Mauritania

Medical Summary

The health risk information presented here is summarized from Shoreland Travax[®], a decision-support tool used by health care providers to perform a detailed health risk analysis based on specific locations, individual travel styles, and traveler risk behaviors. Travax provides practitioners current, independently researched malaria risk and prevention recommendations in a map-based format that goes beyond the annual WHO and US CDC statements included here. Not included here are current reports from Travax of disease outbreaks or environmental events that may pose elevated risks to travelers' health and safety. The Providers section of this site offers a directory of health care providers who utilize Shoreland Travax for travel health counseling. Learn more about the detailed reports and maps available from these practitioners (includes links to samples).

General Information

Mauritania is a developing nation classified as lower middle income. Located in northwestern Africa along the Atlantic Ocean west of Mali, the climate is classified as predominantly dry (arid).

Vaccinations

Yellow Fever

An official yellow fever vaccination certificate may be required depending on your itinerary. Vaccination is usually recommended if you'll be traveling in areas where there is risk of yellow fever transmission.

- Requirement: A certificate proving yellow fever vaccination is required for travelers aged ≥ 1 year coming from countries with risk of YF transmission. This does not apply to airport transit stops (no exit through immigration checkpoint) in risk countries.
- Official Status: listed by WHO as a country where YF transmission risk is present.

Other Vaccines

Depending on your itinerary, your personal risk factors, and the length of your visit, your health care provider may offer you vaccination against COVID-19, hepatitis A, hepatitis B, influenza, measles, mumps, rubella, meningococcal meningitis, rabies, typhoid fever, or a one time polio booster if you haven't previously received one for travel. Routine immunizations, such as those that prevent tetanus/diphtheria or "childhood" diseases, should be reviewed and updated as needed.

Malaria

The following is current information as reported by the World Health Organization (WHO) and the US Centers for Disease Control (CDC):

WHO—International Travel and Health (current online update, Country List)

(2018) Malaria risk due predominantly to *P. falciparum* exists throughout the year in the entire country except in northern areas (Dakhlet-Nouadhibou and Tiris-Zemour). In Adrar and Inchiri there is Malaria risk during the rainy season (from July through October).

- Recommended prevention in risk areas: C Risk of *P. falciparum* malaria, in combination with reported chloroquine and sulfadoxine–pyrimethamine resistance. Mosquito bite prevention plus atovaquone–proguanil or doxycycline or mefloquine chemoprophylaxis (select according to reported side effects and contraindications) ^a
 - ^aAlternatively, for travel to rural areas with low risk of malaria infection, mosquito bite prevention can be combined with stand–by emergency treatment (SBET).

WHO Country List footnote: When available, the date of the most recent update or confirmation is indicated in parentheses in the country list. If no date is indicated, the most recent update or confirmation was provided before 2013.

CDC—Health Information for International Travel (current online edition)

Areas with malaria: All areas except Dakhlet-Nouadhibou and Tiris-Zemour in the north.

• Drug resistance³ : Chloroquine.

- Malaria species: P. falciparum >85%, P. ovale 5%-10%, P. vivax rare.
- Recommended chemoprophylaxis: Atovaquone-proguanil, doxycycline, mefloquine, or tafenoquine.⁴
 - ³ Refers to *P. falciparum* malaria unless otherwise noted.
 - ⁴ Primaquine and tafenoquine can cause hemolytic anemia in people with G6PD deficiency. Patients must be screened for G6PD deficiency before starting primaquine or tafenoquine. See *Tafenoquine Approved for Malaria Prophylaxis and Treatment* for more information.

Other Concerns

Travelers' Diarrhea

High risk exists throughout the country, including in deluxe accommodations. Community sanitation and food safety measures are generally inadequate. Some itineraries (e.g., remote destinations, austere accommodations) and activities (e.g., ecotourism, eating street or local-market food) further increase risk.

Travelers should observe food and beverage precautions, which reduce the likelihood of illness.

Travelers should carry loperamide for self-treatment of diarrhea and, if risk is moderate to high, an antibiotic to add if diarrhea is severe. Consult a knowledgeable health care provider regarding which antibiotic is appropriate for you and most effective for your destination.

Insect- and Arthropod-Borne Diseases

Dengue, leishmaniasis, Rift Valley fever, West Nile virus may pose a risk. Personal protective measures are important.

Other Disease and Health Risks

Additional concerns include Crimean-Congo hemorrhagic fever, hepatitis C, leptospirosis, marine hazards, schistosomiasis, sexually transmitted infections, snakebites, tuberculosis.

Consular Advice

The material below includes information from the US Department of State (DOS), the UK Foreign, Commonwealth & Development Office (FCO), Global Affairs Canada (GAC), and Australia's Department of Foreign Affairs and Trade (DFAT), as well as from additional open-source material. Standard safety precautions that apply to all international travel can be found in the Library article Safety and Security.

Consular Travel Advice

Due to terrorism and ongoing security concerns, UK (FCO), Canada (GAC), and Australia (DFAT) advise avoiding travel to Tiris Zemmour, Adrar, Tagant, Hodh ech Chargui, Hodh el Gharbi, Assaba, and Guidimaka regions and within 25 km (16 mi) of the border with Western Sahara; and advise reconsidering travel (or avoiding nonessential travel) to the Nouakchott-Nouadhibou corridor and the rest of the country. US (DOS) has a more limited warning.

Terrorism Risk

Risk of attack by domestic and transnational terrorist groups exists throughout the country, especially in areas bordering Mali. Targets may include domestic and international organizations and businesses; public places and events, including those frequented by tourists; and transportation systems.

High risk of kidnapping by terrorist groups exists throughout the country, especially in remote and desert areas, including areas bordering Mali and Western Sahara. Targets may include foreigners (especially Westerners), journalists, nongovernmental organization workers, missionaries, and aid workers.

Crime

Moderate risk of violent crime (armed robbery, home invasion, home robbery, sexual assault, carjacking, and assault) and moderate risk of petty crime exist throughout the country, especially in Nouakchott (particularly in remote beach areas and Cinquieme Quartier) and on the roads between Mali and Mauritania.

Kidnappings by criminal groups occur throughout the country, especially in remote and desert areas, including areas bordering Mali and Western Sahara. Targets may include foreigners (especially Westerners), journalists, nongovernmental organization

workers, missionaries, and aid workers.

Civil Unrest

Protests and demonstrations occur throughout the country, including Nouakchott, and have the potential to turn violent without warning. Bystanders are at risk of harm from violence or from the response by authorities. Disruption to transportation, free movement, or the ability to carry out daily activities may occur.

Unsafe Areas

Landmines and other unexploded ordnance are present in areas bordering Western Sahara.

Outdoor Safety

Desert excursions should only be undertaken with organized groups and experienced guides. Participants should inform someone not on the tour of their itinerary and anticipated return time. An adequate supply of food and water for extended unforeseen delays is essential.

Transportation Safety

Significant risk of traffic-related injury or death exists. The road traffic death rate is more than 24 per 100,000 population, the highest risk category. Carefully assess the safety of transportation options before any road travel.

Seat belt laws are poorly enforced.

Structural standards for vehicles may not meet international standards.

Natural Disasters

The rainy season is from July through October, especially in southern areas. Floods, mudslides, and landslides may occur.

Sandstorms and dust storms occur.

Extreme heat (which can lead to heat-related illness) occurs during the summer.

Consular Information

Selected Embassies or Consulates in Mauritania

- United States: [+222] 4525-2660; mr.usembassy.gov
- Canada: [+222] 45-29-26-97; travel.gc.ca/assistance/embassies-consulates/mauritania
- United Kingdom: [+222] 45256986
- · Australia: Australia does not have an embassy or consulate in Mauritania.

Mauritania's Embassies or Consulates in Selected Countries

- In the U.S.: [+1] 202-232-5700
- In Canada: [+1] 514-288-2726
- In the U.K.: [+44] 020-7233-6158
- In Australia: Mauritania does not have an embassy or consulate in Australia.

Visa/HIV Testing

HIV testing is not required to obtain a tourist, work, or residence visa.

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