France

Including the island of Corsica

Capital City : "Paris"
Official Language: "French"
Monetary Unit: "euro (€)"

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 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.

If visiting European Union (EU) countries, carry an European Health Insurance Card (EHIC) or a Global Health Insurance Card (GHIC) as this will allow access to state-provided healthcare in some countries at a reduced cost, or sometimes for free. The EHIC or GHIC, however, is not an alternative to travel insurance. Check the GOV.UK website for guidance.

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. France

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* 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.

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 France

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 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

Tick-borne encephalitis

Tick-borne encephalitis (TBE) is a viral infection spread by the bite of infected ticks. Occasionally cases of TBE occur after consumption of raw (unpasteurised) milk or dairy products from infected

animals (e.g. cows, goats and sheep).

Travellers are at increased risk of exposure during outdoor activities in areas of vegetation such as gardens, parks, meadows, woods, forest fringes and glades. This includes urban parks and woodland areas in cities. Ticks are usually most active between early spring and late autumn.

Tick-borne encephalitis in France

There is a risk of TBE in some areas of this country. The transmission season varies, however, ticks are most active during early spring to late autumn.

The main affected areas are in the north-eastern departments of Bas-Rhin and Haut-Rhin in Alsace, and near the city of Nancy. Cases have also been reported near the cities of Faverges and Grenoble in the south-eastern Auvergne-Rhône-Alpes region, and in the south-western department of Gironde in the Nouvelle-Aquitaine region.

Prevention

All travellers should avoid tick bites during outdoor activities, apply insect repellent frequently and follow tick bite avoidance advice.

Travellers should check their skin and clothes regularly for ticks and remove them as soon as possible with a recommended technique. Wearing light coloured clothes makes it easier to spot ticks.

Travellers should not eat or drink any unpasteurised milk products.

Tick-borne encephalitis vaccination

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

- Living in TBE risk areas.
- Working in forestry, woodcutting, farming and the military.
- Visiting forested areas and urban parks, e.g. camping, fieldwork, hiking and hunting.
- Laboratory workers who may be exposed to TBE.

Tick-borne encephalitis 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.

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 France

There is a point of elevation in this country higher than 2,500 metres. An example place of interest; Mt Blanc 4,807m.

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

Insects 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 Western Europe

There is a risk of insect or tick-borne diseases in some areas of Western Europe. 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 France

This country has reported localised outbreaks of chikungunya in Auvergne-Rhône-Alpes, Bourgogne-Franche-Comté, Centre-Val de Loire, Corsica, Grand Est, Île-de-France, Nouvelle-Aquitaine, Occitanie and Provence-Alpes-Côte d'Azur.

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

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 France

Since 2010, dengue outbreaks have been reported in France in the following areas: in the region of Provence-Alpes-Côte d'Azur (PACA) (departments of Alpes Maritimes, Bouches-du-Rhone, Valcluse and Var), the region of Occitanie (departments of Gard, Haute-Garonne, Hautes-Pyrénées Herault, Lot, Lozère and Pyrénées-Orientale), the region of Auvergne Rhône-Alpes (departments of Ain, Drôme, Loire and Rhône), the region of Île-de-France (Val-de-Marne department), the region of Nouvelle-Aquitaine (Gironde department) and the island of Corsica.

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 France

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

Schistosomiasis

Schistosomiasis is a parasitic infection. Schistosoma larvae are released from infected freshwater snails and can penetrate intact human skin following contact with contaminated freshwater. Travellers may be exposed during activities such as wading, swimming, bathing or washing clothes in freshwater streams, rivers or lakes.

Schistosomiasis infection may cause no symptoms, but early symptoms can include a rash and itchy skin ('swimmer's itch'), fever, chills, cough, or muscle aches. If not treated, it can cause serious long term health problems such as intestinal or bladder disease.

Schistosomiasis in French Island of Corsica

Cases of schistosomiasis have previously been reported from Corsica. There is a very low risk of schistosomiasis in Corsica.

Prevention

- There is no vaccine or tablets to prevent schistosomiasis.
- All travellers should avoid wading, swimming, or bathing in fresh water. Swimming in adequately chlorinated water or sea water is not a risk for schistosomiasis.
- Drink water that is boiled, filtered or bottled.
- Application of insect repellent before exposure to fresh water, or towel drying after possible exposure to schistosomiasis are not reliable in preventing infection.
- If you have concerns about your risk, discuss with your health care provider.

Schistosomiasis 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 France

Cases have previously been reported in Hyères city.

Based on current evidence there is a **negligible risk** of Zika virus.

Prevention

- All travellers should avoid mosquito bites, particularly during daytime hours.
- There is no vaccination or medication to prevent Zika virus infection.

Zika virus in brief

Latest News

Latest Outbreaks