standard childhood vaccinations: EPI-NEWS 2/11.

Vaccination of children prior to stays in developing countries: EPI-NEWS 6/11.

Selected vector-borne viral diseases

EPI-NEWS 6/12.

A: Hepatitis A
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Cape Verde	A	Av ⁸ ₁₁	ABv ⁸ ₁₁	ATBsv ⁸ ₁₁
Central African Republic	AGX	AGMX	AGMBX	AGMTBrSX
Chad	AgX	AgMX	AgMBX	AgMTBrSX
Chagos Islands (UK)	A	A	AB	ATBrS
Comoro Islands	AX	AX	ABX	ATBrSX
Congo	AGX	AGX	AGBX	AGTBrSX
Dem. Rep. Congo (Zaire)	Ag*X	Ag*X	Ag*BX	Ag*TBrSX
Djibouti	AX	AX	ABX	ATBrSX
Egypt	A	A	AB	ATBrS
Equatorial Guinea	AGX	AGX	AGBX	AGTBrSX
Eritrea	Ag*X	Ag*MX	Ag*MBX	Ag*MTBrSX
Asmara	A	AM	AMB	AMTBrS
Ethiopia	Ag*X	Ag*MX	Ag*MBX	Ag*MTBrSX
Addis Ababa	AG	AGM	AGMB	AGMTBrS
Gabon	AGX	AGX	AGBX	AGTBrSX
Gambia	AGX	AGMX	AGMBX	AGMTBrSX
Ghana	AGX	AGMX	AGMBX	AGMTBrSX
Guinea	AGX	AGX	AGBX	AGTBrSX
Guinea-Bissau	AGX	AGX	AGBX	AGTBrSX
Ivory Coast	AGX	AGMX	AGMBX	AGMTBrSX
Kenya	Ag*X	Ag*X	Ag*BX	Ag*TBrSX
Nairobi	Ag*	Ag*	Ag*B	Ag*TBrS
Lesotho	A	A	AB	ATBrS
Liberia	AGX	AGX	AGBX	AGTBrSX
Libya	A	A	AB	ATB
Madagascar	AX	AX	ABX	ATBrSX
Malawi	AX	AX	ABX	ATBrSX
Mali	AGX	AGMX	AGMBX	AGMTBrSX
Mauretania	Agx	Agx	AgBx	AgTBrSx
Mauritius	A	A	AB	ATBs
Mayotte (FR)	AX	AX	ABX	ATBrSX
Morocco	A	A	AB	ATBrS
Mozambique	AX	AX	ABX	ATBrSX
Namibia	A	Ax	ABx	ATBrSx
Niger	AGX	AGMX	AGMBX	AGMTBrSX
Nigeria	AGX	AGMX	AGMBX	AGMTBrSX
Réunion (FR)	A	A	AB	ATBrS
Rwanda	AGX	AGX	AGBX	AGTBrSX
São Tomé and Príncipe	Ag*X	Ag*X	Ag*BX	Ag*TBrSX
Senegal	AGX	AGMX	AGMBX	AGMTBrSX
Seychelles	A	A	AB	ATBs
Sierra Leone	AGX	AGX	AGBX	AGTBrSX
Somalia	Ag*X	Ag*X	Ag*BX	Ag*TBrSX
Sudan	AgX	AgMX	AgMBX	AgMTBrSX
Swaziland	Ax	Ax	ABx	ATBrSx
South African Republic	A	Ax	ABx	ATBrSx
South Sudan	AGX	AGMX	AGMBX	AGMBrSX
Tanzania	Ag*X	Ag*X	Ag*BX	Ag*TBrSX
Togo	AGX	AGMX	AGMBX	AGMTBrSX
Tunisia	A	A	AB	ATBrS
Uganda	AGX	AGMX	AGMBX	AGMTBrSX
Zambia	Ag*X	Ag*X	Ag*BX	Ag*TBrSX
Zimbabwe	AX	AX	ABX	ATBrSX
Harare, Bulawayo	A	A	AB	ATBrS

ASIA:

Afghanistan	A	A(T)x ⁵ ₁₁	ATBx ⁵ ₁₁	ATBrSx ⁵ ₁₁
Armenia	A	A	AB	ATBrS

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(T): Typhoid fever >2 weeks
V: Mosquito bite prophylaxis

Cholera vaccination

Cholera vaccination is not recommended against ordinary travel diarrhoea. Vaccination may be relevant in connection with stays in areas with cholera outbreaks.

Special regulatory requirements

Some countries require yellow fever vaccination of all travellers, see www.who.int/ith. Stays/transit in countries where yellow fever may occur can result in a vaccination requirement at a later stage of the journey (yellow fever transmission zone, see www.ssi.dk/rejser (in Danish language)). WHO does not recommend revaccination against yellow fever, EPI-NEWS 26a/13.

Meningococcal vaccination against group A + C + W135 + Y is required for pilgrimage to Saudi Arabia from 2 years of age (children 3 months-2 years against group A), EPI-NEWS 38/13.

There are a few other country specific requirements, see EPI-NEWS 26a/15.

Malaria prophylaxis

Primary mosquito bite prophylaxis using balm/net/spray is always important in malaria areas. Four different pharmacological prophylaxis regimens are listed below:

Chloroquine should only be used in areas with *P. vivax* and with no *P. falciparum* risk. May be used by pregnant women and children.

Mefloquine is efficacious against *P. falciparum* in Africa, but not in all areas of Southeast Asia. According to the WHO, mefloquine may be used for prophylaxis in pregnancy; in the first trimester only when unavoidable. Mefloquine should not be used prophylactically in children under 3 months of age or children weighing less than 5 kgs, or by patients with epilepsy or previous neuropsychiatric illness; nor should it be used by persons practicing diving. Mefloquine should be initiated 3 weeks prior to departure.

Malarone is efficacious against *P. falciparum*. Resistance is very rare. Malarone should not be used in pregnant and breast-feeding women, EPI-NEWS 26a/13.

Doxycycline is efficacious against *P. falciparum* but contraindicated in pregnant women after 10. gestation week and children < 12 years, EPI-NEWS 19/05 and 26a/13. Prophylaxis for children, see EPI-NEWS 19/05.

Q: Chloroquine
X: Mefloquine/Malarone/doxycycline
Z: Doxycycline/Malarone



	Grp 1	Grp 2	Grp 3	Grp 4
Azerbaijan	A	Av ⁶ ₁₀	ABv ⁶ ₁₀	ATBrsv ⁶ ₁₀
Bahrain	A	A	AB	ATBs
Bangladesh	Av	A(T)x	Aj ⁵ ₁₀ Brx	Aj ⁵ ₁₀ TBrsx
Dhaka	A	A(T)	Aj ⁵ ₁₀ TBr	Aj ⁵ ₁₀ TBrS
Bhutan	A	A(T)x	Aj ⁶ ₁₀ TBrx	Aj ⁶ ₁₀ TBrSx
Brunei	A	AV	AjBV	AjTBsV
Cambodia	Av	AZ	Aj ⁵ ₁₀ BrZ	Aj ⁵ ₁₀ TBrSxZ
Angkor Wat, Tonlé Sap	A	AV	Aj ⁵ ₁₀ BrV	Aj ⁵ ₁₀ TBrSv
China, north of latitude 25°	A	A	Aj ⁶ ₁₀ B	Aj ⁶ ₁₀ TBrS
China, south of latitude 25°	A	Aq	Aj ⁶ ₁₀ Bq	Aj ⁶ ₁₀ TBrSq
Hainan, Yunnan	Ax	Ax	Aj ⁶ ₁₀ Bx	Aj ⁶ ₁₀ TBrSx
Hong Kong	A	A	AB	ATBs
Macau	A	A	AB	ATB
East Timor	AX	AX	AjBX	AjTBrSx
Georgia	A v ⁶ ₁₀	Av ⁶ ₁₀	ABv ⁶ ₁₀	ATBrsv ⁶ ₁₀
India, north	AV	A(T)V	Aj ⁵ ₁₀ TBrV	Aj ⁵ ₁₀ TBrSv
India, Central & East	AV	A(T)X	Aj ⁵ ₁₀ TBrX	Aj ⁵ ₁₀ TBrSx
India, south & west, incl. Goa	AV	A(T)V	AjTBrV	AjTBrSv
Indonesia	A	Ax	AjBx	AjTBrSx
Bali, Java (tourist areas)	A	A	AjB	AjTBs
Papua	AX	AX	AjBX	AjTBrSx
Iran	A	Ax ³ ₁₁	ABx ³ ₁₁	ATBrSx ³ ₁₁
Iraq	A	AT	ATB	ATBrS
Israel	A	A	AB	ATBr
Japan			j ⁷ ₁₀ B	j ⁷ ₁₀ B
Jordan	A	A	AB	ATBr
Kazakhstan	A	A	AB	ATBrS
Kyrgyzstan	A	Av ⁶ ₁₀	ABv ⁶ ₁₀	ATBrsv ⁶ ₁₀
Kuwait	A	A	AB	ATBs
Laos	Av	AX	Aj ⁶ ₉ Bx	Aj ⁶ ₉ TBrSx
Vientiane	A	A	Aj ⁶ ₉ B	Aj ⁶ ₉ TBrS
Lebanon	A	A	AB	ATBr
Malaysia	A	Ax	AjBx	AjTBrSx
Sabah and Sarawak	A	Ax	AjBx	AjTBsx
Maldives	A	A	AB	ATBs
Mongolia	A	A	AB	ATBrS
Myanmar (Burma)	A	AZ	Aj ⁵ ₁₀ BrZ	Aj ⁵ ₁₀ TBrSxZ
Nepal (Poliovacc. required)	A	A(T)v	Aj ⁶ ₁₀ TBrv	Aj ⁶ ₁₀ TBrSv
North Korea	A	Av	Aj ⁵ ₁₀ Bv	Aj ⁵ ₁₀ TBrSv
Oman	A	Av	ABv	ATBrv
Pakistan	AX	A(T)X	Aj ⁵ ₁₀ TBrX	Aj ⁵ ₁₀ TBrSx
Philippines	A	Ax	AjBx	AjTBrSx
Qatar	A	A	AB	ATB
Saudi Arabia	A	Ax ⁹ ₁	ABx ⁹ ₁	ATBsx ⁹ ₁
Mecca (Hajj)	AM	AM	AMB	AMTBs
Singapore	A	A	AB	ATBs
Sri Lanka	A	A(T)v	AjTBrv	AjTBrSv
South Korea	A	Av	Aj ⁵ ₁₀ Bv	Aj ⁵ ₁₀ Bsv
Syria	A	A	AB	ATBrS
Taiwan	A	A	Aj ⁵ ₁₀ B	Aj ⁵ ₁₀ TBs
Tajikistan	A	Av ⁶ ₁₀	ABv ⁶ ₁₀	ATBrsv ⁶ ₁₀
Thailand	A	Az	Aj ⁵ ₁₀ Brz	Aj ⁵ ₁₀ TBrSxZ
Standard tourist areas	A	Av	Aj ⁵ ₁₀ Brv	Aj ⁵ ₁₀ TBrSv
Turkmenistan	A	A	AB	ATBrS
United Arab Emirates	A	A	AB	ATBr
Uzbekistan	A	Av ⁵ ₉	ABv ⁵ ₉	ATBrsv ⁵ ₉
Vietnam	A	Az	Aj ⁵ ₁₀ Bz	Aj ⁵ ₁₀ TBrSxZ
Yemen	Av	Ax	ABx	ATBrSx

Malaria self-treatment

In general, self-treatment cannot replace medical prophylaxis or specific diagnostics. Whenever possible, malaria patients should be examined by a physician and a blood smear microscopy should be performed before malaria treatment is initiated. When staying in remote malaria areas with more than 24-48 hours to the nearest medical service, travellers should be supplied with malaria medication for self-treatment to supplement prophylactic measures. An agent not included in the prophylactic regimen should be chosen:

If mefloquine, doxycycline or chloroquine have been used, possibly in combination with proguanil, Malarone is recommended (adults: 4 tablets daily for three days).

If Malarone has been used, mefloquine is used for self-treatment (adults: 3 tablets as a single dose, followed by a single tablet 6-8 hours later).

Travel medicine on the Internet

Current information on outbreaks and detailed information on individual countries and diseases:

www.ssi.dk/rejser (in Danish)

www.um.dk

www.who.int/ith

www.cdc.gov/travel

www.promedmail.org

(C.S Larsen, Danish Society of Travel Medicine, S. Thybo, Danish Infectious Diseases Society, J. Kurtzhals, Danish Society for Clinical Microbiology, N.E. Møller, Danish College of GPs, L. Vestergaard, Danish Society of Tropical Medicine & Int. Health, K. Gade, Danish Paediatric Society, P.H. Andersen, A.H. Christiansen, Department of Infectious Disease Epidemiology).

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