

What's New

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Venezuela: Protests in Caracas, Maracaibo

What's New > Current Safety Bulletins • May 3 2016

Protests in response to government rationing of essential goods and services have been held in several cities, including Caracas and Maracaibo (Zulia State). Disruption to basic services (including power outages and water rationing) should be expected. Travelers should avoid demonstrations, follow the advice of local authorities, and monitor the situation through local media.

- **See countries:** Venezuela

Uganda: Yellow Fever Cases

What's New > Current Health Bulletins • Apr 29 2016 (Updated May 3 2016)

According to WHO, 24 suspected and 6 confirmed cases of yellow fever have been reported in the southern districts of Masaka, Bukomansimbi, Rakai, Kalungu, Lyantonde, Rukungiri, and Ntungamo since April 9, 2016. Confirmed cases have been reported from Masaka District (5 cases) and Rukungiri District (1 case). The last major outbreak was in 2010-11; the current cases appear unlinked to the current epidemic in Angola. Shoreland continues to recommend vaccination for all travelers over age 9 months.

- **See countries:** Uganda
- **See topics:** Yellow Fever

Zambia: Cholera Primarily in Lusaka Province

What's New > Current Health Bulletins • Feb 15 2016 (Updated May 2 2016)

According to international health authorities and press sources, more than 890 confirmed and suspected cases of cholera have been reported primarily in Lusaka District, Lusaka Province since February 5, 2016. Cases have also been reported in Nsama District, Northern Province; Chibombo District, Central Province; Rufunsa District, Lusaka Province; Ndola District, Copperbelt Province; and Mazabuka and Monze districts, Southern Province. A larger outbreak is still possible as opportunities for personal hygiene are limited during the current water shortage. Cholera vaccine, available in many countries but not the U.S., is recommended for aid and refugee workers only. Strict hygiene and food and beverage precautions are advised for travel to risk

areas. Travelers should carry oral rehydration salts in case of severe watery diarrhea.

- **See countries:** Zambia
- **See topics:** Cholera

Saudi Arabia: MERS-CoV, Sporadic Cases

What's New > Current Health Bulletins • Aug 22 2013 (Updated May 2 2016)

According to Saudi Arabia's Ministry of Health, more than 95 confirmed cases of Middle East respiratory syndrome coronavirus (MERS-CoV) have been reported since January 1, 2016; 14 of these cases have been reported in Riyadh. The most recent case was reported on May 2, 2016 in Riyadh. No suspected or confirmed in-flight transmission of MERS-CoV has occurred to date. Secondary cases have occurred almost exclusively in health care settings, with some in close household contacts. Cases have been exported from Saudi Arabia. Travelers should practice good personal hygiene and avoid physical contact with wild or farm animals and camels, consumption of camel products (e.g., unpasteurized milk, urine, and improperly cooked meat), and health care facilities in endemic areas. MERS-CoV infection should be considered in any traveler presenting with fever or respiratory illness (or atypical signs and symptoms such as vomiting or diarrhea in immunocompromised travelers) within 14 days of returning from Saudi Arabia. There is no known effective treatment for coronavirus infection. For complete information, see *Travax Medical Library: MERS Coronavirus*.

- **See countries:** Saudi Arabia
- **See topics:** MERS Coronavirus

Palau, Micronesia, Marshall Islands: Drought

What's New > Current Safety Bulletins • Mar 30 2016 (Updated May 2 2016)

A state of emergency has been declared due to drought conditions. Travelers should expect disruption of basic services (including water rationing), follow the advice of local authorities, and monitor the situation through local media.

- **See countries:** Marshall Islands, Micronesia, Palau
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China: Avian Influenza (H7N9) and (H5N6) in Jiangsu, Zhejiang, and Guangdong

What's New > Current Health Bulletins • Jan 8 2016 (Updated May 2 2016)

According to Hong Kong's Center for Health Protection and press sources, more than 75 cases (including 27 deaths) of human infection with avian influenza A(H7N9) have been reported primarily in Jiangsu, Zhejiang, and Guangdong provinces since January 2016; sporadic cases have also been reported from Shanghai Municipality and Fujian, Hunan, Anhui, Hubei, Jiangxi, and Shandong provinces. The outbreak has yet to peak. Nine cases (including 2 deaths) of human infection with novel avian influenza A(H5N6) have been reported in Guangdong, Hubei, Hunan, and Jiangxi provinces since December 2015. Most human cases of avian influenza have reported contact with poultry or live bird markets. Travelers should avoid places where direct contact with birds or poultry and their secretions may occur, such as live animal markets and poultry farms, and avoid consumption of poultry in affected areas, as it is difficult to determine visually if it is fully cooked. Avian influenza infection should be considered in any traveler presenting with respiratory illness within 10 days of returning from China, especially if from currently affected areas. See *Avian Influenza* in the Travax Medical Library for more information.

- **See countries:** China
- **See topics:** Avian Influenza

Papua New Guinea: First Cases of Zika in 2016

What's New > Current Health Bulletins • Apr 29 2016

According to WHO, 5 locally acquired, confirmed cases of Zika virus infection have been reported in Western Province, including Kiunga, since December 2015. Because of limits on the vector, mosquito-borne transmission in areas above 2,000 m (6,600 ft) does not occur. These are the first cases reported in Papua New Guinea since May 2015. Zika virus, transmitted by mosquitoes, is a flavivirus from the same family as dengue and West Nile viruses. Travelers are advised to practice daytime insect precautions. Pregnant women (in any trimester) from non-affected areas should not travel to affected areas of this country. WHO states that there is strong scientific consensus that Zika virus is a cause of Guillain-Barré syndrome, microcephaly, and other neurological disorders. Zika virus infection should be considered in any traveler (especially pregnant women) who reports Zika-like illness during or within 2 weeks of returning from this country. For more information, see Travax Medical Library: *Zika*.

- **See countries:** Papua New Guinea
- **See topics:** Zika

Angola: Kidnapping Threat to Westerners in Luanda

What's New > Current Safety Bulletins • Apr 29 2016

According to U.K. (FCO), an unspecified number of kidnappings involving foreign nationals, including Westerners, have been reported in Luanda. Kidnappings are frequently carried out while foreign nationals are in vehicles. Extreme vigilance is recommended while driving; be alert to intentional minor accidents and other ruses used by carjackers.

- **See countries:** Angola

Guadeloupe: Zika in Guadeloupe, Saint Martin, and Saint Barthelemy

What's New > Current Health Bulletins • Jan 18 2016 (Updated Apr 29 2016)

According to regional health authorities, more than 1,860 cases of Zika virus infection have been reported in Guadeloupe (more than 1,680 cases), Saint Martin (more than 180 cases), and Saint Barthelemy (1 case) since mid-January 2016; the outbreak appears to have peaked in Saint Martin. Zika had not previously been reported in Guadeloupe, Saint Martin, or Saint Barthelemy. Zika virus, transmitted by mosquitoes, is a flavivirus from the same family as dengue and West Nile viruses. Travelers are advised to practice daytime insect precautions. Pregnant women (in any trimester) from non-affected areas should not travel to this country. WHO states that there is strong scientific consensus that Zika virus is a cause of Guillain-Barré syndrome, microcephaly, and other neurological disorders. Zika virus infection should be considered in any traveler (especially pregnant women) who reports Zika-like illness during or within 2 weeks of returning from this country. For more information, see [Travax Medical Library: Zika](#).

- **See countries:** Guadeloupe
- **See topics:** Zika

United Kingdom: Measles Increasing in London

What's New > Current Health Bulletins • Apr 27 2016 (Updated Apr 29 2016)

According to Public Health England, more than 160 confirmed and suspected cases of measles, a significant increase over average incidence, have been reported in London since January 2016; most of these cases are in adolescents and young adults. The outbreak is yet to peak. Shoreland continues to make the following recommendations for travelers: All individuals 12 months of age born in 1957 or later (1970 or later in Canada and U.K.; 1966 or later in Australia) without history of disease or of 2 adequate doses of live vaccine at any time during their lives should complete a lifetime total of 2 doses of measles vaccine (spaced by at least 28 days). All infants aged 6-11 months should receive 1 dose of measles vaccine. All those born before 1970 (in Canada) without evidence of immunity or vaccination with measles-containing vaccine at or after age 1 year need 1 dose of measles vaccine.

- **See countries:** United Kingdom
- **See topics:** Measles, Mumps, Rubella