



MALI

ABOUT MALI VACCINATIONS

Mali is a landlocked country located in the western half of northern Africa. It is bordered on the north by Algeria and on the west by Senegal and Mauritania. There are three climactic zones in Mali: the Sudanic, the Sahelian and the desert zones - and temperatures range throughout the country from temperate in the Sudanic zone to brutal in the desert zone. Monsoons bring a rainy season from June to October. Temperatures fall a little in August, when most of the rainfall occurs.

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 throughout country. Anti-malarial medications recommended. Type of malaria tablets will vary according to itinerary, length of stay and needs to be discussed with a medical practitioner.

VACCINE PREVENTABLE DISEASES

YELLOW FEVER

Disease is present. A yellow fever vaccination certificate is required for all travellers aged 9 months or over.

Vaccination is recommended for all travellers aged 9 months or over going to areas south of the Sahara Desert.

Vaccination not recommended for travellers whose itineraries are limited to areas in the Sahara Desert.

Travellers arriving in Australia within 6 days of leaving this country require proof of vaccination.

Travelvax Note: We recommended that this advice is discussed with a Yellow fever licenced practitioner.

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 Mali COVID travel requirements.

HEPATITIS A

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

HEPATITIS B

High presence of Hepatitis B in local population. Vaccination would be recommended. 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.

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:

- Encourage residents and long-term visitors to receive a dose of IPV four weeks to 12 months prior to international travel? those undertaking urgent travel (i.e. within four weeks) should be encouraged to receive a dose at least by the time of departure.
- 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

Sporadic outbreaks of the disease occur. Most travellers are at low risk. Consult a medical practitioner for your specific risk. Vaccination is recommended for all travellers who have a non-functioning spleen.

CHOLERA

No risk to travellers.

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

No risk to travellers.

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

Comprehensive medical facilities available only in the major population centres and/or specific private clinics. Sterile surgical products (syringes/needles/sutures) are not always available. 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 Mali is available during your pre-travel consultation with Travelvax.
Call 1300 360 164 for the location of the clinic nearest to you.**