

Country list

Vaccination requirements and malaria situation¹

Introduction

The information provided for each country includes the name and approximate altitude of the capital city, the requirements for mandatory yellow fever vaccination where these apply, and details concerning the malaria situation and recommended prophylaxis.

Yellow fever vaccination

Yellow fever vaccination is carried out for two different purposes:

- *To protect individual travellers* who may be exposed to yellow fever infection. Vaccination in these cases is recommended but not mandatory. As yellow fever is frequently fatal for those who have not been vaccinated, vaccination is recommended for all travellers (with few exceptions—see Chapter 6) intending to visit areas where there may be a risk of exposure to yellow fever.
- *To protect countries* from the risk of importing yellow fever virus. This is mandatory vaccination and is a requirement for entry into the countries concerned.

Travellers should be warned that the requirement for vaccination against yellow fever is not related to the risk of exposure to the disease.

The countries that require proof of vaccination² are those where the disease does *not* occur but where the mosquito vector and non-human primate hosts of yellow fever are present. Consequently, any importation of the virus by an infected traveller could result in its establishment and propagation in the local mosquitoes and primates, leading to a risk of infection for the human population.

¹ For the purpose of this publication, the term “country” covers countries, territories and areas.

² Please note that the requirements for vaccination of infants over 6 months of age by some countries is not in accordance with WHO’s recommendations (see Chapter 6). Travellers should however be informed that the requirement exists for entry into the countries concerned.

Proof of vaccination is required for all travellers coming *from* countries where yellow fever occurs, including transit through such countries. The international yellow fever vaccination certificate becomes valid 10 days after vaccination and remains valid for a period of 10 years.

The fact that a country has no mandatory requirement for vaccination does not imply that there is no risk of yellow fever infection.

In accordance with the International Health Regulations, countries are required to notify all cases of yellow fever to WHO. Such countries are then considered to be “infected areas”. This terminology is likely to change in the revised version of the Regulations, but is meantime retained in the following country list to maintain consistency with the official reports provided by the WHO Member States. The list of infected areas is published in the *Weekly epidemiological record*.

In addition, countries are considered to be “endemic areas” for yellow fever if the virus is present in mosquitoes and non-human primates and where there is therefore a potential risk of infection for humans (see map).

Other

Routine vaccination (see Chapter 6). It is recommended that all travellers are fully vaccinated with the appropriate routine vaccines; schedules for booster doses should be followed at the recommended time intervals.

Cholera. No country requires a certificate of vaccination against cholera as a condition for entry. For information on selective use of cholera vaccines, see Chapter 6.

Smallpox. Since the global eradication of smallpox was certified in 1980, WHO does not recommend smallpox vaccination for travellers.

Hepatitis A. Vaccination against hepatitis A is recommended for all travellers to developing countries and to countries with economies in transition.

Information on other vaccines for selective use is given in Chapter 6.

Infectious diseases. Information on the main infectious disease threats for travellers, their geographical distribution, and corresponding precautions is provided in Chapter 5.

Malaria. General information about the disease, its geographical distribution and details of preventive measures are included in Chapter 7. Protective measures against mosquito bites are described in Chapter 3. Specific information for each country is provided in this section, including epidemiological details for all countries with malarious areas (geographical and seasonal distribution, altitude, predominant species, reported resistance). The recommended prevention is also

indicated. The recommended prevention for each country is decided on the basis of the following factors: the risk of contracting malaria; the prevailing species of malaria parasites in the area; the level and spread of drug resistance reported from the country; and the possible risk of serious side-effects resulting from the use of the various prophylactic drugs. Where *P. falciparum* and *P. vivax* both occur, prevention of falciparum malaria takes priority.

The numbers I, II, III and IV refer to the type of prevention based on the table below.

	Malaria risk	Type of prevention
Type I	Very limited risk of malaria transmission	Mosquito bite prevention only
Type II	Risk of <i>P. vivax</i> malaria or fully chloroquine-sensitive <i>P. falciparum</i> only	Mosquito bite prevention plus chloroquine chemoprophylaxis
Type III	Risk of malaria transmission and emerging chloroquine resistance	Mosquito bite prevention plus chloroquine+proguanil chemoprophylaxis
Type IV	High risk of falciparum malaria plus drug resistance, or moderate/low risk falciparum malaria but high drug resistance	Mosquito bite prevention plus either mefloquine, doxycycline or atovaquone/proguanil (take one that no resistance is reported for in the specific areas to be visited)

Please note that altitudes quoted in this list are averages for guidance only.

AFGHANISTAN

Capital Kabul

Altitude 1800 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—*P. vivax* and *P. falciparum*—exists from May through November below 2000 m. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

ALBANIA

Capital Tirana

Altitude 130 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

ALGERIA

Capital Algiers

Altitude 30 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk is limited. Small foci of local transmission (*P. vivax*) have been reported in the 6 southern and south-eastern wilayas (Adrar, El Oued, Ghardaia, Illizi, Ouargla, Tamanrasset). Isolated local *P. falciparum* transmission has been reported from the two southernmost wilayas in areas under influence of trans-Saharan migration. No indigenous cases reported in 2005.

Recommended prevention in risk areas: **I**

AMERICAN SAMOA**Capital** Pago Pago**Altitude** 10 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**ANDORRA****Capital** Andorra la Vella**Altitude** 1410 m

No vaccination requirements for any international traveller.

ANGOLA**Capital** Luanda**Altitude** 10 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistant to chloroquine and sulfadoxine–pyrimethamine reported.Recommended prevention: **IV****ANGUILLA****Capital** The Valley**Altitude** 0 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**ANTIGUA AND BARBUDA****Capital** St John's**Altitude** 0 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**ARGENTINA****Capital** Buenos Aires**Altitude** 30 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—exclusively due to *P. vivax*—is very low and is confined to rural areas along the borders with Bolivia (lowlands of Jujuy and Salta provinces) and with Paraguay (lowlands of Corrientes and Misiones provinces).Recommended prevention in risk areas: **II****ARMENIA****Capital** Yerevan**Altitude** 1000 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—exclusively due to *P. vivax*—exists focally from June through October in some of the villages located in Ararat Valley, mainly in the Masis district. No risk in tourist areas.Recommended prevention: **I****AUSTRALIA****Capital** Canberra**Altitude** 610 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age entering Australia within 6 days of having stayed overnight or longer in an infected country, as listed in the *Weekly epidemiological record*.**AUSTRIA****Capital** Vienna**Altitude** 170 m

No vaccination requirements for any international traveller.

AZERBAIJAN**Capital** Baku**Altitude** 0 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—exclusively due to *P. vivax*—exists from June through October in lowland areas, mainly in the area between the Kura and the Arax rivers.Recommended prevention: **I****BAHAMAS****Capital** Nassau**Altitude** 10 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**BAHRAIN****Capital** Manama**Altitude** 0 m

No vaccination requirements for any international traveller.

BANGLADESH**Capital** Dhaka**Altitude** 10 m

Yellow fever: Any person (including infants) who arrives by air or sea without a certificate is detained in isolation for a period of up to 6 days if arriving within 6 days of departure from an infected area or having been in transit in such an area, or having come by an aircraft that has been in an infected area and has not been disinfected in accordance with the procedure and formulation laid down in Schedule VI of the Bangladesh Aircraft (Public Health) Rules 1977 (First Amendment) or those recommended by WHO.

The following countries and areas are regarded as infected:

Africa: Angola, Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Malawi, Mali, Mauritania, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Somalia, Sudan (south of 15°N), Togo, Uganda, United Republic of Tanzania, Zambia.

America: Belize, Bolivia, Brazil, Colombia, Costa Rica, Ecuador, French Guiana, Guatemala, Guyana, Honduras, Nicaragua, Panama, Peru, Suriname, Trinidad and Tobago, Venezuela.

Note. When a case of yellow fever is reported from any country, that country is regarded by the Government of Bangladesh as infected with yellow fever and is added to the above list.

Malaria: Malaria risk exists throughout the year in the whole country excluding Dhaka city. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

BARBADOS**Capital** Bridgetown**Altitude** 10 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

BELARUS**Capital** Minsk**Altitude** 210 m

No vaccination requirements for any international traveller

BELGIUM**Capital** Brussels**Altitude** 80 m

No vaccination requirements for any international traveller.

BELIZE**Capital** Belmopan**Altitude** 60 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—almost exclusively due to *P. vivax*—exists in all districts but varies within regions. Risk is highest Toledo and Stan Creek Districts; moderate in Corozal and Cayo; and low in Belize District and Orange Walk. No resistant *P. falciparum* strains reported.

Recommended prevention in risk areas: **II**

BENIN

Capital Porto-Novo (constitutional) / Cotonou (seat of Government)

Altitude 40 m / 50 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

BERMUDA**Capital** Hamilton**Altitude** 0 m

No vaccination requirements for any international traveller.

BHUTAN**Capital** Thimphu**Altitude** 2740 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk exists throughout the year in the southern belt of the country comprising five districts: Chhukha, Samchi, Samdrup Jonkhar, Geyleg-phug and Shemgang. *P. falciparum*

resistant to chlo-roquine and sulfadoxine-pyrimethamine reported.

Recommended prevention in risk areas: **IV**

BOLIVIA

Capital La Paz (administrative) /
Sucre (legislative)

Altitude 3700 m / 2800 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas. Vaccination is recommended for incoming travellers from non-infected zones visiting risk areas such as the departments of Beni, Cochabamba and Santa Cruz, and the subtropical part of La Paz Department.

Malaria: Malaria risk—predominantly due to *P. vivax* (95%)—exists throughout the year in the whole country below 2500m. Falciparum malaria occurs in Santa Cruz and in the northern departments of Beni and Pando, especially in the localities of Guayamerín and Riberalta. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention in risk areas: **II**; in Beni, Pando and Santa Cruz, **IV**.

BOSNIA AND HERZEGOVINA

Capital Sarajevo

Altitude 520 m

No vaccination requirements for any international traveller.

BOTSWANA

Capital Gaborone

Altitude 1000 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from or having passed through infected areas. The countries and areas included in the endemic zones are considered as infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists from November to May/June in the northern parts of the country: Boteti, Chobe, Ngamiland, Okavango, Tutume districts/sub-districts. Chloroquine-resistant *P. falciparum* reported.

Recommended prevention in risk areas: **IV**.

BRAZIL

Capital Brasilia

Altitude 1000 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 9 months of age coming from infected areas, unless they are in possession of a waiver stating that immunization is contraindicated on medical grounds.

Vaccination is recommended for travellers to endemic areas, including rural areas in the states of Acre, Amapá, Amazonas, Goiás, Maranhão, Mato Grosso, Mato Grosso do Sul, Pará, Rondônia, Roraima and Tocantins, and to others states areas where transmission risk exists including all the state of Minas Gerais and specific areas of Espírito Santo, Piauí, Bahia, São Paulo, Paraná, Santa Catarina and Rio Grande do Sul. The complete list of municipalities are available at www.saude.gov.br/svs.

Malaria: Malaria risk—*P. vivax* (78%), *P. falciparum* (22%)—is present in most forested areas below 900 m within the nine states of the “Legal Amazonia” region (Acre, Amapá, Amazonas, Maranhão (western part), Mato Grosso (northern part), Pará (except Belém City), Rondônia, Roraima and Tocantins). Transmission intensity varies from municipality to municipality, but is higher in jungle areas of mining, lumbering and agricultural settlements less than 5 years old, than in the urban areas, including in large cities such as Pôrto Velho, Boa Vista, Macapá, Manaus, Santarém, Rio Branco and Marabá, where the transmission occurs on the periphery of these cities. In the states outside “Legal Amazonia”, malaria transmission risk is negligible or non-existent. Multidrug-resistant *P. falciparum* reported.

Recommended prevention in risk areas: **IV**.

BRITISH VIRGIN ISLANDS

Capital Road Town

Altitude 0 m

No vaccination requirements for any international traveller.

BRUNEI DARUSSALAM

Capital Bandar Seri Begawan

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas or having passed through partly or wholly endemic areas within the preceding 6 days. The countries and areas included in the endemic zones are considered as infected areas.

BULGARIA**Capital** Sofia**Altitude** 570 m

No vaccination requirements for any international traveller.

BURKINA FASO**Capital** Ouagadougou**Altitude** 320 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

BURMA *see* **MYANMAR****BURUNDI****Capital** Bujumbura**Altitude** 780 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

CAMBODIA**Capital** Phnom Penh**Altitude** 20 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country except in Phnom Penh and close around Tonle Sap. Risk within the tourist area of Angkor Wat is limited. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported. Resistance to mefloquine reported in western provinces near the Thai border.

Recommended prevention: **IV**

CAMEROON**Capital** Yaoundé**Altitude** 730 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistant to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

CANADA**Capital** Ottawa**Altitude** 80 m

No vaccination requirements for any international traveller.

CAPE VERDE**Capital** Praia**Altitude** 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from countries having notified cases in the last 6 years.

Malaria: Limited malaria risk exists from September through November in São Tiago Island.

Recommended prevention: **I**

CAYMAN ISLANDS**Capital** Georgetown**Altitude** 0 m

No vaccination requirements for any international traveller

CENTRAL AFRICAN REPUBLIC**Capital** Bangui**Altitude** 380 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

CHAD**Capital** N'Djamena**Altitude** 300 m**Yellow fever:** Yellow fever vaccination is recommended for all travellers over 1 year of age.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.Recommended prevention: **IV****CHILE****Capital** Santiago**Altitude** 520 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers coming from endemic areas and travelling to Eastern Island.**CHINA****Capital** Beijing**Altitude** 60 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers coming from infected areas.**Malaria:** Malaria risk—including *P. falciparum* malaria—occurs in Hainan and Yunnan. Chloroquine and sulfadoxine-pyrimethamine resistant *P. falciparum* reported. Limited risk of *P. vivax* malaria exists in southern and some central provinces, including Anhui, Henan, Hubei, and Jiangsu. The risk may be higher in areas of focal outbreaks. There is no malaria risk in urban areas nor in the densely populated plain areas. Recommended prevention in risk areas: **II**; in Hainan and Yunnan, **IV**.Recommended prevention in risk areas: **II**; in Hainan and Yunnan, **IV****CHINA, HONG KONG SAR****Capital** Hong Kong**Altitude** 30 m

No vaccination requirements for any international traveller.

CHINA, MACAO SAR**Capital** Macao**Altitude** 10 m

No vaccination requirements for any international traveller.

CHRISTMAS ISLAND

(Indian Ocean)

Capital The Settlement**Altitude** 0 m

Same requirements as mainland Australia.

COLOMBIA**Capital** Bogotá**Altitude** 2600 m**Yellow fever:** Vaccination is recommended for travellers who may visit the following areas considered to be endemic for yellow fever: middle valley of the Magdalena river, eastern and western foothills of the Cordillera Oriental from the frontier with Ecuador to that with Venezuela, Urabá, foothills of the Sierra Nevada, eastern plains (Orinoquia) and Amazonia.**Malaria:** Malaria risk—*P. falciparum* (38%), *P. vivax* (62%)—is high throughout the year in rural/jungle areas below 800 m, especially in municipalities of the regions of Amazonia, Orinoquia, Pacífico and Urabá-Bajo Cauca. Transmission intensity varies by department, with highest risk in the departments of Amazonas, Caquetá, Chocó, Córdoba, Guainía, Guaviare, Meta, Nariño, Valle del Cauca, Vaupés and Vichada. Chloroquine-resistant *P. falciparum* exists in Amazonia, Pacífico and Urabá-Bajo Cauca. Resistance to sulfadoxine-pyrimethamine reported.Recommended prevention in risk areas: **III**; in Amazonia, Pacifico and Urabá-Bajo Cauca, **IV****COMOROS****Capital** Moroni**Altitude** 10 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.Recommended prevention: **IV****CONGO****Capital** Brazzaville**Altitude** 300 m**Yellow fever:** A yellow fever vaccination certificate is required from all travellers over 1 year of age.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the

whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

CONGO, DEMOCRATIC REPUBLIC OF THE (formerly ZAIRE)

Capital Kinshasa

Altitude 200 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

COOK ISLANDS

Capital Avarua

Altitude 210 m

No vaccination requirements for any international traveller.

COSTA RICA

Capital San José

Altitude 1160 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—almost exclusively due to *P. vivax*—occurs throughout the year in the provinces of Limón and Puntarenas, with highest risk in the cantons—Guacimo, Limón, Matina and Talamanca (Limón Province) and Garabito (Puntarenas Province). Negligible or no risk of malaria transmission exists in the other cantons of the country.

Recommended prevention in risk areas: **II**

CÔTE D'IVOIRE

Capital Yamoussoukro / Abidjan
(seat of Government)

Altitude 220 m / 50 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

CROATIA

Capital Zagreb

Altitude 140 m

No vaccination requirements for any international traveller.

CUBA

Capital Havana

Altitude 30 m

No vaccination requirements for any international traveller.

CYPRUS

Capital Nicosia

Altitude 140 m

No vaccination requirements for any international traveller.

CZECH REPUBLIC

Capital Prague

Altitude 250 m

No vaccination requirements for any international traveller.

DENMARK

Capital Copenhagen

Altitude 0 m

No vaccination requirements for any international traveller.

DJIBOUTI

Capital Djibouti

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

DOMINICA

Capital Roseau

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

DOMINICAN REPUBLIC**Capital** Santo Domingo**Altitude** 380 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—exclusively due to *P. falciparum*—exists throughout the year, especially in the western provinces and in La Altagracia province. Risk in other areas is low to negligible. There is no evidence of *P. falciparum* resistance to any antimalarial drug.

Recommended prevention in risk areas: **II**

ECUADOR**Capital** Quito**Altitude** 2800 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas. Nationals and residents of Ecuador are required to possess certificates of vaccination on their departure to an infected area.

Malaria: Malaria risk—*P. falciparum* (23%), *P. vivax* (77%)—exists throughout the year below 1500 m, with moderate to high transmission risk in El Oro, Esmeraldas, Guayas, Los Rios, Manabi, Morona Santiago, Napo, Orellana, Pastaza, Pichincha and Sucumbios. There is no risk in Guayaquil or Quito. *P. falciparum* resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention in risk areas: **IV**

EGYPT**Capital** Cairo**Altitude** 20 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas. The following countries and areas are regarded as infected areas; air passengers in transit coming from these countries or areas without a certificate will be detained in the precincts of the airport until they resume their journey:

Africa: Angola, Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Mali, Niger, Nigeria, Rwanda, Sao Tome and

Principe, Senegal, Sierra Leone, Somalia, Sudan (south of 15°N), Togo, Uganda, United Republic of Tanzania, Zambia.

America: Belize, Bolivia, Brazil, Colombia, Costa Rica, Ecuador, French Guiana, Guyana, Panama, Peru, Suriname, Trinidad and Tobago, Venezuela.

All arrivals from Sudan are required to possess either a vaccination certificate or a location certificate issued by a Sudanese official centre stating that they have not been in Sudan south of 15°N within the previous 6 days.

Malaria: Very limited *P. falciparum* and *P. vivax* malaria risk may exist from June through October in El Faiyûm governorate (no indigenous cases reported since 1998).

Recommended prevention: **none**

EL SALVADOR**Capital** San Salvador**Altitude** 680 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 6 months of age coming from infected areas.

Malaria: Very low malaria risk—almost exclusively due to *P. vivax*—exists throughout the year in Santa Ana Province, in rural areas of migratory influence from Guatemala. Sporadic *P. vivax* malaria cases are reported from other parts of the country.

Recommended prevention in risk areas: **II**

EQUATORIAL GUINEA**Capital** Malabo**Altitude** 380 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

ERITREA**Capital** Asmara**Altitude** 2400 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country below 2200 m. There is no risk in Asmara. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

ESTONIA

Capital Tallinn

Altitude 40 m

No vaccination requirements for any international traveller.

ETHIOPIA

Capital Addis Ababa

Altitude 2400 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country below 2000 m. *P. falciparum* resistance to chloroquine and sulfadoxine–pyrimethamine reported. There is no malaria risk in Addis Ababa.

Recommended prevention: **IV**

FALKLAND ISLANDS (MALVINAS)

Capital Stanley

Altitude 0 m

No vaccination requirements for any international traveller.

FAROE ISLANDS

Capital Torshavn

Altitude 0 m

No vaccination requirements for any international traveller.

FJI

Capital Suva

Altitude 10 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age entering Fiji within 10 days of having stayed overnight or longer in infected areas.

FINLAND

Capital Helsinki

Altitude 20 m

No vaccination requirements for any international traveller.

FRANCE

Capital Paris

Altitude 40 m

No vaccination requirements for any international traveller.

FRENCH GUIANA

Capital Cayenne

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—*P. falciparum* (80%), *P. vivax* (20%)—is high throughout the year in nine municipalities of the territory bordering Brazil (Oiapoque river valley) and Suriname (Maroni river valley). In the other 13 municipalities transmission risk is low or negligible. Multidrug-resistant *P. falciparum* reported in areas influenced by Brazilian migration.

Recommended prevention in risk areas: **IV**

FRENCH POLYNESIA

Capital Papeete

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

GABON

Capital Libreville

Altitude 10 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

GAMBIA

Capital Banjul

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age arriving from endemic or infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

GEORGIA

Capital Tbilisi

Altitude 400 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—exclusively due to *P. vivax*—exists focally from July to October in the south-eastern part of the country.

Recommended prevention: **I**

GERMANY

Capital Berlin

Altitude 50 m

No vaccination requirements for any international traveller.

GHANA

Capital Accra

Altitude 70 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

GIBRALTAR

Capital Gibraltar

Altitude 450 m

No vaccination requirements for any international traveller.

GREECE

Capital Athens

Altitude 150 m

No vaccination requirements for any international traveller.

GREENLAND

Capital Nuuk

Altitude 0 m

No vaccination requirements for any international traveller.

GRENADA

Capital Saint George's

Altitude 30 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

GUADELOUPE

Capital Basse-Terre

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

GUAM

Capital Agana

Altitude 0 m

No vaccination requirements for any international traveller.

GUATEMALA

Capital Guatemala City

Altitude 1500 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from countries with infected areas.

Malaria: Malaria risk—predominantly due to *P. vivax*—exists throughout the year below 1500 m. There is moderate to high risk in the departments of Alta Verapaz, Baja Verapaz, Escuintla, Huehuetenango, Izabal, Petén, Quiché (Ixcan) and Retalhuleu.

Recommended prevention in risk areas: **II**

GUINEA

Capital Conakry

Altitude 230 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine reported.

Recommended prevention: **IV**

GUINEA-BISSAU**Capital** Bissau**Altitude** 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas, and from the following countries:

Africa: Angola, Benin, Burkina Faso, Burundi, Cape Verde, Central African Republic, Chad, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Djibouti, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Kenya, Liberia, Madagascar, Mali, Mauritania, Mozambique, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Somalia, Togo, Uganda, United Republic of Tanzania, Zambia.

America: Bolivia, Brazil, Colombia, Ecuador, French Guiana, Guyana, Panama, Peru, Suriname, Venezuela.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine—pyrimethamine reported.

Recommended prevention: **IV**

GUYANA**Capital** Georgetown**Altitude** 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas and from the following countries:

Africa: Angola, Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Mali, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Somalia, Togo, Uganda, United Republic of Tanzania.

America: Belize, Bolivia, Brazil, Colombia, Costa Rica, Ecuador, French Guiana, Guatemala, Honduras, Nicaragua, Panama, Peru, Suriname, Venezuela.

Malaria: Malaria risk—*P. falciparum* (42–48%), *P. vivax* (52–58%)—is high throughout the year in all parts of the interior. Highest risk occurs in Regions 1, 7, 8 and 9; moderate risk in Region 2; and low risk in Regions 4, 6 and 10. Sporadic cases of malaria have been reported from the

densely populated coastal belt. Chloroquine-resistant *P. falciparum* reported.

Recommended prevention in risk areas: **IV**

HAITI**Capital** Port-au-Prince**Altitude** 100 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—exclusively due to *P. falciparum*—exists throughout the year in certain forest areas in Chantal, Gros Morne, Hinche, Jacmel and Maissade. In the other cantons, risk is estimated to be low. No *P. falciparum* resistance to chloroquine reported.

Recommended prevention in risk areas: **II**

HONDURAS**Capital** Tegucigalpa**Altitude** 960 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. vivax*—is high throughout the year in the provinces of Colón, Gracias a Dios, and Islas de la Bahía; and moderate in the province of Atlántica. *P. falciparum* risk is the highest in Colón, Gracias a Dios, and the Islas de la Bahía.

Recommended prevention: **II**

HONG KONG SPECIAL ADMINISTRATIVE REGION OF CHINA *see* CHINA**HUNGARY****Capital** Budapest**Altitude** 110 m

No vaccination requirements for any international traveller.

ICELAND**Capital** Reykjavik**Altitude** 20 m

No vaccination requirements for any international traveller.

INDIA**Capital** New Delhi**Altitude** 210 m

Yellow fever: Anyone (except infants up to the age of 6 months) arriving by air or sea without a certificate is detained in isolation for up to 6 days if that person (*i*) arrives within 6 days of departure from an infected area, or (*ii*) has been in such an area in transit (excepting those passengers and members of the crew who, while in transit through an airport situated in an infected area, remained within the airport premises during the period of their entire stay and the Health Officer agrees to such exemption), or (*iii*) has come on a ship that started from or touched at any port in a yellow fever infected area up to 30 days before its arrival in India, unless such a ship has been disinfected in accordance with the procedure laid down by WHO, or (*iv*) has come by an aircraft which has been in an infected area and has not been disinfected in accordance with the provisions laid down in the Indian Aircraft Public Health Rules, 1954, or those recommended by WHO. The following countries and areas are regarded as infected:

Africa: Angola, Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Mali, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Somalia, Sudan, Togo, Uganda, United Republic of Tanzania, Zambia.

America: Bolivia, Brazil, Colombia, Ecuador, French Guiana, Guyana, Panama, Peru, Suriname, Trinidad and Tobago, Venezuela.

Note. When a case of yellow fever is reported from any country, that country is regarded by the Government of India as infected with yellow fever and is added to the above list.

Malaria: Malaria risk exists throughout the year in the whole country below 2000 m, with overall 40% to 50% of cases due to *P. falciparum*. There is no transmission in parts of the states of Himachal Pradesh, Jammu and Kashmir, and Sikkim. Risk of falciparum malaria and drug resistance are relatively higher in the north-eastern states, in Andaman and Nicobar Islands, Chhat-

tisgarh, Goa, Gujarat, Jharkhand, Karnataka (with exception of the city of Bangalore), Madhya Pradesh, Maharashtra (with the exception of the cities of Mumbai, Nagpur, Nasik and Pune), Orissa and West Bengal (with the exception of the city of Kolkata) *P. falciparum* resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **III**. In the listed higher risk areas: **IV**

INDONESIA**Capital** Jakarta**Altitude** 10 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas. The countries and areas included in the endemic zones (see map page 84) are considered by Indonesia as infected areas.

Malaria: Malaria risk exists throughout the year in the whole country except in Jakarta Municipality, big cities, and within the areas of the tourist resorts of Bali and Java. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported. *P. vivax* resistant to chloroquine reported.

Recommended prevention in risk areas: **IV**

IRAN, ISLAMIC REPUBLIC OF**Capital** Tehran**Altitude** 1150 m

No vaccination requirements for any international traveller.

Malaria: Limited risk—exclusively due to *P. vivax*—exists during the summer months in Ardebil and East Azerbaijan provinces north of the Zagros mountains. Malaria risk due to *P. vivax* and *P. falciparum* exists from March through November in rural areas of the provinces of Hormozgan, Kerman (tropical part) and the southern part of Sistan-Baluchestan. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **II** in *P. vivax* risk areas; **IV** in *P. falciparum* risk areas.

IRAQ**Capital** Baghdad**Altitude** 40 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—exclusively due to *P. vivax*—exists from May through November, principally in areas in the north below 1500 m (Duhok, Erbil and Sulaimaniya provinces) but also in Basrah Province.

Recommended prevention: **II**

IRELAND

Capital Dublin

Altitude 30 m

No vaccination requirements for any international traveller.

ISRAEL

No vaccination requirements for any international traveller.

ITALY

Capital Rome

Altitude 30 m

No vaccination requirements for any international traveller.

JAMAICA

Capital Kingston

Altitude 30 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

JAPAN

Capital Tokyo

Altitude 10 m

No vaccination requirements for any international traveller.

JORDAN

Capital Amman

Altitude 800 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

KAZAKHSTAN

Capital Astana

Altitude 356 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

KENYA

Capital Nairobi

Altitude 1800 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. There is normally little risk in the city of Nairobi and in the highlands (above 2500 m) of Central, Eastern, Nyanza, Rift Valley and Western provinces. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

KIRIBATI

Capital Tarawa

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

KOREA, DEMOCRATIC PEOPLE'S REPUBLIC OF

Capital Pyongyang

Altitude 0 m

No vaccination requirements for any international traveller.

Malaria: Limited malaria risk—exclusively due to *P. vivax*—exists in some southern areas.

Recommended prevention: **I**

KOREA, REPUBLIC OF

Capital Seoul

Altitude 60 m

No vaccination requirements for any international traveller.

Malaria: Limited malaria risk—exclusively due to *P. vivax*—exists mainly in the northern areas of Kyunggi Do and Gangwon Do Provinces.

Recommended prevention: **I**

KUWAIT

Capital Kuwait

Altitude 30 m

No vaccination requirements for any international traveller.

KYRGYZSTAN**Capital** Bishkek**Altitude** 730 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk – exclusively due to *P. vivax* – exists from June through October in some southern and western parts of the country, mainly in areas bordering Tajikistan and Uzbekistan – Batken, Osh and Jalal-Abad regions. The first case of autochthonous *P. falciparum* malaria was reported in 2004 in the southern part of the country, in an area bordering Uzbekistan.

Recommended prevention: **I**

LAO PEOPLE'S DEMOCRATIC REPUBLIC**Capital** Vientiane**Altitude** 160 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country except in Vientiane. Chloroquine and sulfadoxine–pyrimethamine resistant *P. falciparum* reported.

Recommended prevention: **IV**

LATVIA**Capital** Riga**Altitude** 0 m

No vaccination requirements for any international traveller.

LEBANON**Capital** Beirut**Altitude** 50 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

LESOTHO**Capital** Maseru**Altitude** 1700 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

LIBERIA**Capital** Monrovia**Altitude** 10 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

LIBYAN ARAB JAMAHIRIYA**Capital** Tripoli**Altitude** 20 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

LIECHTENSTEIN**Capital** Vaduz**Altitude** 600 m

No vaccination requirements for any international traveller.

LITHUANIA**Capital** Vilnius**Altitude** 180 m

No vaccination requirements for any international traveller.

LUXEMBOURG**Capital** Luxembourg**Altitude** 340 m

No vaccination requirements for any international traveller.

MACAO SPECIAL ADMINISTRATIVE REGION OF CHINA *see* CHINA**MACEDONIA, THE FORMER YUGOSLAV REPUBLIC OF****Capital** Skopje**Altitude** 240 m

No vaccination requirements for any international traveller.

MADAGASCAR**Capital** Antananarivo**Altitude** 1300 m

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country, with the highest risk in the coastal areas. Resistance to chloroquine reported.

Recommended prevention: **IV**

MALAWI

Capital Lilongwe

Altitude 1030 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistant to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

MALAYSIA

Capital Kuala Lumpur

Altitude 50 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age arriving within 6 days from yellow fever endemic areas. The countries and areas included in the endemic zones are considered as infected areas.

Malaria: Malaria risk exists only in limited foci in the deep hinterland. Urban and coastal areas are free from malaria. *P. falciparum* throughout the year. *P. falciparum* resistant to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention in risk areas: **IV**

MALDIVES

Capital Malé

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

MALI

Capital Bamako

Altitude 340 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

MALTA

Capital Valletta

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 9 months of age coming from infected areas. If indicated on epidemiological grounds, infants under 9 months of age are subject to isolation or surveillance if coming from an infected area.

MARSHALL ISLANDS

Capital Majuro

Altitude 0 m

No vaccination requirements for any international traveller.

MARTINIQUE

Capital Fort-de-France

Altitude 0 m

No vaccination requirements for any international traveller.

MAURITANIA

Capital Nouakchott

Altitude 10 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age, except those arriving from a non-infected area and staying less than 2 weeks in the country.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country, except in the northern areas: Dakhlet-Nouadhibou and Tiris-Zemour. In Adrar and Inchiri there is malaria risk during the rainy season (July through October). Resistance to chloroquine reported.

Recommended prevention in risk areas: **IV**

MAURITIUS

Capital Port Louis

Altitude 90 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas. The countries and areas included in the endemic zones (see map page 84) are considered as infected areas.

Malaria: Malaria risk—exclusively due to *P. vivax*—may exist in certain rural areas (no

indigenous cases reported since 1998). There is no risk on Rodrigues Island.

Recommended prevention: **none**

MAYOTTE (FRENCH TERRITORIAL COLLECTIVITY)

Capital Mamoudzou

Altitude 280 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

MEXICO

Capital Mexico City

Altitude 2250 m

Yellow fever: No vaccination requirements for any international traveller.

Malaria: Malaria risk—almost exclusively due to *P. vivax*—exists throughout the year in some rural areas that are not often visited by tourists. There is high risk of transmission in some localities in the states of Chiapas and Oaxaca; moderate risk in the states of Chihuahua, Sinaloa and Tabasco; and low risk in Campeche, Durango, Guerrero, Michoacán, Jalisco, Nayarit, Quintana Roo, Sonora, Veracruz and Yucatan.

Recommended prevention in risk areas: **II**

MICRONESIA, FEDERATED STATES OF

Capital Palikir

Altitude 0 m

No vaccination requirements for any international traveller.

MOLDOVA, REPUBLIC OF

Capital Chisinau

Altitude 100 m

No vaccination requirements for any international traveller.

MONACO

Capital Monaco

Altitude 0 m

No vaccination requirements for any international traveller.

MONGOLIA

Capital Ulaanbaatar

Altitude 1300 m

No vaccination requirements for any international traveller.

MONTSERRAT

Capital Plymouth

Altitude 120 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

MOROCCO

Capital Rabat

Altitude 0 m

No vaccination requirements for any international traveller.

Malaria: Very limited malaria risk—exclusively due to *P. vivax*—may exist from May to October in certain rural areas of Chefchaouen Province (no indigenous cases reported in 2005).

Recommended prevention: **I**

MOZAMBIQUE

Capital Maputo

Altitude 50 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

MYANMAR (FORMERLY BURMA)

Capital Yangon

Altitude 20 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas. Nationals and residents of Myanmar are required to possess certificates of vaccination on their departure to an infected area.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year at altitudes below 1000 m, excluding the main urban

areas of Yangon and Mandalay. Risk is highest in remote rural, hilly and forest areas. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported. Mefloquine resistance reported in Kayin state and the eastern part of Shan state. *P. vivax* with reduced sensitivity to chloroquine reported.

Recommended prevention: **IV**

NAMIBIA

Capital Windhoek

Altitude 1720 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas. The countries, or parts of countries, included in the endemic zones in Africa and South America are regarded as infected,

Travellers on scheduled flights that originated outside the areas regarded as infected, but who have been in transit through these areas, are not required to possess a certificate provided that they remained at the scheduled airport or in the adjacent town during transit. All passengers whose flights originated in infected areas or who have been in transit through these areas on unscheduled flights are required to possess a certificate. The certificate is not insisted upon in the case of children under 1 year of age, but such infants may be subject to surveillance.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists from November to June in the following regions: Oshana, Oshikoto, Omusati, Omaheke, Oshana and Otjozondjupa. Risk throughout the year exists along the Kunene river and in Kavango and Caprivi regions. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention in risk areas: **IV**

NAURU

Capital Yaren

Altitude 10 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

NEPAL

Capital Kathmandu

Altitude 1300 m

Yellow fever: A yellow fever vaccination cer-

tificate is required from travellers coming from infected areas.

Malaria risk—predominantly due to *P. vivax*—exists throughout the year in rural areas of the 20 Terai districts (including forested hills and forest areas) bordering with India, and in parts of the inner Terai valleys of Udaypur, Sindhupalchowk, Makwanpur, Chitwan and Dang. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention in risk areas: **III**

NETHERLANDS

Capital Amsterdam / The Hague
(seat of Government)

Altitude 0 m / 0 m

No vaccination requirements for any international traveller.

NETHERLANDS ANTILLES

Capital Willemstad

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 6 months of age coming from infected area

NEW CALEDONIA AND DEPENDENCIES

Capital Nouméa

Altitude 10 m

Cholera: Vaccination against cholera is not required. Travellers coming from an infected area are not given chemoprophylaxis, but are required to complete a form for use by the Health Service.

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Note. In the event of an epidemic threat to the territory, a specific vaccination certificate may be required.

NEW ZEALAND

Capital Wellington

Altitude 70 m

No vaccination requirements for any international traveller.

NICARAGUA

Capital Managua

Altitude 70 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. vivax*—exists throughout the year in 119 municipalities, with the highest risk in 7 municipalities in the department of RA Atlántico Sur and moderate risk in 6 municipalities in RA Atlántico Norte. Cases are reported from 138 other municipalities in the central and western department; but the risk in these areas is considered low or negligible. No chloroquine-resistant *P. falciparum* reported.

Recommended prevention in risk areas: **II**

NIGER

Capital Niamey

Altitude 220 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age and recommended for travellers leaving Niger.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Chloroquine-resistant *P. falciparum* reported.

Recommended prevention: **IV**

NIGERIA

Capital Abuja

Altitude 360 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

NIUE

Capital Alofi

Altitude 10 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

NORTHERN MARIANA ISLANDS

Capital Saipan

Altitude 0 m

No vaccination requirements for any international traveller.

NORWAY

Capital Oslo

Altitude 50 m

No vaccination requirements for any international traveller.

OMAN

Capital Muscat

Altitude 20 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: No indigenous *P. vivax* or *P. falciparum* cases reported since 2001.

Recommended prevention: **none**

PAKISTAN

Capital Islamabad

Altitude 350 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from any part of a country in which yellow fever is endemic; infants under 6 months of age are exempt if the mother's vaccination certificate shows that she was vaccinated before the birth of the child. The countries and areas included in the endemic zones are considered as infected areas.

Malaria: Malaria risk—*P. vivax* and *P. falciparum*—exists throughout the year in the whole country below 2000 m. *P. falciparum* resistant to chloroquine and sulfadoxine–pyrimethamine reported.

Recommended prevention: **IV**

PALAU

Capital Koror

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age coming from infected areas or from countries in any part of which yellow fever is endemic.

PANAMA

Capital Panama City

Altitude 20 m

Yellow fever: A yellow fever vaccination certificate is recommended for all travellers going to Chepo, Darién and San Blas.

Malaria: Malaria risk—predominantly due to *P. vivax* (83%); *P. falciparum* (17%)—exists throughout the year in provinces along the Atlantic coast and the border with Colombia: Bocas del Toro, Colon, Darien, Embera, Kuna Yala, Ngobe Bugle, panama and Veraguas. In the other provinces there is no or negligible risk of transmission. Chloroquine-resistant *P. falciparum* has been reported in Darién and San Blas provinces.

Recommended prevention in risk areas: **II**; in eastern endemic areas, **IV**

PAPUA NEW GUINEA

Capital Port Moresby

Altitude 20 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country below 1800 m. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported. *P. vivax* resistant to chloroquine reported.

Recommended prevention: **IV**

PARAGUAY

Capital Asunción

Altitude 60 m

Yellow fever: A yellow fever vaccination certificate is required from travellers leaving Paraguay to go to endemic areas and from travellers coming from endemic areas.

Malaria: Malaria risk—exclusively due to *P. vivax*—is moderate in certain municipalities of the departments of Alto Paraná, Caaguazú, Caazapa, Canendiyú and Guaira. In the other departments there is no or negligible transmission risk.

Recommended prevention in risk areas: **II**

PERU

Capital Lima

Altitude 90 m

Yellow fever: Yellow fever vaccination is required from travellers over 6 months of age coming from infected areas and is recommended for those who intend to visit jungle areas of the country below 2300 m.

Malaria: Malaria risk—*P. vivax* (84%), *P. falciparum* (16%)—is high in 21 of the 33 sanitary regions, including Ayacucho, Cajamarca, Cerro de Pasco, Chachapoyas, Chanca-Andahuaylas, Cutervo, Cusco, Huancavelica, Jaen, Junín, La Libertad, Lambayeque, Loreto, Madre de Dios, Piura, San Martín, Tumbes and Ucayali. *P. falciparum* transmission reported in Jaen, Lambayeque, Loreto, Luciano Castillo, Piura, San Martín, Tumbes and Ucayali. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **II** in *P. vivax* risk areas; **IV** in *P. falciparum* risk areas.

PHILIPPINES

Capital Manila

Altitude 20 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk exists throughout the year in areas below 600 m, except in the provinces of Aklan, Benguet, Biliran, Bohol, Camiguin, Capiz, Catanduanes, Cebu, Guimaras, Iloilo, Leyte, Masbate, northern Samar, Sejujor and metropolitan Manila. No risk is considered to exist in urban areas or in the plains. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention in risk areas: **IV**

PITCAIRN

Capital Adamstown

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

POLAND

Capital Warsaw

Altitude 100 m

No vaccination requirements for any international traveller.

PORTUGAL

Capital Lisbon

Altitude 50 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age

coming from infected areas. The requirement applies only to travellers arriving in or bound for the Azores and Madeira. However, no certificate is required from passengers in transit at Funchal, Porto Santo and Santa Maria.

PUERTO RICO

Capital San Juan

Altitude 10 m

No vaccination requirements for any international traveller.

QATAR

Capital Doha

Altitude 20 m

No vaccination requirements for any international traveller.

REUNION

Capital Saint-Denis

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

ROMANIA

Capital Bucharest

Altitude 80 m

No vaccination requirements for any international traveller.

RUSSIAN FEDERATION

Capital Moscow

Altitude 160 m

No vaccination requirements for any international traveller.

RWANDA

Capital Kigali

Altitude 1550 m

Yellow fever: A yellow fever vaccination certificate is required from all travellers over 1 year of age.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

SAINT HELENA

Capital Jamestown

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

SAINT KITTS AND NEVIS

Capital Basseterre

Altitude 360 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

SAINT LUCIA

Capital Castries

Altitude 200 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas

SAINT PIERRE AND MIQUELON

Capital Saint-Pierre

Altitude 360 m

No vaccination requirements for any international traveller.

SAINT VINCENT AND THE GRENADINES

Capital Kingstown

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

SAMOA

Capital Apia

Altitude 0 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

SAN MARINO

Capital San Marino

Altitude 290 m

No vaccination requirements for any international traveller.

SAO TOME AND PRINCIPE**Capital** Sao Tomé**Altitude** 0 m**Yellow fever:** A yellow fever vaccination certificate is required from all travellers over 1 year of age.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year. Chloroquine-resistant *P. falciparum* reported.Recommended prevention: **IV****SAUDI ARABIA****Capital** Riyadh**Altitude** 610 m**Yellow fever:** A yellow fever vaccination certificate is required from all travellers coming from countries, any parts of which are infected.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in most of the South-western Region (except in the high-altitude areas of Asir Province). No risk in Mecca or Medina cities. Chloroquine-resistant *P. falciparum* reported.Recommended prevention in risk areas: **IV****SENEGAL****Capital** Dakar**Altitude** 20 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers coming from endemic areas.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. There is less risk from January through June in the central western regions. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.Recommended prevention: **IV****SEYCHELLES****Capital** Victoria**Altitude** 0 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas or who have passed through partly or wholly endemic areas within the preceding 6 days. The countries and areas included in the endemic zones are considered as infected areas.**SIERRA LEONE****Capital** Freetown**Altitude** 50 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers coming from infected areas.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.Recommended prevention: **IV****SINGAPORE****Capital** Singapore**Altitude** 50 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas. Certificates of vaccination are required from travellers over 1 year of age who, within the preceding 6 days, have been in or have passed through any country partly or wholly endemic for yellow fever. The countries and areas included in the endemic zones are considered as infected areas:**Africa:** Angola, Benin, Burkina Faso, Burundi, Cameroon, Cape Verde, Central African Republic, Chad, Congo, Cote d'Ivoire, Democratic Republic of Congo, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Madagascar, Mali, Mauritania, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Somalia, Sudan, Togo, Uganda, United Republic of Tanzania.**America:** Argentina, Bolivia, Brazil, Colombia, Ecuador, French Guyana, Guyana, Panama, Paraguay, Peru, Trinidad and Tobago, Suriname, Venezuela.**SLOVAKIA****Capital** Bratislava**Altitude** 130 m

No vaccination requirements for any international traveller.

SLOVENIA**Capital** Ljubljana**Altitude** 320 m

No vaccination requirements for any international traveller.

SOLOMON ISLANDS**Capital** Honiara**Altitude** 30 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers coming from infected areas.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year except in a few eastern and southern outlying islets. *P. falciparum* resistant to chloroquine and sulfadoxine–pyrimethamine reported.Recommended prevention: **IV****SOMALIA****Capital** Mogadishu**Altitude** 20 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers coming from infected areas.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.Recommended prevention: **IV****SOUTH AFRICA****Capital** Pretoria (administrative) / Cape Town (legislative) / Bloemfontein (judicial)**Altitude** 1330 m / 10 m / 1420 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas. The countries or areas included in the endemic zones in Africa and the Americas are regarded as infected (see map page 84).**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the low altitude areas of Mpumalanga Province (including the Kruger National Park), Northern Province and north-eastern KwaZulu-Natal as far south as the Tugela River. Risk is highest from October to May. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.Recommended prevention in risk areas: **IV****SPAIN****Capital** Madrid**Altitude** 600 m

No vaccination requirements for any international traveller.

SRI LANKA**Capital** Colombo**Altitude** 10 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**Malaria:** Malaria risk—*P. vivax* (88%), *P. falciparum* (12%)—exists throughout the year, except in the districts of Colombo, Galle, Gampaha, Kalutara, Matara and Nuwara Eliya. *P. falciparum* resistant to chloroquine and sulfadoxine–pyrimethamine reported.Recommended prevention in risk areas: **III****SUDAN****Capital** Khartoum**Altitude** 380 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas. The countries and areas included in the endemic zones (see map page 84) are considered as infected areas. A certificate may be required from travellers leaving Sudan.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Risk is low and seasonal in the north. It is higher along the Nile south of Lake Nasser and in the central and southern part of the country. Malaria risk on the Red Sea coast is very limited. Resistance to chloroquine and sulfadoxine–pyrimethamine reported.Recommended prevention: **IV****SURINAME****Capital** Paramaribo**Altitude** 0 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers coming from infected areas.**Malaria:** Malaria risk—*P. falciparum* (81%)—is high throughout the year in the interior of the country beyond the coastal savannah area, with highest risk along the eastern border and in gold mining areas. In Paramaribo city and the other seven coastal districts, transmission risk is low or negligible. Chloroquine, sulfadoxine–pyrimethamine and mefloquine resistant *P. falciparum* reported. Some decline in quinine sensitivity also reported.Recommended prevention in risk areas: **IV**

SWAZILAND

Capital Mbabane (administrative) /
Lolamba (legislative)

Altitude 1240 m / 650 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in all low veld areas (mainly Big Bend, Mhlume, Simunye and Tshaneni). Chloroquine-resistant *P. falciparum* reported.

Recommended prevention in risk areas: **IV**

SWEDEN

Capital Stockholm

Altitude 30 m

No vaccination requirements for any international traveller.

SWITZERLAND

Capital Berne

Altitude 520 m

No vaccination requirements for any international traveller.

SYRIAN ARAB REPUBLIC

Capital Damascus

Altitude 700 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Limited malaria risk—exclusively due to *P. vivax*—exists from May through October in foci along the northern border, especially in rural areas of El Hasaka Governorate (no indigenous cases reported in 2005).

Recommended prevention in risk areas: **none**

TAJIKISTAN

Capital Dushanbe

Altitude 1030 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—predominantly due to *P. vivax*—exists from June through October, particularly in southern border areas (Khatlon Region), and in some central (Dushanbe), western

(Gorno-Badakhshan), and northern (Leninabad Region) areas. Chloroquine and sulfadoxine-pyrimethamine resistant *P. falciparum* reported in the southern part of the country.

Recommended prevention in risk areas: **III**

TANZANIA, UNITED REPUBLIC OF

Capital Dodoma

Altitude 1150 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country below 1800 m. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

THAILAND

Capital Bangkok

Altitude 10 m

Yellow fever: A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas. The countries and areas included in the endemic zones are considered as infected areas.

Malaria: Malaria risk exists throughout the year in rural, especially forested and hilly, areas of the whole country, mainly towards the international borders. There is no risk in cities and the main tourist resorts (e.g. Bangkok, Chiangmai, Pattaya, Phuket, Samui). However, there is risk in some other islands as well as resorts. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported. Resistance to mefloquine and to quinine reported from areas near the borders with Cambodia and Myanmar.

Recommended prevention in risk areas near Cambodia and Myanmar borders: **IV**

TIMOR LESTE

Capital Dili

Altitude 0 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole territory. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

TOGO**Capital** Lomé**Altitude** 40 m**Yellow fever:** A yellow fever vaccination certificate is required from all travellers over 1 year of age.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Chloroquine-resistant *P. falciparum* reported.Recommended prevention: **IV****TOKELAU**

Same requirements as New Zealand.

(Non-self governing territory of New Zealand)

TONGA**Capital** Nuku'alofa**Altitude** 0 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**TRINIDAD AND TOBAGO****Capital** Port of Spain**Altitude** 10 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**TUNISIA****Capital** Tunis**Altitude** 50 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**TURKEY****Capital** Ankara**Altitude** 920 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—exclusively due to *P. vivax*—exists from May to October mainly in the south-eastern part of the country, and in Amikova and Çukurova Plain. There is no malaria risk in the main tourist areas in the west and south-west of the country.Recommended prevention in risk areas: **II****TURKMENISTAN****Capital** Ashkabat**Altitude** 220 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk—exclusively due to *P. vivax*—exists from June to October in some villages located in the south-eastern part of the country, mainly in Mary district.Recommended prevention: **I****TUVALU****Capital** Fongafale**Altitude** 0 m

No vaccination requirements for any international traveller.

UGANDA**Capital** Kampala**Altitude** 1200 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from endemic areas.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country including the main towns of Fort Portal, Jinja, Kampala, Mbale and parts of Kigezi. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.Recommended prevention: **IV****UKRAINE****Capital** Kiev**Altitude** 170 m

No vaccination requirements for any international traveller.

UNITED ARAB EMIRATES**Capital** Abu Dhabi**Altitude** 10 m

No vaccination requirements for any international traveller.

UNITED KINGDOM (with Channel Islands and Isle of Man)**Capital** London**Altitude** 10 m

No vaccination requirements for any international traveller.

UNITED STATES OF AMERICA**Capital** Washington DC**Altitude** 20 m

No vaccination requirements for any international traveller.

URUGUAY**Capital** Montevideo**Altitude** 30 m**Yellow fever:** A yellow fever certificate is required for travellers coming from endemic areas and from infected countries according to the epidemiological situation and the evaluation of risk.**UZBEKISTAN****Capital** Tashkent**Altitude** 460 m

No vaccination requirements for any international traveller.

Malaria: Sporadic autochthonous cases of *P. vivax* malaria are reported in some locations of Surkhanda-rinskaya Region.Recommended prevention: **I****VANUATU****Capital** Port-Vila**Altitude** 0 m

No vaccination requirements for any international traveller.

Malaria: Low to moderate malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. *P. falciparum* resistant to chloroquine and sulfadoxine-pyrimethamine reported. *P. vivax* resistant to chloroquine reported.Recommended prevention: **III****VENEZUELA (BOLIVARIAN REPUBLIC OF)****Capital** Caracas**Altitude** 1000 m

No vaccination requirements for any international traveller.

Malaria: Malaria risk due to *P. vivax* (90%); *P. falciparum* (10%) exists throughout the year in some rural areas of Apure, Amazonas, Barinas, Bolívar, Sucre and Táchira states. Risk of *P. falciparum* malaria is mostly restricted to municipalities in jungle areas of Amazonas (Alto Orinoco, Atabapo,Atures, Autana, Manapiare, Rio Negro), Bolívar (Cedeño, Gran Sabana, Piar, Raul Leoni, Sifontes and Sucre), Carabobo (Naguanagua) and Delta Amacuro (Antonia Diaz, Casacoima and Pedernales). Chloroquine and sulfadoxine-pyrimethamine resistant *P. falciparum* reported.Recommended prevention: **II** in *P. vivax* risk areas; **IV** in *P. falciparum* risk areas.**VIET NAM****Capital** Hanoi**Altitude** 20 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists in the whole country, excluding urban centres, the Red River delta, and the coastal plain areas of central Viet Nam. High-risk areas are the highland areas below 1500 m south of 18°N, notably in the 4 central highlands provinces Dak Lak, Dak Nong, Gia Lai and Kon Tum, Binh Phuoc province, and the western parts, of the coastal provinces Quang Tri, Quang Nam, Ninh Thuan and Khanh Hoa. Resistance to chloroquine, sulfadoxine-pyrimethamine and mefloquine reported.Recommended prevention in risk areas: **IV****VIRGIN ISLANDS (USA)****Capital** Charlotte Amalie**Altitude** 230 m

No vaccination requirements for any international traveller.

WAKE ISLAND

No vaccination requirements for any international traveller.

(US territory)

YEMEN**Capital** Sana'a**Altitude** 2230 m**Yellow fever:** A yellow fever vaccination certificate is required from travellers over 1 year of age coming from infected areas.**Malaria:** Malaria risk—predominantly due to *P. falciparum*—exists throughout the year, but mainly from September through February, in the

whole country below 2000 m. There is no risk in Sana'a city. Malaria risk on Socotra Island is limited. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention in risk areas: **IV**; Socotra Island: **I**

YUGOSLAVIA, FEDERAL REPUBLIC OF

Capital Belgrade

Altitude 60 m

No vaccination requirements for any international traveller.

ZAIRE see CONGO, DEMOCRATIC REPUBLIC OF THE

ZAMBIA

Capital Lusaka

Altitude 1280 m

Yellow fever: No vaccination requirements for any international traveller.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists throughout the year in the whole country. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**

ZIMBABWE

Capital Harare

Altitude 1450 m

Yellow fever: A yellow fever vaccination certificate is required from travellers coming from infected areas.

Malaria: Malaria risk—predominantly due to *P. falciparum*—exists from November through June in areas below 1200 m and throughout the year in the Zambezi valley. In Harare and Bulawayo, the risk is negligible. Resistance to chloroquine and sulfadoxine-pyrimethamine reported.

Recommended prevention: **IV**