

Vaccinations

Below you will find information about disease, the risk of contagion, and preventive vaccinations.

- DTP - Diphtheria Tetanus Polio
- Yellow fever
- Hepatitis A
- Typhoid fever
- Cerebrospinal meningitis
- Hepatitis B
- Tickborne encephalitis
- Rabies

DTP - Diphtheria Tetanus Polio

Risk-prone areas:

All travelers should make sure any DTP vaccinations are up to date before leaving, no matter which country they are flying to: Africa, Asia, South America, Eastern Europe.

Description:

Diphtheria is a bacterial infection transmitted through saliva. It manifests itself in the form of an aggravated sore throat, which can be complicated by respiratory paralysis that is sometimes fatal. Although it has all but disappeared from industrialized countries, the disease reappeared in Eastern Europe during the 1990s.

Tetanus comes from a bacterium that can contaminate an open wound into which dirt, man-made objects, or even thorns have entered. The infection causes violent muscular contractions that can interfere with breathing and cause death.

Poliomyelitis, caused by a virus, can be caught through the absorption of contaminated water or food while bathing or by contact with a diseased person. The disease is characterized by varying degrees of paralysis and is still common in many African, Asian, and East European countries. It affects people of all ages.

Vaccination:

In France, a polio vaccination is compulsory for all children. The first three injections are given at one month intervals, with a booster after one year, then every five years until the age of 18.

After 18: a booster injection every 10 years.

If you had your last booster shot more than 10 years ago: two booster injections at one month intervals, then in another 10 years.

If you have never been vaccinated: two injections at one month intervals, booster shot after one year, then every ten years.

Yellow fever

Risk-prone areas:

Tropical regions in African and South America.

Description:

Yellow fever is caused by a virus contracted from a mosquito bite. Along with high fever, the disease can cause hemorrhaging and severe jaundice (yellow coloring of the skin) within a week. Yellow fever is fatal in eighty percent of all known cases.

Vaccination:

This is the only mandatory vaccination required by international health regulations in certain countries for everyone over one year of age. The vaccination certificate must appear on an international vaccination record issued by an authorized center. Whether compulsory or not, the vaccination is essential when traveling to risk-prone areas and many Asian countries require it when traveling from an infected region.

- one injection at least 10 days before departure if it is your first injection,
- duration: 10 years.

Contraindications may occur in pregnant women, infants under six months, anyone allergic to eggs, undergoing corticosteroid treatment, or with an immunodeficiency. These must be evaluated on a case-by-case basis.

Hepatitis A

Risk-prone areas:

Hepatitis A is endemic in Africa, Asia, and South America.

Description:

Hepatitis A – or jaundice – is caused by a virus that can be transmitted by water, food, or dirty hands. It results in digestive disorders and jaundice (yellow coloration of the skin), with possible complications.

Vaccination:

Anyone who has never had the disease and will travel to countries with poor hygiene facilities should get vaccinated. Anyone who has been in contact with the hepatitis A virus is immunized for life. Screening for antibodies before travel is useful to determine if the vaccination is needed.

- For the first vaccination, one injection two to three weeks before leaving,
- one booster 6 to 12 months later,
- followed by one booster every 10 years.

Typhoid fever

Risk-prone areas:

All regions with poor hygiene facilities.

Description:

Typhoid is transmitted by contaminated water and food and causes high fever. Victims can develop severe digestive, heart, or neurological problems.

Vaccination:

Vaccination is highly recommended if traveling to Asia, North and South Africa, and South America. The need for vaccination also depends on the conditions and length of your stay. In general the vaccine is administered to children age five and older, although in certain cases, children as young as two can be vaccinated.

- one injection two weeks before leaving,
- duration: three years.

Cerebrospinal meningitis

Risk-prone areas:

Endemic in Saharan Africa, the Amazon basin, and Asia. Sporadic outbreaks elsewhere, including Europe.

Description:

The meningococcus bacterium is the cause of this acute meningitis, which can kill in a matter of hours. It is transmitted orally and has the following symptoms: fever, violent headaches, stiff neck. Occurrence is a medical emergency, but the disease responds to treatment with antibiotics.

Vaccination:

The vaccine protects against most forms of meningitis except for a strain that sometimes occurs in France. Anyone over the age of 18 months traveling in regions infected by susceptible strains must be vaccinated. In cases of contact or if there is an epidemic, infants under 18 months can also be vaccinated.

- one injection, at least 10-15 days before departure,
- duration: 3 years.

Note: a specific vaccine is required for travelers making the pilgrimage to Mecca.

- one injection at least 10 days before departure,
- duration: 3 years.

Hepatitis B

Risk-prone areas:

Sub-Saharan Africa, Southeast Asia and Europe.

Description:

Viral disease transmitted by the blood or through sexual contact. Hepatitis B is fatal in roughly 10 percent of known cases in France. The infection can manifest itself in the form of liver disorders or have no symptoms at all. The disease is serious because of the risk of later complications, including cirrhosis and liver cancer, which can sometimes appear years after being infected.

Vaccination:

Recommended for all ages for long-term residence or if engaging in high-risk activities in developing countries, where the disease is common.

- two injections at one month intervals then one injection six months later
- for faster immunity, for professions exposed to risk, for persons at risk, and for those who anticipate frequent stays in risk-prone areas: three injections at one month intervals and a booster shot after one year
- no booster before the age of 25
- after the age of 25, depending on risk exposure, an antibody test may be needed before receiving a booster shot.

Tickborne encephalitis

Risk-prone areas:

Central and Eastern Europe, Northern Asia. Especially in April, May, October, and November.

Description:

This is a kind of viral meningitis, which can be serious or result in subsequent neurological disorders. Usually caught from a tick bite, the disease can also be transmitted through food, especially unpasteurized or unboiled milk. Incubation takes 7 to 15 days.

Vaccination:

Anyone can be vaccinated except for expectant mothers and infants under the age of one.

- two injections at one-month intervals (may be shortened to 15 days). Between the ages of 3 and 16 years, the first injection is half the usual dose
- first booster after 9-12 months
- then every three years.

Rabies

Risk-prone areas:

Africa, Asia, South America.

Description:

Rabies is contracted from the saliva of rabid animals, or if scratched or bitten by them. In nearly all cases these are domestic animals, primarily cats and dogs. A wound from a dirty utensil can also transmit the infection, which can be fatal if not treated quickly.

Vaccination:

In the event of suspected contamination of a non-vaccinated subject, a course of curative vaccination must be initiated as quickly as possible at a rabies control center. The usual protocol is:

- five injections: immediately, 3rd day, 7th day, 14th day, 28th day.

Preventive vaccination is recommended for all travelers who will spend more than a month in affected areas, especially if hiking or camping.

- three injections on day 0, day 7, and day 28 (the last injection can be taken as early as day 21),
- booster after one year then every five years,
- if you are bitten or scratched by a rabid animal, even if you have been vaccinated, you must go to a rabies control center. Supplemental injections may be required.