



NEPAL

ABOUT NEPAL VACCINATIONS

The climate differs in each of Nepal's three general regions: the Himalayas has long, harsh winters (Nov-March, aver. temp. 13-19°C) and a brief, cool summer (Apr-June, 21-28°C); the hill/valley regions have a wet summer and a cold, dry winter; the Terai has more moderate 'subtropical monsoon' conditions, with heavy rainfall between July and October. Generally, rainfall varies from 178-191 cm in the east and 76-89 cm in the west.

OVERALL RISK

High Risk - Preventable disease is much more common than in Australia. Consult a Travelvax clinic for your specific risk.

MALARIA RISK

Malaria is present, whether or not anti-malarial medications are recommended will need to be discussed with a medical practitioner. Consult a Travelvax clinic for long stays or significant level of outdoor activities.

VACCINE PREVENTABLE DISEASES

YELLOW FEVER

Country requirement at entry: a yellow fever vaccination certificate is required for travellers aged 9 months or over arriving from countries with risk of yellow fever transmission and for travellers having transited for more than 12 hours through an airport of a country with risk of yellow fever transmission.

No vaccination certificate is required for direct travel from Australia or New Zealand.

COVID-19

For the most up to date requirements for entry into Australia, go to [Smartraveller](#).

Please click this [COVID-19 Travel Regulations Map](#) (IATA) to view the latest Nepal COVID travel requirements.

HEPATITIS A

Risk of Hepatitis A infection is high for all travellers, vaccination recommended.

HEPATITIS B

Low presence of Hepatitis B in local population, discuss whether vaccination would be recommended with a medical practitioner. Vaccination is recommended for specific high-risk travellers (sport/adventure/occupational/sexual). Consult a

medical practitioner for your specific risk.

TYPHOID

Risk of Typhoid is high for all travellers, vaccination recommended.

INFLUENZA

Northern hemisphere winter risk (November to April). Most common vaccine preventable illness in travellers. Vaccine recommended, effective for 1 year.

RABIES

Disease present. Recommendation for vaccination will depend on specific itinerary and activities planned. Generally rabies vaccination is advised for high risk individuals such as veterinarians or animal handlers, cavers. Additionally for higher risk travellers who plan: extended periods outdoors, rural travel, adventurous activities including bicycling; also expats or long-term travellers to endemic regions and children (risk of more severe or risk-prone bites and may not report contact at all).

JAPANESE ENCEPHALITIS

Disease present. Seasonal risk will vary by country. Whether vaccinations will be recommended will depend on itinerary, length of stay, type of travel etc and needs to be discussed with a medical practitioner. Risk is highest around pig farms and in agricultural areas. Mosquito avoidance measures are highly recommended all year round. Consult a medical practitioner for your specific risk, particularly if travelling during the wet season.

POLIO

No risk to travellers.

Other country requirement(s) (2022): Proof of vaccination against poliomyelitis, documented in the International Certificate of Vaccination or Prophylaxis, for all travellers arriving from the following countries. Countries with risk of Polio transmission: Afghanistan, Benin, Burkina Faso, Cameroon, Central African Republic (CAR), Chad, Republic of Congo, Democratic Republic of Congo, Côte d'Ivoire, Egypt, Ethiopia, Gambia, Guinea, Guinea Bissau, Iran (Islamic Republic of), Kenya, Liberia, Madagascar, Mali, Mauritania, Niger, Nigeria, Pakistan, Senegal, Sierra Leone, Somalia, South Sudan, Sudan, Tajikistan, Uganda, Ukraine, Yemen. All residents and long-term visitors (i.e. > four weeks) of all ages should have received the polio vaccine between four weeks and 12 months prior to travel and those undertaking urgent travel (i.e. within four weeks) should have received a dose of polio vaccine at least by the time of departure.

TICKBORNE ENCEPHALITIS

No risk to travellers.

MENINGOCOCCAL MENINGITIS

Low risk to travellers.

CHOLERA

Disease is present, however the risk is low for the majority of travellers. Peace corp, volunteers, refugee workers etc need to consider vaccination. All travellers should take food and water precautions. Consult a medical practitioner for your specific risk.

OTHER DISEASES

TRAVELLERS DIARRHOEA

High risk. Travellers' Diarrhoea affects 20-60% of overseas travellers, food and water precautions are essential. Self-treatment medications may be recommended.

INSECT-BORNE DISEASES

Diseases such as [Dengue](#), [Chikungunya](#), [Zika](#) may be present. Seasonal risk will vary by country. Whether preventive measures will be recommended will depend on itinerary, length of stay, type of travel etc. and needs to be discussed with a medical practitioner. For those countries with disease present, risk is highest in urban and semi-urban areas, but may also occur in rural areas; [insect avoidance measures](#) are highly recommended all year round. Travelvax believes that the best defence is to understand their habits, dress properly and use an [effective insect repellent](#) in the correct manner. Consult a medical practitioner for your specific risk.

SCHISTOSOMIASIS

No risk to travellers.

STIs

Low incidence of sexually transmitted and blood-borne diseases. Safe sex and needle precautions should be followed by all travellers.

ALTITUDE

Altitude illness is a risk to travellers ascending higher than 2000 meters. Preventative medication is available. Consult a medical practitioner if ascending to 2000 metres or above.

ADDITIONAL INFORMATION

PERSONAL SAFETY

In order to check before and during travel for any high-risk areas visit the Smartraveller website. Avoid unnecessary displays of wealth or valuables and minimise the amounts of cash carried. Keep secure records of passport/credit card/licence numbers. For more safety tips visit: www.smartraveller.gov.au.

MEDICAL CARE

Limited medical facilities available. Unless travelling with a well-equipped organisation, a high level of self-sufficiency in terms of first aid kits and sterile equipment is recommended. An evacuation contingency should be a part of your travel insurance. Check for any contacts supplied by your emergency assistance organisation (nominated by your travel insurer) or with IAMAT (International Association of Medical Assistance for Travellers).

FIRST AID KITS & ACCESSORIES

Always carry an [advanced first aid kit](#), including needles and syringes (shortages of sterile equipment are common). A prescription kit (containing treatments for travellers' diarrhoea) is essential. A [mosquito net](#) and [insect repellent](#) (containing DEET, Citriodiol or Picaridin) are highly recommended, even if anti-malarials are taken.

**More information on Nepal is available during your pre-travel consultation with Travelvax.
Call 1300 360 164 for the location of the clinic nearest to you.**