Ascension, St Helena, Tristan Da Cunha

Capital City: "Georgetown, Jamestown and Edinburgh of the Seven Seas"
Official Language: "English"
Monetary Unit: "St Helena Pound (equal to British pound)"

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.

A list of useful resources including advice on how to reduce the risk of certain health problems is available below.

Resources

- Food and water hygiene
- Insect and tick bite avoidance
- Personal safety
- Sexually transmitted infections
- Sun protection

Vaccine Recommendations

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.

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

Please read the information below carefully, as certificate requirements may be relevant to certain travellers only. For travellers further details, if required, should be sought from their healthcare professional.

- **There is no risk of yellow fever** on these islands, however, there is a certificate requirement for Tristan de Cunha and Saint Helena.
- **Tristan de Cunha**: Under International Health Regulations, a yellow fever vaccination certificate is required for travellers over 6 months of age arriving from countries with risk of yellow fever transmission and for travellers having transited through an airport of a country with risk of yellow fever transmission. Infants from 6 months may be vaccinated when the risk of yellow fever is high (expert opinion should be sought in these situations).
- **Saint Helena**: Under International Health Regulations a yellow fever vaccination certificate is required for travellers over 1 year of age arriving from countries with risk of yellow fever transmission.
- **Ascension**: There are no certificate requirements under International Health Regulations. According to World Health Organization (WHO), from 11 July 2016 (for all countries), the yellow fever certificate will be valid for the duration of the life of the person vaccinated. As a consequence, a valid certificate, presented by arriving travellers, cannot be rejected on the grounds that more than ten years have passed since the date vaccination became effective as stated on the certificate; and that boosters or revaccination cannot be required. See [WHO Q&A](https://apps.who.int/immunization_monitoring/apps_coverage/).
- **View the WHO list of countries with risk of yellow fever transmission**.

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.

**Hepatitis A**

Hepatitis A is a viral infection transmitted through contaminated food and water or by direct contact with an infectious person. Symptoms are often mild or absent in young children, but the disease becomes more serious with advancing age. Recovery can vary from weeks to months. Following hepatitis A illness immunity is lifelong.

Those at increased risk include travellers visiting friends and relatives, long-stay travellers, and those visiting areas of poor sanitation.

**Prevention**

All travellers should take care with personal, food and water hygiene.

**Hepatitis A vaccination**

As hepatitis A vaccine is well tolerated and affords long-lasting protection, it is recommended for all previously unvaccinated travellers.
**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.

**Typhoid**

Typhoid is a bacterial infection transmitted through contaminated food and water. Previous typhoid illness may only partially protect against re-infection.

Vaccination is recommended for most travellers, particularly travellers visiting friends and relatives, those in contact with an infected person, young children, frequent or long-stay travellers visiting areas where sanitation and food hygiene are likely to be poor, and laboratory personnel who may handle the bacteria for their work.

**Prevention**

All travellers should take care with personal, food and water hygiene.

**Typhoid vaccination**

- Oral and injectable typhoid vaccinations are available.

---

**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.

**Hepatitis B**

Hepatitis B is a viral infection; it is transmitted by exposure to infected blood or body fluids. This mostly occurs during sexual contact or as a result of blood-to-blood contact (for example from contaminated equipment during medical and dental procedures, tattooing or body piercing procedures, and sharing of intravenous needles). Mothers with the virus can also transmit the infection to their baby during childbirth.

**Hepatitis B in Ascension Island, St Helena, Tristan de Cunha**

2% or more of the population are known or thought to be persistently infected with the hepatitis B virus (intermediate/high prevalence).

**Prevention**

Travellers should avoid contact with blood or body fluids. This includes:

- avoiding unprotected sexual intercourse.
- avoiding tattooing, piercing, public shaving, and acupuncture (unless sterile equipment is used).
- not sharing needles or other injection equipment.
- following universal precautions if working in a medical/dental/high risk setting.

A sterile medical equipment kit may be helpful when travelling to resource poor areas.

**Hepatitis B vaccination**

Vaccination could be considered for all travellers, and is recommended for those whose activities or medical history put them at increased risk including:

- those who may have unprotected sex.
- those who may be exposed to contaminated needles through injecting drug use.
- those who may be exposed to blood or body fluids through their work (e.g. health workers).
- those who may be exposed to contaminated needles as a result of having medical or dental care e.g. those with pre-existing medical conditions and those travelling for medical care abroad including those intending to receive renal dialysis overseas.
- long-stay travellers.
- those who are participating in contact sports.
- families adopting children from this country.

**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 Ascension Island, St Helena, Tristan de Cunha**

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 treatment.
- 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 world-wide.

- 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.

**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. Select risk to expand information.

**Biting insects or ticks**

Insect or tick bites can cause irritation and infections of the skin at the site of a bite.

**Diseases in Ascension, Saint Helena, Tristan de Cunha**

In some areas of Ascension, Saint Helena and Tristan de Cunha certain insects or ticks may be present.

**Prevention**

- All travellers should avoid insect and tick bites day and night.

Further information is available in the [insect and tick bite avoidance factsheet](#).

**Influenza (seasonal)**

Seasonal influenza is a viral infection of the respiratory tract and spreads easily from person to person via respiratory droplets when coughing and sneezing. Symptoms appear rapidly and include fever, muscle aches, headache, malaise (feeling unwell), cough, sore throat and a runny nose. In healthy individuals, symptoms improve without treatment within two to seven days. Severe illness is more common in those aged 65 years or over, those under 2 years of age, or those who have underlying medical conditions that increase their risk for complications of influenza.

**Seasonal influenza in Ascension, St Helena, Tristan da Cunha**

Seasonal influenza occurs throughout the world. In the northern hemisphere (including the UK), most influenza occurs from as early as October through to March. In the southern hemisphere, influenza mostly occurs between April and September. In the tropics, influenza can occur throughout the year.

**Prevention**

All travellers should:

- Avoid close contact with symptomatic individuals
- Avoid crowded conditions where possible
- Wash their hands frequently
- Practise ‘cough hygiene’: sneezing or coughing into a tissue and promptly discarding it safely, and washing their hands
- Avoid travel if unwell with influenza-like symptoms
- A vaccine is available in certain circumstances (see below)*

*In the UK, seasonal influenza vaccine is offered routinely each year to those at higher risk of developing of severe disease following influenza infection, and certain additional groups such as healthcare workers and children as part of the UK national schedule (see [information](#)).
on vaccination). For those who do not fall into these groups, vaccination may be available privately.

If individuals at higher risk of severe disease following influenza infection are travelling to a country when influenza is likely to be circulating they should ensure they received a flu vaccination in the previous 12 months.

The vaccine used in the UK protects against the strains predicted to occur during the winter months of the northern hemisphere. It is not possible to obtain vaccine for the southern hemisphere in the UK, but the vaccine used during the UK influenza season should still provide important protection against strains likely to occur during the southern hemisphere influenza season, and in the tropics.

**Avian influenza**

Avian influenza viruses can rarely infect and cause disease in humans. Such cases are usually associated with close exposure to infected bird or animal populations. Where appropriate, information on these will be available in the outbreaks and news sections of the relevant country pages. Seasonal influenza vaccines will not provide protection against avian influenza.

[Avian influenza in brief](#)