



INDIA

ABOUT INDIA VACCINATIONS

Situated in south central Asia, India has a climate that is tropical or sub-tropical. It is subject to seasonal monsoon winds, especially the south-west's rain-bearing summer monsoon.

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

Requirement at entry: Anyone (except infants up to the age of 9 months) arriving by air or sea without a yellow fever vaccination certificate is detained in isolation for up to 6 days if that person

- (i) arrives within 6 days of departure from an area with risk of yellow fever transmission, or
- (ii) has been in such an area in transit (except those passengers and members of the crew who, while in transit through an airport situated in an area with risk of yellow fever transmission, remained within the airport premises during the period of their entire stay and the Health Officer agrees to such exemption), or
- (iii) arrives on a ship that started from or touched at any port in an area with risk of yellow fever transmission 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) arrives on an aircraft that has been in an area with risk of yellow fever transmission and has not been disinfected in accordance with the Indian Aircraft Public Health Rules, 1954, or as recommended by WHO.

Countries and areas regarded as having risk of yellow fever transmission are, in 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, Mauritania, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, Sudan, South Sudan, Togo, and Uganda; and in the Americas: Argentina, Bolivia, Brazil, Colombia, Ecuador, French Guiana, Guyana, Panama, Paraguay, Peru, Suriname, Trinidad and Tobago (Trinidad only), and Venezuela (Bolivarian Republic of).

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

Vaccinations for India

With a history reaching back millennia and districts a world away from each other, India will entertain and delight the most intrepid traveller. It is also an undeniable force in business with many companies basing offshore offices here. The information below is intended to make sure you get the correct injections, vaccinations and advice for India.

ABOUT INDIA VACCINATIONS

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 India 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) (2018): Proof of oral polio vaccination at least 4 weeks before departure for resident national travellers from polioendemic countries (Afghanistan, Nigeria, and Pakistan) and countries with poliovirus circulation following importation (Ethiopia, Kenya, Somalia, Syrian Arab Republic, and Democratic Republic of the Congo) is required.

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

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

STIs

Sexually transmitted and blood-borne diseases occur. The risk to travellers can be greatly reduced by practising safe sex with any new partner. All travellers should carry condoms. Blood borne diseases (HIV, Hepatitis B & C) can be spread by blood transfusion, tattooing, body piercing or non-sterile needles. Travellers in high risk groups should carry sterile needles (see also Medical Care).

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 India is available during your pre-travel consultation with Travelvax.

Call 1300 360 164 for the location of the clinic nearest to you.