

# Honduras

## Medical Summary

The health risk information presented here is summarized from Shoreland Travax<sup>®</sup>, 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

Honduras is a developing nation classified as lower middle income. Located in Central America along the Caribbean Sea (west of Nicaragua and east of Guatemala), the climate is extremely diverse with classifications that range from humid equatorial (long dry season) in the south to humid equatorial (short dry season) in the north, with cooler temperatures in some high-altitude areas.

## Vaccinations

Routine vaccinations are essential due to a persistent global rise of vaccine-preventable diseases (**especially markedly high rates of diphtheria, pertussis, and measles**). Prior to travel, travelers should be up-to-date with the age-appropriate and risk-based routine vaccinations recommended by their home country, which may include:

- COVID-19
- *H. influenzae* type B (Hib)
- Hepatitis A
- Hepatitis B: Protection is especially important for those at increased risk.
- Herpes zoster
- Human papillomavirus
- Influenza
- Measles, mumps, rubella: A single early dose is recommended for travelers aged 6-11 months.
- Meningococcal
- Pneumococcal
- Polio
- Rotavirus
- Tetanus, diphtheria, pertussis: Tdap preferred; consider an early pertussis booster for high-risk travelers.
- Varicella

## Yellow Fever

Although yellow fever does not occur in Honduras, an official yellow fever vaccination certificate may be required depending on your itinerary.

- *Requirement:*  
A certificate proving yellow fever vaccination is required for travelers aged 1-59 years coming from countries with risk of YF transmission. This also applies to airport transit stops (no exit through immigration checkpoint) longer than 12 hours in risk countries.  
*Supplementary requirement for exit:* Honduran authorities enforce proof of YF vaccination for travelers departing Honduras for a country with risk of YF transmission. This exit requirement is to supplement Honduras' existing entry requirement under the International Health Regulations.

## 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 chikungunya, dengue, rabies, or typhoid fever.

## 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)

(2022) Malaria risk due to *P. vivax* (79%), *P. falciparum* (20%) and mixed infections (~0.8%) exists. *P. vivax* transmission risk is high in the departments of Colon and Gracias a Dios and moderate in Atlántida, El Paraiso, Olancho and Yoro. *P. falciparum* transmission risk is high in Colon and Gracias a Dios. No chloroquine-resistant *P. falciparum* has been reported.

- Recommended prevention in *P. vivax* and mixed risk areas: **B** - Risk of non-falciparum malaria. Mosquito-bite prevention plus chloroquine, or doxycycline or atovaquone-proguanil or mefloquine chemoprophylaxis (select according to drug-resistance pattern, reported side-effects and contraindications).<sup>a</sup>
- Recommended prevention in *P. falciparum* risk areas: **C** – Risk of *P. falciparum* malaria. Mosquito-bite prevention plus atovaquone-proguanil or doxycycline or mefloquine chemoprophylaxis (select according to drug-resistance pattern, reported side-effects and contraindications).<sup>a, b</sup>

<sup>a</sup>Alternatively, for travel to rural areas with low risk of malaria infection, mosquito bite prevention can be combined with stand-by emergency treatment (SBET).

<sup>b</sup>In certain areas with multidrug-resistant malaria, mefloquine chemoprophylaxis is no longer recommended. At present, these areas include Cambodia, south-eastern Myanmar and Thailand.

*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 accurate date is indicated, the most recent update or confirmation was provided prior to 2013.

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

Transmission areas

- Throughout the country and on the island of Roatán and other Bay Islands
- No malaria transmission in the cities of San Pedro Sula or Tegucigalpa (the capital)

Drug resistance<sup>1</sup>

- None

Species

- *P. vivax* (70%)
- *P. falciparum* (30%)

Recommended chemoprophylaxis

- Atovaquone-proguanil, chloroquine, doxycycline, mefloquine, tafenoquine<sup>2</sup>

<sup>1</sup> Refers to *P. falciparum* malaria, unless otherwise noted.

<sup>2</sup> Tafenoquine can cause potentially life-threatening hemolysis in people with glucose-6-phosphate-dehydrogenase (G6PD) deficiency. Test for G6PD deficiency with a quantitative laboratory test before prescribing tafenoquine to patients.

## 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.

### Other Food-Borne Illnesses

Precautions to prevent brucellosis, seafood poisoning may be needed.

## Insect- and Arthropod-Borne Diseases

Chagas' disease (American trypanosomiasis), leishmaniasis, Zika may pose a risk. Personal protective measures are important.

## Other Disease and Health Risks

Additional concerns include air pollution, helminths, leptospirosis, marine hazards, melioidosis, New World screwworm (myiasis), sexually transmitted infections, snakebites, tuberculosis.

## Safety and Security

### Key Safety Risks

- Road conditions and traffic collisions
- Public transportation
- Petty crime
- Heightened crime risk for women
- Heightened crime risk for LGBTQ+ travelers
- Food and beverage spiking
- Theft of vehicles
- Scams
- Natural disasters

### Key Security Threats

- Risk of violent protests
- Cross-border threats in areas bordering El Salvador, Guatemala, and Nicaragua
- Landmines
- Violent crime
- Kidnapping
- Random acts of armed violence
- Piracy

## Emergency Contacts

The national emergency number is 911.

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