Health Requirements and Recommendations for Travellers to Saudi Arabia for Hajj and Umrah

9 June 2019

Editorial note

This publication is to inform international travellers of the requirements and recommendations for entry into Saudi Arabia for Hajj and Umrah, as provided by the Saudi health authorities. It can also be found on the website of the Ministry of Health of the Kingdom of Saudi Arabia: https://www.moh.gov.sa/en/Hajj/HealthGuidelines/HealthGuidelinesDuringHajj/Pages/HealthRequirements.aspx

The Ministry of Health in the Kingdom of Saudi Arabia issued this document to address the health requirements and recommendations for visitors traveling to Saudi Arabia for the purposes of Umrah, Hajj, or seasonal works in Hajj and Umrah areas during the 1440H (2019G).

Infectious Diseases of Importance during Hajj and Umrah

Yellow Fever

The Ministry of Health in the Kingdom of Saudi Arabia requires that all travellers arriving from countries or areas at risk of yellow fever transmission (see below) must present a valid yellow fever vaccination certificate. The Yellow Fever vaccination certificate is valid for life starting 10 days after vaccination.

Countries/areas at risk of Yellow Fever transmission, as per the WHO International Travel and Health guidelines, are:

- African states: Angola, Benin, Burkina Faso, Burundi, Cameroon, the Central African Republic, Chad, Congo, Côte d’Ivoire, the Democratic Republic of the Congo, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone, Sudan, the Republic of South Sudan, Togo, and Uganda.
- South and Central American States: Argentina, the Bolivarian Republic of Venezuela, Brazil, Colombia, Ecuador, French Guiana, Guyana, Panama, Paraguay, Peru, Bolivia, Surinam, and Trinidad and Tobago.

Aircraft, ships and other means of transportation arriving from countries affected by yellow fever are requested to submit a valid certificate indicating that disinsection was applied in accordance
with methods recommended by WHO. They may be subjected to inspection as a condition of granting free pratique (including permission to enter a port, to embark or disembark, and to discharge or load cargo or stores).

**Meningococcal meningitis**

Adults and children aged over 2 years arriving for Umrah, Hajj or for seasonal work in Hajj zones, are required to submit a valid vaccination certificate with a quadrivalent (ACYW) meningococcal vaccine administered not less than 10 days prior to the planned arrival to Saudi Arabia.

Vaccination with ONE of the following vaccines is acceptable:

- Quadrivalent (ACYW) polysaccharide vaccine within the last 3 years.
- Quadrivalent (ACYW) conjugate vaccine within the last 5 years.

Current scientific evidence suggests that conjugate vaccines are safe and effective for those above 55 years of age.

Health authorities at the pilgrim countries should ensure vaccinating their pilgrims within the required validity period and make sure that the Type of vaccine is clearly showed in the vaccination certificate.

If the vaccine type is not indicated in the certificate, the certificate will be valid for 3 years.

Vaccination with Quadrivalent (ACYW) conjugate vaccine is also required for:

- Domestic pilgrims.
- Residents of the two holy cities (Makkah and Medina).
- Any person who may get in contact with pilgrims including personnel in healthcare settings and other authorities.

The Ministry of Health in the Kingdom of Saudi Arabia may opt to administer prophylactic antibiotics to some travellers to at the points of entry if deemed necessary.

**Poliomyelitis**

Travellers from areas with active poliovirus transmission (i.e. those with active transmission of a wild or vaccine-derived poliovirus) and from countries at risk of polio reintroduction (see WHO note 1) are required to submit a valid polio vaccination certificate.

Travellers arriving from Afghanistan, Democratic Republic of the Congo, Mozambique, Niger, Nigeria, Pakistan, Papua New Guinea, Syria, Myanmar, Yemen and Somalia should present proof of vaccination with at least one of the following vaccines:

- At least one dose of bivalent oral polio vaccine (OPV) within the previous 12 months and administered at least 4 weeks prior to arrival or
- at least one dose of inactivated polio vaccine (IPV) within the previous 12 months and administered at least 4 weeks prior to arrival.
Travellers arriving from Afghanistan, Nigeria, Pakistan, Papua New Guinea, Syria, Myanmar, Yemen and Somalia will also receive one dose of OPV at the border points on Entry in Saudi Arabia.

Seasonal Influenza
The Ministry of Health in the Kingdom of Saudi Arabia recommends that all Visitors arriving for Umrah, Hajj or for seasonal work in Hajj zones to get vaccinated against seasonal influenza.

Influenza vaccination is particularly important for pregnant women, children under 5 years, the elderly, individuals with chronic medical conditions (such as chronic cardiac, pulmonary, renal, metabolic, neurodevelopmental, liver or hematologic diseases) and individuals with immunosuppressive conditions (such as HIV/AIDS, receiving chemotherapy or steroids, or malignancy).

Countries are encouraged to secure adequate quantities of the most recent influenza vaccine recommended for use in their country to be administered to those intending to perform Hajj. For this year’s Hajj, the southern hemisphere vaccine is expected to be available before Hajj and the Ministry of Health in the Kingdom of Saudi Arabia recommends all pilgrims from the southern hemisphere or from countries which use the southern hemisphere vaccine to receive this vaccine at least 10 days prior to commencing hajj.

Ministry of Health in the Kingdom of Saudi Arabia requires all domestic pilgrims and health workers in the Hajj and Umrah areas to receive the most recently available seasonal Influenza vaccine 10 days prior to their arrival to Hajj and Umrah areas.

Middle Eastern Respiratory Syndrome Coronavirus (MERS-CoV) and other respiratory infections
Efforts to prevent MERS-CoV infections during mass gatherings such as Hajj and Umrah have been implemented. However, other viral respiratory tract infections are common.

The Ministry of Health in the Kingdom of Saudi Arabia recommends all arrivals for Umrah, Hajj or for seasonal work in Hajj to comply with following:

- Wash hands with soap and water or a disinfectant, especially after coughing and sneezing, after using toilets, before handling and consuming food, and after touching animals.
- Use disposable tissues when coughing or sneezing and dispose of used tissues in a wastebasket.
- Wear regular face masks when in crowded places.
- Avoid contact with those who appear ill and avoid sharing their personal belongings.
- Avoid visits to and contact with camels in farms, markets, or barns.
- Avoid drinking unpasteurized milk or eating raw meat or animal products that have not been thoroughly cooked.
Zika Virus Disease and Dengue Fever
The Ministry of Health in the Kingdom of Saudi Arabia requires that aircrafts, ships, and other means of transportation coming from countries affected with the Zika virus (see WHO note 2) and/or dengue fever (see WHO note 3) are requested to submit a valid certificate indicating that disinsection was applied in accordance with methods recommended by WHO.

The Ministry of Health in the Kingdom of Saudi Arabia recommends pilgrims to take necessary measures to avoid mosquito bites during the day and evening, which includes wearing protective clothing (preferably light-colored) that covers as much of the body as possible; using physical barriers such as window screens and closed doors; and applying insect repellent (as per the label instructions on the product) to skin or clothing that contains DEET, IR3535 or icaridin.

Food and Water-Borne Diseases
Authorities in Saudi Arabia don’t permit entry of food with arrivals for Hajj and Umrah except that in small quantities and in properly canned or sealed containers. The Ministry of Health in the Kingdom of Saudi Arabia recommends all pilgrims to observe the following:

- Wash hands before and after eating and after going to the toilet.
- Thoroughly clean and wash fresh vegetables and fruit.
- Food should be cooked thoroughly
- Food should be kept at safe temperatures
- Raw and cooked food should be kept separated

Heat-Related Conditions
The Ministry of Health in the Kingdom of Saudi Arabia recommends all pilgrims, especially older individuals, to avoid direct sun exposure while performing rituals and to drink sufficient amount of fluids. Countries are requested to provide education on health-related illness to their pilgrims prior to travel. Medications that can exacerbate dehydration (e.g. diuretics) or interfere with heat exchange may need adjustment by treating physicians.

Responding to International Health Events
In the case of a public health emergency of international concern, or in the case of any event subject to notification under the International Health Regulations (2005), the health authorities in Kingdom of Saudi Arabia will undertake all additional necessary measures in consultation with the WHO.

Hajj Medical Missions
The Ministry of Health in the Kingdom of Saudi Arabia requires the medical missions accompanying the pilgrims to comply with the following technical requirements:

- The mission should have at least 1 physician per 1,000 pilgrims accompanying the mission and at least 20% of the accompanying physicians in the medical mission should be public health physicians.
• Medical missions should have a valid medical waste contract with a certified local company that covers the entire Hajj season.
• Medical mission clinics should include at least one infectious diseases isolation room that meets MoH standards.
• The medical mission shall commit to reporting notifiable infectious diseases to the Saudi Arabian Health System using approved reporting methods.

Physical Ability and Health Education
Pilgrims and relevant officials in countries of origin are encouraged to consider the physical ability and health conditions of individuals applying for Hajj and Umrah. Those with severe medical conditions such as terminal cancers, advanced cardiac, respiratory, liver, or kidney diseases, and senility are exempt from these religious duties.

Health authorities in countries of origin are requested to provide basic health education to pilgrims prior to travel. This may include food safety, heat-exhaustion, and means of preventing infectious diseases.

The Ministry of Health in the Kingdom of Saudi Arabia recommends all pilgrims to update their immunization status against vaccine-preventable diseases. These include vaccination against Diphtheria, Tetanus, Pertussis, Polio, Measles, Varicella and Mumps.

WHO notes
1. WHO-determined areas with active poliovirus transmission (i.e. those with active transmission of a wild or vaccine-derived poliovirus) and countries at risk of polio reintroduction can be found here: http://polioeradication.org/polio-today/polio-now/public-health-emergency-status/
2. Countries that have ever had documented evidence of autochthonous, mosquito-borne Zika virus (note: not all countries currently have evidence of ongoing transmission) Map
   a. AFRO
      i. Angola; Burkina Faso; Burundi; Cabo Verde; Cameroon; Central African Republic; Côte d’Ivoire; Ethiopia; Gabon; Guinea-Bissau; Nigeria; Senegal; Uganda
   b. AMRO/PAHO
      i. Anguilla; Antigua and Barbuda; Argentina; Aruba; Bahamas; Barbados; Belize; Bolivia (Plurinational State of); Bonaire, Sint Eustatius and Saba; Brazil; British Virgin Islands; Cayman Islands; Colombia; Costa Rica; Cuba; Curaçao; Dominica; Dominican Republic; Ecuador; El Salvador; French Guiana; Grenada; Guadeloupe; Guatemala; Guyana; Haiti; Honduras; ISLA DE PASCUA – Chile; Jamaica; Martinique; Mexico; Montserrat; Nicaragua; Panama; Paraguay; Peru; Puerto Rico; Saint Barthélemy; Saint Kitts and Nevis; Saint Lucia; Saint Martin; Saint Vincent and the Grenadines; Sint
Maarten; Suriname; Trinidad and Tobago; Turks and Caicos; United States of America; United States Virgin Islands; Venezuela (Bolivarian Republic of)

c. SEARO
   i. Bangladesh; India; Indonesia; Maldives; Myanmar; Thailand

d. WPRO
   i. American Samoa; Cambodia; Cook Islands; Fiji; French Polynesia; Lao People's Democratic Republic; Marshall Islands; Malaysia; Micronesia (Federated States of); New Caledonia; Palau; Papua New Guinea; Philippines; Samoa; Singapore; Solomon Islands; Tonga; Vanuatu; Vietnam

3. The list of countries currently affected by increase in dengue cases:
   a. After a drop in the number of cases in 2017-18, sharp increase in dengue cases is being observed in 2019. In the Western Pacific region, increase in cases have been observed in Australia, Cambodia, China, Lao PDR, Malaysia, Philippines, Singapore, Vietnam while Den-2 was reported in New Caledonia and Den-1 in French Polynesia.
   b. In African region Dengue outbreaks have also been reported in Congo, Côte d'Ivoire, Tanzania;
   c. In SEA region: Sri Lanka, India, Thailand, East Timor, Maldives
   d. In EMR region dengue has increased in Algeria, Sudan, Yemen and Pakistan
   e. Several countries of the American region have also observed an increase in the number of cases. Argentina, Bolivia, Venezuela, Brazil, Paraguay, Peru, Mexico and Dominican Republic.