

# **Australia**

See also: Christmas Island (Australia)

Capital City: "Canberra"
Official Language: "English"

Monetary Unit: "Australian dollar (\$A)"

# **General Information**

### **General Information**

The information on these pages should be used to research health risks and to inform the pre-travel consultation.

Travellers should check the <u>Foreign, Commonwealth & Development Office (FCDO) country-specific travel advice page</u> (where available) which provides information on travel entry requirements in addition to safety and security advice.

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
- Sun protection

# **Vaccine Recommendations**

### 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 <u>recommended in the UK</u>. These vaccinations include for example <u>measles-mumps-rubella (MMR)</u> 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 details on the selective immunisation programmes and additional vaccines for individuals with underlying medical conditions at the bottom of the 'Complete routine immunisation schedule' document and the individual chapters of the 'Green Book' Immunisation against infectious disease for further details. Australia

# **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 transmission** in Australia, however, there is a certificate requirement.
- Under International Health Regulations, proof of vaccination against yellow fever is required for travellers over 1 year of age arriving from countries with risk of yellow fever transmission, and with the exception of Galapagos Islands in Ecuador, and for travellers having transited for more than 12 hours through an airport of a country with risk of yellow fever transmission and with the same exception as mentioned above.
- 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.
- 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.

### **Tetanus**

Tetanus is caused by a toxin released from *Clostridium tetani* bacteria 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 medical attention for injuries such as animal bites/scratches, burns or wounds contaminated with soil.

### **Tetanus vaccination**

Travellers should have completed a tetanus vaccination course according to the UK



schedule.

• If travelling to a country or area 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 <u>FCDO</u> <u>foreign travel advice</u> pages.

Tetanus in brief

# 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 spread through blood, semen and vaginal 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 pass on the infection to their baby during childbirth.

## Hepatitis B in Australia

This country is considered to have an intermediate or high prevalence of hepatitis B.

# **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 healthcare or other higher 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. This includes:

- 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 and aid workers).



- Those at high risk of requiring medical or dental procedures or hospitalisation e.g. those with pre-existing medical conditions, those who may require travelling for medical care abroad, or those travelling to visit families or relatives.
- Long-stay travellers.
- Those who are participating in contact sports.
- Families adopting children from this country.

Hepatitis B in brief

# Japanese encephalitis

Japanese encephalitis (JE) is a viral infection transmitted to humans by the bite of an infected mosquito. These mosquitoes usually bite between dusk and dawn, mainly in rural areas; especially where there are rice fields, swamps and marshes. Mosquitoes become infected by biting JE infected animals (particularly pigs) or birds.

Travellers are at increased risk of infection when visiting rural areas. Short trips (usually less than a month) especially if only travelling to urban areas, are considered lower risk.

# Japanese encephalitis in Australia

JE occurs in this country, transmission is considered to be year-round. The affected areas are the Torres Strait Islands and Cape York Peninsula in north eastern Australia. Human cases are rarely reported.

**Important note** - please also check the outbreak updates and important news section. Cases have been reported since 2022 in areas outside of the previously defined risk area. In 2025, cases have been reported in News South Wales, Victoria and Queensland. Vaccination campaigns are in place for some residents; see <u>Victoria Department of Health</u>, <u>NSW Health</u> and <u>Queensland Government</u> for further details.

# **Prevention**

All travellers should avoid mosquito bites particularly between dusk and dawn.

## Japanese encephalitis vaccination

- Vaccination is recommended for those whose activities put them at increased risk (see above)
- Vaccination could be considered for those on shorter trips if the risk is considered to be sufficient e.g. those spending time in areas where the mosquito breeds such as rice fields, marshlands, or pig farming areas.

Japanese encephalitis in brief

## 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 Australia

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 <u>national guidelines</u>.

#### 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.

Rabies in brief

# Other Risks

# **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, 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. They can also spread certain diseases.

# **Diseases in Australia**

There is a risk of insect or tick-borne diseases in some areas of Australia. This includes diseases such as <u>Murray Valley virus</u>, <u>Ross River virus</u> and <u>West Nile virus</u>.

### 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 <u>insect and tick</u> bite avoidance factsheet.

### **Dengue**

Dengue is a viral infection spread by mosquitoes which mainly feed during daytime hours. It causes a flu-like illness, which can occasionally develop into a more serious life-threatening illness. Severe dengue is rare in travellers.

The mosquitoes that spread dengue are more common in towns, cities and surrounding areas.

## Dengue in Australia

There is a risk of dengue in the state of Queensland. At present the risk of dengue in other parts of Australia is minimal.

Information on current outbreaks, where available, will be reported on our outbreak surveillance database.

# **Prevention**

- Vaccination is not recommended.
- Travellers should avoid mosquito bites, particularly during daytime hours.

Dengue in brief

### Influenza

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 Australia

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 <u>information on vaccination</u>). 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

# **Outdoor air quality**

Poor air quality is a significant public health problem in many parts of the world. Exposure to high levels of air pollution over short time periods (e.g. minutes/hours/days) and longer time periods (e.g. years) is linked to many different acute and chronic health problems. These effects are mainly on the respiratory (lungs and airways) and cardiovascular (heart function and blood circulation) systems.

Current information on world air quality is available from the world air quality index project.

### Prevention



Travellers with health problems that might make them more vulnerable to the effects of air pollution who are travelling to areas of high pollution should:

- discuss their travel plans with their doctor, and carry adequate supplies of their regular medication.
- take sensible precautions to minimise their exposure to high levels of air pollution.
- check local air quality data and amend their activities accordingly.
- take notice of any health advisories published by the local Ministry of Health and Department for Environment, and follow the guidance provided.

It is unclear if face masks are beneficial at reducing exposure and may make breathing more difficult for those with pre-existing lung conditions. Those who choose to use one should make sure that the mask fits well and know how to wear it properly.

Outdoor air quality in brief

# Sexually transmitted infections

Sexually transmitted infections (STIs) are a group of viral, bacterial and parasitic infections spread during sexual intercourse or by intimate contact. Certain STIs can be more difficult to treat due to higher levels of antibiotic resistance and some STIs that are rare in the UK may be more common in other world regions.

Anyone who is sexually active is at risk of getting an STI wherever they are in the world.

Risk is higher for travellers who:

- have sex without a condom
- have sex with new or casual partners
- engage in sex tourism
- have sex under the influence of drugs or alcohol

Symptoms of STIs vary depending on the type of infection; some may only cause mild or unnoticeable symptoms. If symptoms do occur, they can include a rash, discharge, itching, blisters, sores or warts in genital and/or anal areas, pain when peeing and flu like symptoms.

If left untreated, STIs can cause serious long term health issues such as fertility problems, pelvic inflammatory disease and pregnancy complications.

# **Prevention**

Using condoms consistently and correctly with new or casual partners is the most effective way to reduce risk of STIs.

Travellers can also reduce their risk of STIs by:

- ensuring they are up to date for all UK recommended vaccines, including if appropriate gonorrhoea, hepatitis B, mpox and human papillomavirus (HPV) vaccines
- considering <u>HIV Pre-Exposure Prophylaxis (PrEP)</u> if appropriate

Travellers should seek medical advice and give their travel history if they think they may have an



STI, even if they have no symptoms. They should also have a test for STIs if they have had sex without condoms with a new or casual partner while abroad.

In the UK <u>STI testing</u> is free and confidential.

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Latest Outbreaks