# Peru

# **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

Peru is a developing nation classified as upper middle income. Located in South America along the Pacific Ocean (north of Chile and south of Colombia), the climate is extremely diverse with classifications that range from dry (arid) to humid equatorial (no dry season), 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 routine vaccinations recommended by their home country, which may include: COVID-19; *H. influenzae* type B (Hib); hepatitis A; hepatitis B; 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

Vaccination is usually recommended if you'll be traveling in areas where there is risk of yellow fever transmission.

- Requirement: No requirement for any traveler.
- 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 chikungunya, dengue, mpox, 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* (80%) and *P. falciparum* (20%) exists throughout the year in rural areas in inter-Andean valleys below 2500 m. Twelve departments in the country reported indigenous malaria cases; 90% of cases are concentrated in the department of Loreto and 16% of the total cases are due to *P. falciparum* from Loreto.

- Recommended prevention in *P. vivax* 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 Loreto Region: 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

- All areas of the country < 2,500 m (< 8,200 ft) elevation east of the Andes, including the cities of Iquitos and Puerto Maldonado
- · Rare cases in Tumbes and Piura regions
- No malaria transmission in the following areas: Lima Province; the cities of Arequipa, Ica, Moquegua, Nazca, Puno, or Tacna; the highland tourist areas (the city of Cusco, Machu Picchu, Lake Titicaca); along the central and southern Pacific Coast

### Drug resistance<sup>1</sup>

Chloroquine

#### **Species**

- P. vivax (80%)
- P. falciparum (20%)

#### Recommended chemoprophylaxis

- Areas < 2,500m (< 8,200 ft) elevation east of the Andes (see map): Atovaquone-proguanil, doxycycline, mefloquine, tafenoquine<sup>2</sup>
- All other areas with malaria transmission (see map): No chemoprophylaxis recommended (insect bite precautions and mosquito avoidance only)<sup>4</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.
  - <sup>4</sup> Mosquito avoidance includes applying topical mosquito repellant, sleeping under an insecticide-treated mosquito net, and wearing protective clothing (e.g., long pants and socks, long-sleeve shirt). For additional details on insect bite precautions, see Mosquitoes, Ticks, and Other Arthropods chapter.

## Other Concerns

#### Travelers' Diarrhea

High risk exists throughout the country, with moderate risk 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

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

### Other Disease and Health Risks

Additional concerns include air pollution, altitude illness, anthrax disease, hantavirus, helminths, leptospirosis, marine hazards, melioidosis, New World screwworm (myiasis), plague, schistosomiasis, 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
- · Food and beverage spiking
- Theft of vehicles
- Scams
- · Natural disasters

# **Key Security Threats**

- · Risk of terrorist attacks by domestic groups
- · Risk of violent civil unrest
- · Risk of violent protests
- · Cross-border threats in areas bordering Colombia and Ecuador
- Landmines
- · Violent crime
- Kidnapping

# **Emergency Contacts**

The police emergency number is 105.

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