Italy

Including Sardinia and Sicily

Capital City: "Rome"
Official Language: "Italian"
Monetary Unit: "euro (€)"

General information

The information on these pages should be used to research health risks and to inform the pre-travel consultation. For advice regarding safety and security please check the UK Foreign and Commonwealth Office (FCO) website.

Travellers should ideally arrange an appointment with their health professional at least four to six weeks before travel. However, even if time is short, an appointment is still worthwhile. This appointment provides an opportunity to assess health risks taking into account a number of factors including destination, medical history, and planned activities. For those with pre-existing health problems, an earlier appointment is recommended.

All travellers should ensure they have adequate travel health insurance. If visiting European Economic Area (EEA) countries carry an European health insurance card (EHIC) as this will allow access to state-provided healthcare in EEA countries, at a reduced cost, or sometimes for free. The EHIC, however, is not an alternative to travel insurance.

A list of useful resources including advice on how to reduce the risk of certain health problems is
Details of vaccination recommendations and requirements are provided below.

**All Travellers**

Travellers should be up to date with routine vaccination courses and boosters as recommended in the UK. These vaccinations include for example measles-mumps-rubella (MMR) vaccine and diphtheria-tetanus-polio vaccine.

Country specific diphtheria recommendations are not provided here. Diphtheria tetanus and polio are combined in a single vaccine in the UK. Therefore, when a tetanus booster is recommended for travellers, diphtheria vaccine is also given. Should there be an outbreak of diphtheria in a country, diphtheria vaccination guidance will be provided where appropriate.

Those who may be at increased risk of an infectious disease due to their work, lifestyle choice, or certain underlying health problems should be up to date with additional recommended vaccines. See the individual chapters of the ‘Green Book’ Immunisation against infectious disease for further details.

**Certificate Requirements**

There are no certificate requirements under International Health Regulations.

**Most Travellers**

The vaccines in this section are recommended for most travellers visiting this country. Information on these vaccines can be found by clicking on the blue arrow. Vaccines are listed alphabetically.

### Tetanus

Tetanus is caused by a toxin released from Clostridium tetani and occurs worldwide. Tetanus bacteria are present in soil and manure and may be introduced through open wounds such as a puncture wound, burn or scratch.

**Prevention**

Travellers should thoroughly clean all wounds and seek appropriate medical attention.

**Tetanus vaccination**
Travellers should have completed a primary vaccination course according to the UK schedule.
If travelling to a country where medical facilities may be limited, a booster dose of a tetanus-containing vaccine is recommended if the last dose was more than ten years ago even if five doses of vaccine have been given previously.

Country specific information on medical facilities may be found in the ‘health’ section of the FCO foreign travel advice website.

Some Travellers

The vaccines in this section are recommended for some travellers visiting this country. Information on when these vaccines should be considered can be found by clicking on the arrow. Vaccines are listed alphabetically.

Rabies (Bat Lyssavirus)

Although rare, bat lyssaviruses (bat rabies) can be transmitted to humans or other animals following contact with the saliva of an infected bat most often by a bite. The disease can also be transmitted if the saliva of an infected bat gets into open wounds or mucous membranes (such as on the eye, nose or mouth). Bat lyssaviruses can cause disease in humans that is indistinguishable from rabies.

Symptoms can take some time to develop, but when they do the condition is almost always fatal.

The risk to most travellers is low. However, it is increased for certain occupations for example bat handlers and veterinarians, or certain activities such as caving.

Bat Lyssavirus in Italy

Rabies has not been reported in this country; therefore most travellers are considered to be at low risk. However, bats may carry bat lyssavirus (bat rabies).

Prevention

- Travellers should avoid contact with bats. Bites from bats are frequently unrecognised. Rabies-like disease caused by bat lyssaviruses is preventable with prompt post-exposure rabies management.
- Following a possible exposure, wounds should be thoroughly cleansed and an urgent local medical assessment sought, even if the wound appears trivial. Although rabies has not been reported in other animals in this country, it is sensible to seek prompt medical advice if bitten or scratched. It is possible, although very rare for bats to pass rabies like viruses to other animals including pets.
- Post-exposure treatment and advice should be in accordance with national guidelines.

Rabies vaccination

A full course of pre-exposure vaccines simplifies and shortens the course of post-exposure treatment and removes the need for rabies immunoglobulin which is in short supply worldwide.

- Pre-exposure rabies vaccinations are recommended for those who are at increased risk due
to their work (e.g. laboratory staff working with the virus and those working with bats).
- Pre exposure vaccines could be considered for those whose activities put them at increased risk of exposure to bats.

Rabies in brief

Tick-borne encephalitis (TBE)

Tick-borne encephalitis (TBE) is a viral infection transmitted by the bite of infected ticks. Less commonly, cases of TBE occur following ingestion of unpasteurised milk products.

Travellers are at increased risk of exposure during outdoor activities in areas of vegetation (gardens, parks, meadows, forest fringes and glades). Ticks are usually most active between early spring and late autumn.

Tick-borne encephalitis in Italy

There is a risk of TBE in some areas of this country. The main affected regions are Trentino-Alto Adige, Veneto, Friuli-Venezia Giulia, Emilia-Romagna, and Puglia. The transmission season varies, however, ticks are most active during early spring to late autumn.

Prevention

- All travellers should avoid tick bites during outdoor activities.
- Travellers should check their skin regularly for ticks and remove them as soon as possible with a recommended technique.
- Travellers should not eat or drink unpasteurised milk products.

Tick-borne encephalitis vaccination

Vaccination is recommended for those visiting affected areas whose activities put them at increased risk including:

- Those who will be going to live in TBE risk areas
- Those working in forestry, woodcutting, farming and the military
- Travellers to forested areas, e.g. campers, hikers, hunters and individuals who undertake fieldwork
- Laboratory workers who may be exposed to TBE

Other risks

There are some risks that are relevant to all travellers regardless of destination. These may for example include road traffic and other accidents, diseases transmitted by insects or ticks, diseases transmitted by contaminated food and water, sexually transmitted infections, or health issues related to the heat or cold. Some additional risks (which may be present in all or part of this...
country) are mentioned below and are presented alphabetically.

**Altitude**

There is a risk of altitude illness when travelling to destinations of 2,500 metres (8,200 feet) or higher. Important risk factors are the altitude gained, rate of ascent and sleeping altitude. Rapid ascent without a period of acclimatisation puts a traveller at higher risk.

There are three syndromes; acute mountain sickness (AMS), high-altitude cerebral oedema (HACE) and high-altitude pulmonary oedema (HAPE). HACE and HAPE require immediate descent and medical treatment.

**Altitude illness in Italy**

There is a point of elevation in this country higher than 2,500 metres.

**Prevention**

- Travellers should spend a few days at an altitude below 3,000m.
- Where possible travellers should avoid travel from altitudes less than 1,200m to altitudes greater than 3,500m in a single day.
- Ascent above 3,000m should be gradual. Travellers should avoid increasing sleeping elevation by more than 500m per day and ensure a rest day (at the same altitude) every three or four days.
- Acetazolamide can be used to assist with acclimatisation, but should not replace gradual ascent.
- Travellers who develop symptoms of AMS (headache, fatigue, loss of appetite, nausea and sleep disturbance) should avoid further ascent. In the absence of improvement or with progression of symptoms the first response should be to descend.
- Development of HACE or HAPE symptoms requires immediate descent and emergency medical treatment.

**Altitude illness in brief**

**Biting insects or ticks**

Insect or tick bites can cause irritation and infections of the skin at the site of a bite. They can also spread certain diseases.

**Diseases in Southern Europe**
There is a risk of insect or tick borne diseases in some areas of Southern Europe. This includes diseases such as Crimean-Congo haemorrhagic fever, leishmaniasis and West Nile virus.

**Prevention**

- All travellers should avoid insect and tick bites day and night.
- There are no vaccinations (or medications) to prevent these diseases.

Further information about specific insect or tick borne diseases for this country can be found, if appropriate on this page, in other sections of the country information pages and the insect and tick bite avoidance factsheet.

- Latest News: Italy
- Outbreaks: Italy