



# POLIOMYELITIS

## WHAT IS POLIOMYELITIS?

Poliomyelitis is a potentially serious viral illness that is spread through contact with infected faeces or saliva. There are 3 types of wild polio virus – WPV 1, 2 & 3 – all can cause disease.

While many infections pass without symptoms or as a mild flu-like illness, severe disease occurs in one in 200 cases and these individuals will suffer irreversible paralysis of legs (most commonly), arms or even the diaphragm. In the last instance, the paralysis of breathing muscles results in death in 5-10% of cases.

Many polio infections produce no symptoms. The incubation period is anywhere from 3 days to 3 weeks and if early symptoms occur, they include fever, headache, vomiting, tiredness, neck stiffness and limb pain, with or without paralysis.

The most severe type of polio is known as 'paralytic polio' and can result in paralysis in the arms, legs or diaphragm (which controls breathing).

## WHERE IS IT FOUND?

In the past 25 years, a global campaign to stamp out polio has been underway and now only 3 countries remain endemic: Nigeria, Afghanistan and Pakistan. Importation into other countries previously free of polio has occurred with some frequency, such as Botswana, Burkina Faso, Benin, Myanmar, Chad, Côte d'Ivoire, Ghana, Indonesia, Kenya, Sudan and Togo.

## RISK TO TRAVELLERS

The risk to travellers is generally low.

## OUR RECOMMENDATION

Vaccination is recommended for travel to affected regions. Australian children are vaccinated against Polio as part of the standard immunisation schedule and the last dose is given at ~4 years of age. The risk to travellers is generally low, however vaccination is recommended for travel to affected regions and is [a requirement for travel](#) to/from some countries. If at risk, adults should have a booster to the childhood series every 10 years.

## WHAT IS POLIOMYELITIS VACCINATION?

The polio vaccination consists of the following:

Adults:

- Inactivated viral vaccine (IPOL)
- Inactivated vaccine in combination with Diphtheria/Tetanus/Pertussis (Adacel Polio/Boostrix IPV)

Children:

- Inactivated viral vaccine (IPOL)
- Inactivated vaccine in combination with Diphtheria/Tetanus/Pertussis and others (Infanrix Hexa, Infanrix IPV, Infanrix Penta, Pediacel, Quadracel).

Read more in the [Australian Immunisation Handbook](#).

## **SCHEDULE**

Primary series is given from 6-8 weeks of age. 3 doses are administered at least 4 weeks apart with a booster at 4 years of age.

Boosters are administered every 10 years for travellers at risk, such as travelling to polio endemic or epidemic countries, as well as healthcare workers, laboratory workers who may come in contact with poliomyelitis cases.

**Contraindications:** Should not be administered to individuals who have previously experienced a serious reaction to this vaccine or those who are known to be hypersensitive to any of the vaccine components.

## **LEVEL OF PROTECTION**

Over 95%

## **POSSIBLE SIDE EFFECTS**

Pain, redness or swelling at injection site occur in 10-15% of individuals but resolve in 3 days  
In young babies, decreased appetite, fever and crying.

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