Sudan

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 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

Sudan is a developing nation in the lower half of the world's economies. Located south of Egypt along the Red Sea in northern Africa, its climate arid desert. Desert climate in portions of this country may aggravate respiratory conditions.

Immunizations

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 vaccination certificate is required for travelers 1 year of age and older coming from countries with risk of YF transmission. Note: This applies to airport layovers > 12 hours in these countries. A certificate may be required for travelers departing Sudan.

- 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 cholera, hepatitis A, hepatitis B, influenza, measles, mumps, rubella, meningococcal meningitis, rabies, or typhoid fever. 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 U.S. Centers for Disease Control (CDC):

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

(2015) Malaria risk due predominantly to *P. falciparum* exists throughout the year in the whole country. Risk is low and seasonal in the north; it is higher in the central and southern parts of the country. Malaria risk on the Red Sea coast is very limited.

- Recommended prevention: 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.
Estimated relative risk of malaria for US travelers: High.

Drug resistance: Chloroquine.

Malaria species: *P. falciparum* 90%, *P. vivax* 5%-10%, *P. malariae* and *P. ovale* rare.

Recommended chemoprophylaxis: Atovaquone-proguanil, doxycycline, or mefloquine.

*Refers to *P. falciparum* malaria unless otherwise noted.*

Other Concerns

Travelers' Diarrhea

High risk exists throughout the country, including in deluxe accommodations. Food and beverage precautions may 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

Arboviral infections, chikungunya, dengue, leishmaniasis, onchocerciasis, West Nile virus and Zika may pose a risk. Personal protective measures are important.

Other Disease and Health Risks

Additional concerns include Crimean-Congo hemorrhagic fever, marine hazards, schistosomiasis and tuberculosis.

Consular Advice

*The material below includes information from the U.S. Department of State (DOS), U.K. Foreign & Commonwealth 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, armed conflict, and other ongoing security concerns, U.S. (DOS) advises against travel to this country. U.K. (FCO), Canada (GAC), and Australia (DFAT) advise against travel or nonessential travel to more limited areas.

Terrorism Risk

Risk of attack by domestic and/or transnational terrorist groups exists throughout the country, including in Khartoum. 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 Khartoum and Darfur states. Targets may include foreigners (especially Westerners), journalists, nongovernmental organization workers, missionaries, and aid workers.

Crime

High risk of violent crime (armed robbery, sexual assault, carjacking, and murder) exists in western areas of the country, especially in the Darfur states and areas bordering Chad. Low risk of violent crime and risk of petty crime exist in Khartoum.

Unsafe Areas

Armed clashes between army forces and local armed groups occur along parts of the border between southern Sudan and the northern regions of the Republic of South Sudan which have yet to be delineated, especially in the disputed area of Abyei.

The land borders with many surrounding countries are closed. Border closures may occur without notice. Travelers should check with local authorities for up-to-date information.

Land mines and unexploded ordnance are a danger throughout Sudan outside of Khartoum.
Transportation Safety

Significant risk of traffic-related injury or death exists. The road-traffic death rate is > 24 per 100,000 population, the highest risk category. Carefully assess the safety of transportation options before any road travel. Driving at night is not advised. Seek local advice before traveling on roads outside urban areas after dark.

Traffic flows on the right-hand side of the road. Travelers (including drivers and pedestrians) accustomed to traffic moving on the opposite side should be vigilant when navigating traffic.

Natural Disasters

Sudan often experiences extremely high temperatures. Sandstorms may occur. The rainy season reaches its peak in July and August.

Consular Information

Selected Embassies or Consulates in Sudan
- United States: [+249] 187-022000; sudan.usembassy.gov
- United Kingdom: [+249] 156-775500; ukinsudan.fco.gov.uk/en
- Australia: Australia does not have an embassy or consulate in Sudan.

Sudan's Embassies or Consulates in Selected Countries
- In the U.S.: www.sudanembassy.org
- In Canada: [+1] 613-235-4000
- In the U.K.: www.sudan-embassy.co.uk
- In Australia: Sudan does not have an embassy or consulate in Australia.

Visa/HIV Testing

HIV testing may be required to obtain a work or residence visa. Travelers, including short-term travelers, may be detained or deported after arrival if found to be positive for HIV or hepatitis.

© 2017 Shoreland, Inc. All rights reserved.