

# Trinidad and Tobago

Capital City : "Port of Spain"

Official Language: "English"

Monetary Unit: "Trinidad and Tobago dollar (TT\$)"

## General Information

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

Travellers should check the [Foreign, Commonwealth & Development Office \(FCDO\) country-specific travel advice page](#) (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 [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 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.

### Certificate requirements

- There are no certificate requirements under International Health Regulations.
- There is a **risk of yellow fever** transmission in **parts** of this country (see '*Some Travellers*' section below).

### 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 [FCDO foreign travel advice](#) 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.

## 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 Trinidad and Tobago

There is a risk of dengue in this country.

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

## Prevention

- Travellers should avoid mosquito bites, particularly during daytime hours.

### Dengue vaccination

Vaccination can be considered for individuals aged 4 years of age and older who have had dengue infection in the past and who are:

- travelling to areas where there is a risk of dengue infection or areas with an ongoing outbreak of dengue, or
- are exposed to dengue virus through their work, such as laboratory staff working with the virus

Exceptionally, vaccination can be considered in those who have not had dengue in the past. In these situations, further expert advice should be considered. Detailed guidance on how to ascertain previous infection is available in the [UK Health Security Agency Immunisation against infectious disease the 'Green book'](#). The final decision on vaccination rests with the health professional and the traveller after a detailed risk assessment has been performed and the potential risks of vaccination explained.

[Dengue in brief](#)

## 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 can be more serious with advancing age. Recovery can vary from weeks to months. Following hepatitis A infection immunity is lifelong.

## Prevention

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

## Hepatitis A vaccination

Vaccination is recommended for those whose activities put them at increased risk. This includes:

- Those who are staying with or visiting the local population.
- Frequent and/or long-stay travellers to areas where sanitation and food hygiene are likely to be poor.
- Adventure travellers visiting rural areas and staying in basic accommodation such as backpackers.
- Those with existing medical conditions such as liver disease or haemophilia.
- Men who have sex with men.
- People who inject drugs.
- Those who may be exposed to the virus through their work.
- Those going to areas of hepatitis A outbreaks who have limited access to safe water and medical care.

[Hepatitis A in brief](#)

## Rabies

Rabies is a viral infection which is usually transmitted following contact with the saliva of an infected animal most often via a bite, scratch or lick to an open wound or mucous membrane (such as on the eye, nose or mouth). Although many different animals can transmit the virus, worldwide most cases follow a bite or scratch from an infected dog. Bats are also an important source of infection in some countries.

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

The risk of exposure is increased by certain activities and length of stay (see below). Children are at increased risk as they are less likely to avoid contact with animals and to report a bite, scratch or lick.

## Rabies in Trinidad and Tobago

Rabies has only been reported in wild animals in this country; therefore most travellers are considered to be at low risk for rabies. Bats may also carry rabies-like viruses in this country.

## Prevention

- Travellers should avoid contact with wild animals. Rabies is preventable with prompt post-exposure 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 domestic animals, it is still sensible to seek prompt medical advice if bitten or scratched by all animals.

- Post-exposure treatment and advice should be in accordance with [national guidelines](#).

### **Rabies vaccination**

- Pre-exposure vaccines are recommended for those who are at increased risk due to their work (e.g. laboratory staff working with the virus, those working with animals or health care workers who may be caring for infected patients).
- Pre-exposure vaccines could be considered for those who are at increased risk of exposure to wild animals.

[Rabies in brief](#)

### **Yellow fever**

Yellow fever is a viral infection transmitted by mosquitoes which predominantly feed between dawn and dusk, but may also bite at night, especially in the jungle environment. Symptoms may be absent or mild, but in severe cases, it can cause internal bleeding, organ failure and death.

### **Yellow fever in Trinidad and Tobago**

There is a risk of yellow fever transmission in **parts of this country** (see below).

### **Prevention**

Travellers should avoid mosquito bites at all times.

### **Yellow fever vaccination**

- Vaccination is recommended for travellers aged 9 months and older travelling to densely forested areas on the island of Trinidad.
- Vaccination is **not recommended** for cruise ship passengers and aircraft passengers in transit or travellers whose itineraries are limited to the island of Tobago.

The yellow fever vaccine is not suitable for all travellers, there are specific undesirable effects associated with it. This vaccine is only available at [registered yellow fever vaccination centres](#). Health professionals should carefully assess the risks and benefits of the vaccine, and seek specialist advice if necessary.

[Yellow fever 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 Caribbean

There is a risk of insect or tick-borne diseases in some areas of the Caribbean. This includes diseases such as [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](#).

### Chikungunya

Chikungunya is a viral infection spread by mosquitoes which bite mainly during daytime hours. It causes a flu-like illness and can cause severe joint and muscles pains which usually improve in 1-2 weeks but may persist for months or years. It is rarely fatal.

## Chikungunya in Trinidad and Tobago

This country has reported chikungunya cases in the past or shares a land border with a country that has reported cases recently.

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.

[Chikungunya 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 Trinidad and Tobago

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](#)

## 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 [HIV Pre-Exposure Prophylaxis \(PrEP\)](#) 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 [STI testing](#) is free and confidential.

### Zika virus

Zika virus (ZIKV) is a viral infection spread by mosquitoes which predominantly feed during daytime hours. A small number of cases of sexual transmission of ZIKV have also been reported. Most people infected with ZIKV have no symptoms. When symptoms do occur, they are usually mild and short-lived. Serious complications and deaths are not common. However, ZIKV is a cause of Congenital Zika Syndrome (microcephaly and other congenital anomalies) and neurological complications such as Guillain-Barré syndrome.

### Zika virus in Trinidad and Tobago

There is a risk of Zika virus in this country. Details of specific affected areas within this country are not available, but information on current outbreaks where available will be reported on our outbreak surveillance database.

Pregnant women should discuss the suitability of travel and the potential risk that Zika virus may present with their health care provider.

## Prevention

- All travellers should avoid mosquito bites, particularly during daytime hours.
- There is no vaccination or medication to prevent Zika virus infection.
- Women should avoid becoming pregnant while travelling in this country, and for 2 months (8 weeks) after their last possible Zika virus exposure\* (see below if male partner has travelled).
- If a woman develops symptoms compatible with Zika virus infection, it is recommended she avoids becoming pregnant for a further 2 months following recovery.
- Women who visited this country while pregnant, or who become pregnant within 2 months after their last possible Zika virus exposure\*, should contact their GP, obstetrician or midwife for further advice, even if they have not been unwell.

Please note screening of returning travellers without Zika virus symptoms is not available on the NHS. Couples planning pregnancy in the very near future should consider whether they should avoid travel to a country or area with risk of Zika virus, rather than delay conception for the recommended period (see below) after travel. This particularly includes couples in assisted fertility programmes.

## Prevention of sexual transmission

Couples should follow [guidance on prevention of sexual transmission of Zika virus](#) and avoid conception as follows:

- If both partners travelled, for 3 months after last possible Zika virus exposure.\*
- Male traveller only, for 3 months after last possible Zika virus exposure.\*
- Female traveller only, for 2 months after last possible Zika virus exposure.\*

See [further information for pregnant women, their partners and couples planning pregnancy](#)

**\*Last possible Zika virus exposure is defined as the later of either the date of leaving a country or area with risk for Zika virus transmission, or the date on which unprotected sexual contact with a potentially infectious partner took place.**

See [detailed guidance on factors to consider when assessing the risk of Zika virus](#).

[Zika virus in brief](#)

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