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Ecuador

Vaccine Handout

Boxes that are checked indicate vaccinations that have been recommended by and discussed with your travel health care provider, depending on your specific itinerary and activities. Some vaccines require more than 1 dose to complete the vaccination series, so you may need to return for the remaining doses before departing to ensure full protection.

Note: If 2 or more live virus vaccines (e.g., varicella, yellow fever, etc.) are to be given, they must be given on the same day or at least 28 days apart. Vaccines that contain live viruses or live bacteria are specifically noted below.

Recommended		Not Indicated; Given at Patient's Request	Vaccines
Given	Patient Declined		Travel Vaccinations for Ecuador
			Hepatitis A vaccine. Hepatitis A is a viral infection of the liver occurring worldwide (especially in developing countries), acquired through the consumption of fecally contaminated food (especially uncooked shellfish) or water or through close contact with infected persons via the fecal-oral route (including oral-anal sex). Symptoms are generally mild and may include nausea, loss of appetite, abdominal pain, malaise, fever, dark urine, and jaundice. Infection can be severe but is rarely fatal. A single dose of vaccine given any time before travel will provide adequate protection for healthy persons for the duration of the trip. Two doses of vaccine given 6 to 18 months apart will confer lifelong protection. Vaccine side effects are most commonly injection-site reactions.
			Typhoid vaccine. Typhoid fever is a bacterial infection occurring worldwide, acquired through the consumption of fecally contaminated food or water, mainly in Africa and South and Southeast Asia. Symptoms include a prolonged, gradually increasing high fever, fatigue, headache, muscle aches, and loss of appetite, which may be preceded by diarrhea. Two types of vaccine are available: injectable and oral. One dose of the killed bacterial injectable vaccine provides protection for 2 to 3 years. Four doses of the live oral bacterial vaccine (given on days 0, 2, 4, and 6) provide up to 5 years of protection. Vaccine side effects are most commonly injection-site reactions (with the injectable vaccine). Abdominal pain and cramps, nausea, vomiting, fever, headache, and rash can occur after receiving the oral vaccine.
			Influenza vaccine. Influenza (seasonal) is a highly contagious viral respiratory infection acquired through the inhalation of aerosolized droplets or direct contact with respiratory secretions from infected persons. Influenza transmission usually occurs during the cool months in temperate climates but varies throughout the year in the tropics. Symptoms include high fever, chills, muscle aches, headache, malaise, and dry cough. Adults should receive 1 dose of influenza vaccine each year because the vaccine lasts only for the current influenza season. Vaccine is given via injection (killed virus vaccines) or nasal spray (live virus vaccine). Various formulations exist for different patient populations or risk groups. Vaccine side effects are most commonly injection-site reactions and, less frequently, fever, malaise, and muscle aches.
			Hepatitis B vaccine. Hepatitis B is a potentially serious viral infection of the liver acquired through contact with infected blood, blood products, or other bodily fluids, which can become chronic leading to liver failure or cancer. Infection is prevalent in most developing countries. Symptoms vary by age and when present, include fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, clay-colored stools, and jaundice. Two or 3 doses of vaccine are given over 1 to 6 months (depending on brand) and provide protection for at least 30 years. Vaccine side effects are most commonly injection-site reactions, headache, fever, fatigue, and nausea.
			Hepatitis A-Hepatitis B combination vaccine. The combined hepatitis A-hepatitis B vaccine is given in 3 doses (at 0, 1, and 6 months) and results in lifelong protection. An accelerated schedule is available: 3 doses given on days 0, 7, and 21 to 30, and a fourth dose at 12 months; 3 doses protect for 1 year, and a completed schedule provides lifelong protection. Vaccine side effects are most commonly injection-site reactions, headache, and nausea.
			Yellow fever vaccine. Yellow fever (YF) is a viral infection acquired through the bite of day-biting infected mosquitoes in tropical sub-Saharan Africa and the rainforests of tropical South America. Symptoms include fever, chills, and muscle aches that may progress to vomiting, upper abdominal pain, jaundice (yellow eyes and skin), and bleeding. YF vaccine is given either for personal protection against YF disease or may be required for entry into a country (or for both reasons). One dose of live-virus vaccine is given and becomes effective in about 10 days, providing long-term protection of at least 20 to 35 years. A booster dose may be needed every 10 years (or less) for some high-risk travelers. Vaccine side effects are most commonly injection-site reactions. Serious side effects are rare but may include brain inflammation in young children, neurological reactions, and multiple organ dysfunction (first time vaccinees only, mainly those aged ≥ 60 years).

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			Measles, mumps, rubella vaccine. Measles, mumps, and rubella (MMR) are contagious viral infections occurring worldwide, acquired through inhalation of infected respiratory droplets or contact with infected saliva or contaminated surfaces. The viruses can infect multiple organs (resulting in a variety of symptoms) and cause serious illness in adults. Persons born before 1957 in the U.S. (1970 in Canada and the U.K.; 1966 in Australia) are generally immune to all 3 diseases. Persons born after these dates and any other nonimmune persons should have received a total of 2 doses of live-virus MMR vaccine given at least 28 days apart to provide lifelong protection. Vaccine side effects are most commonly injection-site reactions and fever; a rash occurs infrequently.
			Rabies vaccine. Rabies is an acute, fatal, viral infection of the brain occurring worldwide, transmitted through saliva from penetrating bites, licks, or scratches from rabid dogs, bats, and other mammals. Preexposure vaccination consists of 3 doses given on days 0, 7, and 21 to 28. No regular booster doses are needed for typical travelers. If a bite occurs, all persons, even those who were previously vaccinated, should seek medical attention immediately because additional doses of vaccine are needed. In addition to the vaccine, rabies immune globulin must be given if the person did not receive a complete preexposure vaccine series as noted above. Vaccine side effects are most commonly injection-site reactions and fever, headache, dizziness, abdominal pain, and diarrhea. Neurological reactions can be a concern with some rabies products made abroad.
			Routine Vaccinations
			Tetanus, diphtheria, pertussis vaccine. Tetanus (lockjaw) is a bacterial infection affecting the muscles acquired through the contamination of wounds or other breaks in the skin. Diphtheria is a severe bacterial infection of the throat acquired through inhalation of aerosolized respiratory droplets from infected persons. Pertussis (whooping cough) is a bacterial infection acquired through inhalation of aerosolized respiratory droplets or direct contact with respiratory secretions of infected persons. All 3 diseases occur worldwide, especially in developing countries with poor vaccination coverage. Adult travelers should have completed a primary series of childhood vaccine against these 3 diseases and have had 1 subsequent dose of tetanus, diphtheria, pertussis (Tdap) vaccine. A booster dose of tetanus and diphtheria (Td) vaccine (Tdap for travelers) is given every 10 years thereafter. Vaccine side effects are most commonly injection-site reactions, headache, fatigue, and fever.
			Pneumococcal vaccine. Pneumococcal disease is a bacterial infection occurring worldwide, acquired through direct contact with respiratory secretions from infected persons. Symptoms include sudden onset of fever, chills, difficulty or rapid breathing, and productive cough, and may progress to meningitis (inflammation of the brain membranes causing stiff neck, headache, lack of energy, or seizures), respiratory failure, or blood infection. Two types of pneumococcal vaccines are available, and many persons will need both. Prevnar 13 is routinely given to infants in a 4-dose series, whereas Pneumovax 23 is given routinely as a single-dose to adults 65 years and older. Both vaccines are given to persons with weakened immune systems or with certain medical conditions or risk factors. Duration of vaccine protection from Prevnar 13 is lifelong; no booster is required. Duration of protection from Pneumovax 23 is at least 5 years; 1 or 2 boosters are recommended for certain persons. Side effects of both vaccines are most commonly injection-site reactions.
			Varicella vaccine. Varicella (chickenpox) is a highly contagious viral infection occurring worldwide, acquired via inhalation of aerosolized respiratory droplets (e.g., from coughs or sneezes) or blister fluid and by direct contact with blister fluid from infected persons. Symptoms are mild and include fever, malaise, and itchy, fluid-filled skin blisters that become scabs. Healthy individuals and nonpregnant women born before 1980 in the U.S. are assumed to be immune (except health care workers). All persons 4 years and older, born in 1980 or later, and without history of disease or of 2 countable doses of varicella vaccine at any time during their lives should complete a lifetime total of 2 doses (spaced by at least 28 days) to provide long-lasting protection. Vaccine side effects are most commonly injection-site reactions and fever; a localized or generalized varicella-like rash may occur.
			Herpes zoster (shingles) vaccine. Herpes zoster (shingles) is a viral infection caused by the reactivation of the varicella (chickenpox) virus (which had become dormant following a previous chickenpox infection). Shingles is not transmitted person to person, although contact with shingles blisters can cause chickenpox in someone who has never had chickenpox or chickenpox vaccination. Symptoms include a localized, extremely painful rash on one side of the body (that progresses to blisters then to dry, crusted lesions) that may leave long-term residual nerve pain. Two doses of a killed-virus vaccine (spaced 2-6 months apart) are given to everyone 50 years and older, even if they have had shingles or have previously received a dose of the live-virus vaccine. No boosters are recommended. Vaccine side effects include severe injection-site pain, swelling, and redness that resolve within 3 days.
			Human papillomavirus vaccine. Human papillomavirus (HPV) infection is acquired through sexual contact. Symptoms in both males and females include lesions in or on the skin, genitals, or mucous membranes. Consequences of infection may include cancer of the cervix, vagina, penis, anus, or throat. HPV vaccine is routinely given as 2 or 3 doses over a period of 6 or 12 months (depending on age at series initiation) in persons aged 11-26 years. Some individuals 9-10 and 27-45 years of age may need vaccination. Vaccine protection is long lasting; no booster dose is recommended. Vaccine side effects are mild and include injection-site reaction, fever, and headache.

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