



EGYPT

ABOUT EGYPT VACCINATIONS

A desert country bounded by Libya, Sudan, Israel, the Gulf of Suez and the Red Sea, Egypt has a warm, arid climate with winter temperatures ranging from 4-18°C and 21-43°C in summer, cooler in coastal Alexandria. Rainfall averages 20cm a year, mainly on the northern coast. Egypt has four distinct regions: the Nile River valley and delta; the vast plains and plateaus of the Western Desert; the gullies and Red Sea Hills of the Eastern Desert; and the Sinai Peninsula.

OVERALL RISK

Medium Risk - Preventable disease occur sporadically or at moderate levels. Consult a Travelvax clinic for your specific risk if travelling outside resorts, 5 star accommodation or for periods longer than a few days.

MALARIA RISK

No risk to travellers.

VACCINE PREVENTABLE DISEASES

YELLOW FEVER

Proof of vaccination against yellow fever 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 Egypt COVID travel requirements.

HEPATITIS A

Moderate risk to 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

Moderate risk for most travellers. Vaccination recommended for travel to smaller cities, villages and rural areas outside usual tourist routes. Some medical conditions pre-dispose to infection; whether vaccinations would be recommended should be discussed with a medical practitioner. Consult a medical practitioner for your specific risk.

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

No risk to travellers.

POLIO

Disease present. Recommendation for vaccination will depend on specific itinerary and activities planned. 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.

Other country requirement(s) (2020)

Polio vaccination is requested regardless of age and vaccination status; proof of receipt of a dose of oral polio vaccine (bOPV) or inactivated poliovirus vaccine (IPV) in the form of an international vaccination certificate, as specified in Annex 6 of the IHR, issued within the previous 12 months and at least 4 weeks before departure is required for travellers arriving from Afghanistan, Indonesia, Myanmar, Nigeria, Pakistan, Papua New Guinea and Somalia to apply for an entry visa. Proof of receipt of a dose of bOPV or IPV in the form of an international vaccination certificate, as specified in Annex 6 of the IHR, issued within the previous 12 months and at least 4 weeks before departure is required from all travellers arriving from Angola, Benin, Cameroon, Central African Republic, China, Democratic Republic of the Congo, Ethiopia, Ghana, Kenya, Mozambique, Niger and Philippines.

Additional information:

Following the detection of **vaccine-derived poliovirus**, it is recommended to ensure polio vaccinations are up to date - see below. [Temporary recommendations](#) regarding polio vaccination, which are updated regularly by the WHO, advise that affected states:

States with local transmission of cVDPV2, with risk of international spread should in addition to the above measures:

- Encourage residents and long-term visitors to receive a dose of IPV four weeks to 12 months prior to international travel.
- Ensure that travelers who receive such vaccination have access to an appropriate document to record their polio vaccination status.

TICKBORNE ENCEPHALITIS

No risk to travellers.

MENINGOCOCCAL MENINGITIS

Low risk to travellers.

CHOLERA

No risk to travellers.

OTHER DISEASES

TRAVELLERS DIARRHOEA

Moderate 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

Swimming or bathing in freshwater is the main cause of infection. Avoid freshwater contact if you are unsure of origin.

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 Smarttraveller 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.smarttraveller.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

Carry a basic [first aid kit](#), customised to your activities. For longer stays consider a needle and syringe pack and medication for travellers diarrhoea.

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