



PREVENTION GUIDELINES: ADDITIONAL RECOMMENDATIONS

Cholera Vaccination is recommended for aid and refugee workers only. Vaccine is available in many countries, but not in the U.S.

Hepatitis A Immunization with hepatitis A vaccine is recommended for all travelers to Asia, Africa and Latin America.

Hepatitis B Immunization with hepatitis B vaccine is recommended for prolonged stays; frequent short stays in this or other high risk countries; adventure travelers; the possibility of acupuncture, dental work, or tattooing; all health care workers; the possibility of a new sexual partner during stay; and travelers with high potential to seek medical care in local facilities. Consider for short stays in travelers desiring maximum pre-travel preparation. Increased awareness is recommended regarding safe sex and body fluid/blood precautions.

Meningococcal Immunization with quadrivalent vaccine (A, C, Y, W-135) is recommended for travelers during the dry season to sub-Saharan Africa (May through October) that anticipate prolonged contact with the local populace, risk-averse travelers during the dry season, and all health care workers throughout the year. Although this country does not lie within the standard meningitis belt, a pattern of epidemic outbreaks in the past decade makes this country epidemic prone. Epidemic activity has been reported primarily in the far northern region of the country. (Note: Mozambique's dry season differs from countries in the meningitis belt because it lies south of the Equator.)

Polio One adult booster of polio vaccine is recommended (in addition to an adequate primary series according to normal indications).

Rabies Risk should be presumed to occur in many areas of the world. Rabies vaccine is recommended for prolonged stays with priority for young children. Also recommended for shorter stays at locations more than 24 hours travel from a reliable source of human rabies immune globulin and rabies vaccine for postexposure treatment; occupational exposure; all adventure travelers, hikers, cave explorers, and backpackers. Consider for risk-averse travelers desiring maximum pre-travel preparation. All dog bites or scratches while in this country should be taken seriously and post-exposure prophylaxis sought even in those already immunized.

Typhoid Immunization with typhoid vaccine is recommended for all travelers to Asia, Africa and Latin America.

ROUTINE

An adequate primary series of tetanus/diphtheria/pertussis vaccine plus booster within the last 10 years (Tdap or Td) is recommended. Adults who have not received a previous dose of an acellular pertussis-containing vaccine in adulthood should receive a one-time dose of Tdap vaccine in place of a Td booster. Measles/mumps vaccine is indicated for those born in 1957 or later (1970 or later in Canada) without history of disease or of 2 adequate doses of live vaccine at any time during their life. Many countries (including the U.K.) recommend that adults need to have had only 1 countable dose at any time during their life. Pneumococcal vaccine is indicated for all adults over 65 and those with chronic disease or compromising conditions. Varicella vaccine is indicated for all persons born outside the U.S. or born in the U.S. after 1979, except not indicated for persons with an adequate vaccination history (2 lifetime doses), reliable evidence of previous infection, or laboratory confirmation of immunity.

Influenza, 2009 H1N1 --Transmission is still occurring. Vaccine is recommended for all travelers. Consider a standby treatment course of oseltamivir for unvaccinated travelers, especially those who are at high risk for complications from influenza.

Influenza, Seasonal -- Seasonal flu is transmitted throughout the year in the tropics and all travelers are at increased risk. Vaccine is recommended for all travelers. Consider a standby treatment course of oseltamivir for unvaccinated travelers, especially those who are at high risk for complications from influenza.