



## RECOMMENDED IMMUNISATIONS

The immunisations we recommend that you receive for the Medex Manaslu 2015 expedition are listed below. The recommendations are based upon current medical advice, taking into account our travel arrangements, destination, length of stay and risk of exposure to a range of hazards. The following immunisations can be obtained from your GP or a specialist travel clinic. Not all immunisations will be provided on the NHS and prices may vary. When you visit your GP or travel clinic, it would be advisable to take this list with you. Your GP should be able to provide you with a copy of your immunisation history.

**You should ensure that your primary immunisation courses and boosters for the following diseases are up to date**

(see Table 1):

- 1) *Diphtheria*
- 2) *Tetanus*
- 3) *Poliomyelitis*
- 4) *Haemophilus influenzae type b*
- 5) *Pneumococcal*
- 6) *Meningococcal serogroup C*
- 7) *Measles, mumps and rubella*

| <b>Table 1. Routine UK primary immunisation courses</b> |                                   |  |
|---|-----------------------------------|--|
| <b>Immunisation</b>                                     | <b>Primary course</b>             | <b>Booster</b>   |
| <i>Diphtheria</i>                                       | 3 doses at monthly intervals      | Single dose pre-primary school and thereafter 10 yearly                              |
| <i>Tetanus</i>  | 3 doses at monthly intervals      | Single dose pre-primary school and thereafter 10 yearly (to a maximum of five doses) |
| <i>Poliomyelitis</i>                                    | 3 doses at monthly intervals      | Single dose pre-primary school and thereafter 10 yearly                              |
| <i>Haemophilus influenzae type B</i>                    | 3 doses at monthly intervals      | Single dose at 12 - 13 months old  |
| <i>Pneumococcal</i>                                     | 2 doses at 2 monthly intervals    | Single dose at 12 - 13 months old  |
| <i>Meningococcal serogroup C</i>                        | 2 doses at monthly intervals      | Single dose at 12 - 13 months old  |
| <i>Measles, mumps and rubella</i>                       | Single dose at 12 - 13 months old | Single dose pre-primary school   |

**You should also arrange to be immunised against the following** (see Table 2):

- 8) Cholera** (caused by a bacterium which is spread through contaminated water and food in countries where hygiene is a problem. It affects the small bowel causing painless watery diarrhoea and vomiting which can lead to extreme dehydration)
- 9) Hepatitis A** (a virus transmitted via food and water in hot countries and in those where hygiene is a problem. It infects the liver and can cause fever, nausea, vomiting, diarrhoea, abdominal pain and jaundice)
- 10) Hepatitis B** (a virus transmitted via body fluids e.g. during sexual intercourse and via blood. This is a hazard in all developing countries, especially if medical treatment involving the use of non-sterile instruments and blood transfusion is required. It infects the liver and can cause fever, nausea, vomiting, diarrhoea, abdominal pain and jaundice. It can eventually lead to cirrhosis and cancer of the liver)
- 11) Rabies** (a viral infection spread by licks on broken skin and bites from infected animals which results in inflammation of the spinal cord and brain. It initially causes fever, generalised weakness and numbness and tingling at the wound site. Progressively, a fear of water, muscle spasms and convulsions occur. Once symptoms develop the disease is fatal. It is common in developing countries where good quality immunisation is not available. Medical attention should be sought immediately following an animal scratch or bite to ensure proper wound care and arrange further doses of vaccine as required. You should be aware that availability of post-exposure treatment will be limited in Nepal and you are, therefore, strongly advised to consider immunisation against Rabies)
- 12) Typhoid** (a bacterial infection spread via contaminated food and water in hot countries and in those where hygiene is a problem. It can cause fever, headache, confusion, abdominal pain and constipation)

**Table 2. Additional travel immunisations pre-travel to Nepal**

| <b>Immunisation</b>       | <b>Primary course</b>  | <b>Booster</b>  |
|---------------------------|--|---|
| <b><i>Cholera</i></b>     | <p><b>2 - 6 years old → 3 doses</b> (protects for 6 months)<br/> <b>&gt; 6 years old → 2 doses</b> (protects for 2 years)<br/> <b>Doses must be given between 1 and 6 weeks apart</b></p>  | Single dose 2 yearly to be administered at least 1 week prior to travel |
| <b><i>Hepatitis A</i></b> | Single dose to be given <b>at least 2 weeks prior to travel</b> (protects for 1 year)  | Required 6 – 12 months after initial dose (protects for 20 years)       |
| <b><i>Hepatitis B</i></b> | <p><b>3 doses, the 2<sup>nd</sup> dose given after 1 month and the 3<sup>rd</sup> dose given 5 months later</b><br/> <b>A blood test is required to confirm immunity</b></p>   | 5 yearly  |
| <b><i>Rabies</i></b>      | <p>Two possible vaccines:</p> <ol style="list-style-type: none"> <li><b>1) 3 doses, 2<sup>nd</sup> dose given 7 days after 1<sup>st</sup> dose and 3<sup>rd</sup> dose given on day 21</b></li> <li><b>2) 3 doses, 2<sup>nd</sup> dose given 7 days after 1<sup>st</sup> dose and 3<sup>rd</sup> dose given on day 28</b></li> </ol> | 2 – 5 yearly depending on which vaccine received                        |
| <b><i>Typhoid</i></b>     | Single dose <b>at least 1 month before travel</b>  | 3 yearly  |

N.B. Combined vaccines may be available.

**PLEASE ENSURE THAT YOU LEAVE SUFFICIENT TIME TO COMPLETE ALL COURSES OF IMMUNISATION BEFORE DEPARTURE.**

**You will require a yellow fever vaccination certificate to enter Nepal if you have travelled to any of the following countries within the last 10 years:**

| Africa   | Central and South America   | Exceptions  |
|--|---|---|
| Angola<br>Benin<br>Burkina Faso<br>Burundi<br>Cameroon<br>Central African Republic<br>Chad<br>Congo<br>Cote d'Ivoire<br>Democratic Republic of the Congo<br>Ethiopia<br>Equatorial Guinea<br>Gabon<br>Gambia<br>Ghana<br>Guinea<br>Guinea Bissau<br>Kenya<br>Liberia<br>Mali<br>Mauritania<br>Niger<br>Nigeria<br>Rwanda<br>Sao Tome and Principe<br>Sierra Leone<br>Senegal<br>Somalia<br>Sudan<br>Tanzania<br>Togo<br>Uganda | Argentina<br>Bolivia<br>Brazil<br>Colombia<br>Ecuador<br>French Guiana<br>Guyana<br>Panama<br>Paraguay<br>Peru<br>Surinam<br>Trinidad and Tobago<br>Venezuela | India also considers Zambia as an area with a risk of yellow fever transmission |

N.B. There is no risk of yellow fever in Nepal.

### **Malaria**

Malaria is a serious and sometimes fatal disease, transmitted via mosquito bites. It is a parasitic infection causing fever, aching muscles, cough, headache, seizures, loss of consciousness and diarrhoea. You cannot be immunised against malaria but can take a variety of preventative medications and precautions e.g. covering bare skin (especially after

sunset) and using insect repellent. There is a high risk of malaria in the low lying southern plains of Nepal but our itinerary falls within the area deemed low to no risk i.e. in the North West of Nepal and at altitude.

### **Japanese encephalitis**

Japanese encephalitis is caused by a virus, transmitted from animals (pigs) and birds to humans via mosquito bites. It is a disease causing swelling of the brain. This disease is found in the southern lowlands (Terai) and the Kathmandu Valley. Besides taking precautions to prevent mosquito bites e.g. covering bare skin (especially after sunset) and using insect repellent, immunisation against Japanese encephalitis is available. However, transmission occurs between July and December but our journey will take place during the months of March and April.