



South Africa

The following information must be viewed as a guide only. It is not intended, nor implied to be a substitute for professional medical advice.

Specific recommendations on vaccinations, antimalarial medications & targeted travel health advice is always provided on an individual basis taking into account:

- the personal health of the traveller including past medical & vaccination history;
- intended activities;
- precise itinerary;
- style of travel;
- type of accommodation;
- time of year;
- altitude; &
- length of stay.

In addition, some vaccines eg rabies & tuberculosis are very much influenced by local risk & length of stay. Specific face-to-face advice is particularly important when recommending antimalarial medications & vaccines.

We strongly recommend travellers seek an appointment with a doctor trained in travel health prior to departure.

Medical & nursing staff at The Travel Doctor-TMVC are trained in international public health issues with a focus on immunisations & preventive medicine. Many have travelled extensively & a number have worked in less developed areas of the world for extended periods. Travellers should undergo individual risk assessments whether they are short term holiday makers, business people or the long term expatriate worker. The Travel Doctor-TMVC has clinics Australia wide. In Australia the local centre may be contacted on 1300 658 844, or by visiting www.traveldoctor.com.au. It is recommended that you visit a travel health professional 6-8 weeks prior to departure. However, if that time frame is not possible, remember – “It’s never too late to vaccinate”.

Healthy Travelling in South Africa

Healthy travellers have the most fun! Pre-travel preparation will help protect your health while you are away. To assist you in recognising & understanding some of the major travel health risks you may face while holidaying in South Africa, The Travel Doctor-TMVC has prepared a summary of some of these issues in the following pages.

Table 1 provides a brief description of some of the major travel health issues & vaccinations that should be considered for travel to South Africa.

Table 2 provides a summary of these major travel health issues & preventative measures that should be considered.

We hope you find this information useful in preparing for your trip. Remember it is advisable to consult a travel health specialist prior to departure.

Currency of your basic immunisations such as Tetanus & Diphtheria should be checked & others like Hepatitis A & Typhoid considered according to the criteria mentioned previously.





Table 1. Major Travel Health Issues & Considerations for South Africa

Hepatitis A	This is a viral disease of the liver which is transmitted through eating contaminated food or drinking contaminated water. It is the most common vaccine preventable disease that occurs in travellers to less developed areas of the world.
Hepatitis B	This is a viral disease of the liver that is transmitted via blood, blood products or bodily fluids. It is vaccine preventable.
Typhoid	Typhoid Fever is caused by a bacteria found in contaminated food & water. It is endemic in the developing world & vaccination is recommended for travellers to areas where environmental sanitation & personal hygiene may be poor.
Tetanus, Pertussis & Diphtheria	Tetanus is caused by a toxin released by a common dust or soil bacteria, which enters the body through a wound. Diphtheria is a bacterial infection of the throat & occasionally of the skin. It is found world wide & is transmitted from person-to-person by coughing & sneezing. Pertussis (Whooping cough) is a highly infectious respiratory infection responsible for 300,000 deaths annually, mainly in children. Diphtheria & pertussis vaccines can be added to the tetanus vaccine. Because many adults no longer have immunity from childhood immunisation it is advised that travellers to less developed countries have a tetanus, diphtheria & pertussis booster.
Measles, Mumps & Rubella	Childhood immunisation coverage in many developing countries is not good. As such, travellers under the age of 40 years should have their measles, mumps & rubella immunisation complete. Those over the age of 40 years are most likely to have long term immunity from previous exposure as a child.
Chickenpox	Chickenpox remains a very common & contagious illness. Vaccination should be considered anyone over 18 months of age where immunity or prior exposure cannot be established by history & testing.
Influenza	Individuals intending to travel out of an Australian winter might consider the current flu vaccine at the beginning of the season. Exposure to illness in airports & commuter transport is common & exposure may ruin a much needed break. In fact, influenza is likely to be the commonest vaccine preventable disease faced by travellers.
Malaria	Malaria is transmitted by a night biting mosquito. The decision to use or not use anti-malarial drugs should be made after consultation with a travel health specialist, taking into consideration the relative malaria risk of areas on the traveller's itinerary as well as potential side effects & cost of available drugs. Insect avoidance measures should be followed throughout the trip. Upon return, any flu like illnesses should be investigated by a travel health specialist. See the next page for more information.
Dengue Fever	Dengue (pronounced den-gee) Fever is a viral disease with flu like symptoms that is transmitted by mosquitos. There is no vaccine for dengue fever & prevention is based upon insect avoidance via repellents, nets & insecticides.
Rabies	Rabies is a deadly viral infection of the brain transmitted to humans. The disease itself is rare in travellers, but the risk increases with extended travel & the likelihood of animal contact. The best way to avoid rabies is too avoid all contact with animals. Dogs are the main carriers; however monkeys, bats, cats & other animals may also transmit the disease. Pre-exposure vaccination is recommended for extended travel & those who work with, or are likely to come in contact with animals.
Schistosomiasis	Schistosomiasis is a tropical disease caused by a parasitic blood worm that can penetrate (unbroken) human skin & cause damage to the intestines, liver & urinary tract. It is endemic to Africa. Most Australian travellers have acquired it in Egypt, Zimbabwe & Malawi. The disease is treatable, but no vaccine is available. Avoidance of freshwater areas where the disease is endemic is a sure means of prevention. The greatest risk comes from wading or swimming in fresh water. Washing in contaminated water can also transmit infection.
Poliomyelitis	Poliomyelitis is a viral infection that attacks the central nervous system. Transmission is by faecal contamination of food, usually due to unhygienic food handlers or flies. Although most Australian's & New Zealanders will have been immunised in childhood, the efficacy wanes after 10 years & a booster is advisable prior to travelling to a country where the disease is still found. This includes some countries in Africa, although South Africa is presently free of the disease. A booster can be incorporated into the tetanus, diphtheria & pertussis vaccination.
Traveller's Diarrhoea	Up to 40% of tourists may develop 3 or more loose bowel motions a day within the first week of travel. A variety of germs can be responsible for this infection & a Traveller's Medical Kit containing appropriate therapy can rapidly improve the symptoms. It is also important to follow the rules of healthy eating & drinking to minimise risks.





Table 2. Summary of travel health issues for South Africa & preventative options available

	Vaccine Available	Healthy Eating & Drinking	Insect Avoidance	Animal Avoidance
Hepatitis A	✓	✓		
Hepatitis B	✓			
Typhoid	✓	✓		
Tetanus, Pertussis & Diphtheria	✓			
Measles, Mumps & Rubella	✓			
Chickenpox	✓			
Influenza	✓			
Malaria			✓	
Dengue Fever			✓	
Rabies	✓			✓
Schistosomiasis				✓
Poliomyelitis	✓	✓		
Traveller's Diarrhoea		✓		

✓ indicates preventative considerations

Malaria is a risk factor all year in the low altitude areas of the Mpumalanga Province (including Kruger National Park), Northern Province, & north eastern KwaZulu-Natal as far south as the Tugela River. Risk is greatest October to May. Malaria prevention options should be discussed with a travel medicine specialist prior to departure.



Remember to check the DFAT 'Smartraveller' website www.smartraveller.gov.au prior to departure



...for a safe and healthy journey

Travel Health Fact Sheet **South Africa**

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Clinics Australia Wide. For your nearest clinic call **1300 658 844** or visit www.traveldoctor.com.au



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