# Nepal

# **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

Nepal is a developing nation classified as low income. Located in southern Asia (north of India and south of China), the climate is classified as subtropical dry winter in the south, with cooler temperatures in some high-altitude areas (in the north).

#### **Vaccinations**

#### Yellow Fever

Although yellow fever does not occur in Nepal, 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 ≥ 9 months 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.

#### 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 cholera, COVID-19, hepatitis A, hepatitis B, influenza, Japanese encephalitis, measles, mumps, rubella, 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)

(2020) Malaria infection is present in southern Terai region, mostly inner Terai (plain land) – along the forests, foothills, forest fringes and in upper hilly river valleys. Malaria transmission is mostly seasonal (March – October); peak months are during the rainy season (May – August). The risk is due predominantly to *P. vivax* with occasional outbreaks of *P. falciparum* 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) <sup>a</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).

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: Present throughout the country at altitudes < 2,000 m (6,562 ft). None in Kathmandu and on typical Himalayan treks.

- Drug resistance<sup>3</sup>: Chloroquine.
- Malaria species: P. vivax 85%, P. falciparum 15%.
- Recommended chemoprophylaxis: Atovaquone-proguanil, doxycycline, mefloquine, or tafenoquine.<sup>4</sup>
  - <sup>3</sup> Refers to *P. falciparum* malaria unless otherwise noted.
  - <sup>4</sup> 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.

#### Other Food-Borne Illnesses

Precautions to prevent brucellosis may be needed.

# Insect- and Arthropod-Borne Diseases

Chikungunya, dengue, leishmaniasis, murine typhus, scrub typhus, West Nile virus may pose a risk. Personal protective measures are important.

#### Other Disease and Health Risks

Additional concerns include air pollution, altitude illness, anthrax disease, Crimean-Congo hemorrhagic fever, helminths, hepatitis C, leptospirosis, melioidosis, monkey bites, plague, 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.

#### Terrorism Risk

Low risk of attack by transnational terrorist groups exists throughout the country. Targets may include public places and events, including those frequented by tourists, and transportation systems.

#### Crime

Low risk of violent crime (armed robbery, sexual assault, and assault) exist throughout the country, mainly in Kathmandu, Pokhara, and in remote mountainous areas.

High risk of petty crime exists throughout the country, (especially during festival season from September to November), particularly in areas frequented by tourists, in Kathmandu (particularly in Thamel, Sanepa, and Kupondole districts), in national parks, and on or near public transportation.

Theft of valuables from unattended accommodations is common.

Theft of valuables by criminals in passing vehicles is common.

Scams involving fraudulent charities and bargain treks (where guides deliberately misdiagnose severe altitude illness to profit from inflated helicopter rescues and hospital admissions) have been reported.

Risk exists of robberies and/or assaults occurring after consuming intentionally drugged food or drink; tourists are frequently targeted.

#### Civil Unrest

Protests and demonstrations occur throughout the country 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.

#### Water Safety

Passenger boats may be unsafe. Decline water transportation in vessels that appear overloaded or lack personal flotation devices or life jackets.

Basic safety standards for recreational water activities (including rafting) are often not in place. Rent water sports equipment from reputable operators.

# **Outdoor Safety**

Basic safety standards for adventure activities (including paragliding and ultralight aircraft tours) may not be in place. Travelers should only use reputable adventure-sport operators for activities and equipment rentals.

#### Transportation Safety

High risk of traffic-related injury or death exists. The road traffic death rate is 12 to 24 per 100,000 population. The rate is less than 10 in most high-income countries.

Seat belt laws are poorly enforced.

There are no restrictions on mobile phone usage while driving.

Structural standards for vehicles may not meet international standards.

#### **Natural Disasters**

The monsoon season is from June through September. Floods, mudslides, and landslides may occur.

Seismic activity frequently occurs.

#### Consular Information

Selected Embassies or Consulates in Nepal

- United States: [+977] 1-423-4000; np.usembassy.gov
- Canada: [+977] 1-438-7910; travel.gc.ca/assistance/embassies-consulates/nepal
- United Kingdom: [+977] 1-4237100; www.gov.uk/world/organisations/british-embassy-kathmandu
- Australia: [+977] 1-4371-678; www.nepal.embassy.gov.au

Nepal's Embassies or Consulates in Selected Countries

- In the U.S.: us.nepalembassy.gov.np
- In Canada: ca.nepalembassy.gov.np
- In the U.K.: uk.nepalembassy.gov.np
- In Australia: au.nepalembassy.gov.np

# Visa/HIV Testing

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

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