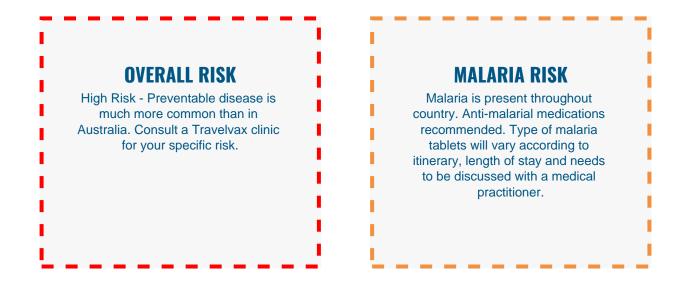


SIERRA LEONE

ABOUT SIERRA LEONE VACCINATIONS

Sierra Leone is located north of the Equator on the south-western part of the great bulge of West Africa. It is bordered on the south by Liberia and on the west by the Atlantic Ocean. The climate is tropical, with rainy and dry seasons, high temperatures and almost constant high humidity. The rainy season extends from May to November, but is heaviest between July and September. Annual rainfall can amount to as much as 380 cm, but inland areas receive less.



VACCINE PREVENTABLE DISEASES

YELLOW FEVER

Disease present. A yellow fever vaccination certificate is required for all travellers.

Vaccination is recommended for protection against the disease and a vaccination certificate may be required for subsequent destinations.

Travellers arriving in Australia with 6 days of leaving this country require a vaccination certificate.

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 Sierra Leone 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

Year round risk present. 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 arequirement 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*. <u>Temporary recommendations</u> 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

Low risk to travellers.

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 <u>Dengue</u>, <u>Chikungunya</u>, <u>Zika</u> 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; <u>insect avoidance measures</u> are highly recommended all year round. Travelvax believes that the best defence is to understand their habits, dress properly and use an <u>effective insect repellent</u> 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

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

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