Hajj and Umra Travelers

Traveler Summary

Key Points

- Hajj and Umra pilgrims going to Saudi Arabia encounter health risks due to exertion, increased temperatures, intense crowding, and exposure to international travelers. Influenza, pneumonia, and respiratory infections are the most common causes of hospitalization, making vaccination and respiratory precautions very high priorities.
- Travelers should be fit and ensure preexisting medical conditions are well controlled prior to travel.
- Routine vaccinations (influenza, measles, mumps, rubella [MMR], polio [adequate primary series and 1 adult dose], tetanus, diphtheria, pertussis, and chickenpox) and hepatitis A, hepatitis B, typhoid, and pneumococcal should be up-to-date.
- Required vaccinations include meningococcal for pilgrims and Hajj/Umra workers, polio for travelers arriving from certain polio-risk countries, yellow fever for travelers arriving from (or having transited for > 12 hours through) yellow fever risk countries, and COVID-19 for certain high-risk Hajj pilgrims.

Introduction

Hajj is the annual pilgrimage to Islam's holiest sites in Saudi Arabia. All those who are physically and financially capable are obliged to perform Hajj once in their lifetime. The Hajj pilgrimage moves backward by 10 days each year of the Gregorian calendar. Umra is optional and can be performed at any time of the year. Each year, approximately 3 million pilgrims participate in Hajj. Hajj 1447H will take place May 24-29, 2026.

Useful websites for additional information about Hajj include https://hajj.nusuk.sa/nusuk/guidelines and www.haj.gov.sa.

Health

Intense crowding during Hajj can increase the transmission of respiratory and intestinal infections, which have caused major outbreaks in the past (e.g., cholera, meningitis, and influenza). A severe respiratory illness (called MERS-CoV) that has been occurring in Saudi Arabia since 2012 has not spread to pilgrims during any pilgrimage year. No vaccines are available. Influenza, COVID-19, and other respiratory viruses are common, and travelers going to or returning from Saudi Arabia should seek immediate medical attention for severe respiratory symptoms.

Vaccinations

All routine vaccinations (including influenza, MMR, polio [adequate primary series and 1 adult dose], tetanus, diphtheria, pertussis, and chickenpox) and hepatitis A, hepatitis B, typhoid, and pneumococcal should be up-to-date.

The Saudi Arabian Ministry of Health requires certain vaccinations; proof of vaccination must be submitted at the time of visa application; see Hajj and Umra Health Regulations for details.

- **Meningococcal vaccine**: Required for all travelers (including domestic pilgrims) older than 1 year arriving for the purpose of Hajj or Umra pilgrimage or seasonal work in Hajj/Umra zones. The certificate must have been issued at least 10 days but not more than 5 years prior to arrival. An antibiotic may be given to certain travelers upon arrival if deemed necessary by port-of-entry officials.
- **Polio vaccine**: All travelers, regardless of age, coming from countries reporting wild poliovirus or certain types of vaccine-derived poliovirus must show proof of polio vaccination given between 4 weeks and 1 year prior to arrival. Some travelers will also receive a dose of oral polio vaccine (OPV) when entering Saudi Arabia.
- **Yellow fever vaccine**: A yellow fever certificate of vaccination is required of all travelers arriving from or transiting for more than 12 hours through countries or areas known to be infected with or at risk for transmission of yellow fever. The certificate must have been issued not less than 10 days before arrival to Saudi Arabia. (In the absence of such a certificate, the person may be placed under strict surveillance for 6 days from the date of vaccination or the last date of potential exposure to infection, whichever is earlier.)
- **COVID-19**: Required for certain high-risk Hajj pilgrims and recommended for all other Hajj and Umra pilgrims.
- **Influenza vaccine**: Recommended for all pilgrims, especially for those at increased risk for severe complications, such as pregnant women, the elderly (those older than 65 years), children younger than 5 years, and persons with chronic medical conditions.

Preexisting health status and medical conditions

Travelers, especially those with preexisting medical conditions, should visit their health care provider and discuss the health risks of Hajj; some conditions may make a person more susceptible to infection. Exertion and heat will put extra strain on the heart, lungs, and kidneys, and—to improve overall mobility and fitness—increasing physical activities is recommended at least 4 weeks before undertaking Hajj. Persons with preexisting medical conditions who decide to travel should consult their health care provider, ensure that their conditions are well controlled, and obtain and carry an adequate supply of medication. Customs authorities strictly regulate the importation of medications. Keep medicines in their original, labeled containers for ease of identification at customs. Carry a provider's covering letter and prescriptions for all medications, especially narcotic and mental health drugs.

Travel and health insurance

Although health care at the holy sites is free, pilgrims are advised to carry adequate travel and health insurance and to identify an in-country medical provider. The availability of emergency evacuation is questionable.

Travel Medical Kit

Pilgrims should assemble and carry a travel medical kit containing these items:

- Routine medications appropriate to each traveler
- First aid items
- Azithromycin and loperamide for self-medication for travelers' diarrhea (TD)
- Sunscreen (at least SPF 30 and fragrant-free)
- Umbrella

See ***Packing Personal Medications and Supplies*** for additional recommendations.

Travel, Accommodations, and Communications

Pilgrims generally fly into Jeddah and travel overland to Mecca (Makkah). There may be delays of many hours on arrival at Jeddah as well due to full airplanes and crowded airports. All luggage should have fixed labels on the outside and inside, showing the pilgrim's name, nationality, passport number, air carrier, and flight number. Onward travel to Riyadh or other Saudi Arabian cities other than the vicinities of Jeddah, Mecca, or Medina is usually not permitted during Hajj. Upon arrival, pilgrims must surrender their passports to the United Agents Office for completion of all travel formalities to Mecca and Medina. All pilgrims are then issued an identification card and wristband that they should carry at all times. Passports are returned only immediately prior to departure while at the airport. Travelers must carry vaccination certificates with them for inspection by the Saudi Arabian Authority at ports of entry.

Conditions in Mecca range from luxury hotels with transportation in air-conditioned buses to hostel accommodations in blocks without elevators to rented rooms. At Mina and Arafat, accommodation is in tents set up by the Tawafa Establishment. Overnight at Muzdalifah is under the open sky.

Communications facilities to contact family in other countries are available in all parts of Saudi Arabia.

Health and Safety Precautions

Some required rituals are physically demanding. Daily distances to be covered between sites range from 8 to 19 km (5 to 12 mi). Pilgrims may travel via prebooked bus, commercial taxi, or on foot, but any of these methods will be slow and take hours.

Food: During the stages of Hajj, facilities for preparing and storing food are simple and without refrigeration. Eat freshly cooked food and avoid street vendors.

Crowds, crush, stampede, and trauma: Congestion is severe. Pilgrims have been crushed during stampedes. Since 1994, seven stampedes have killed more than 1,700 pilgrims. In September 2015, more than 700 pilgrims were killed in a stampede near Mina. The most common causes of trauma are from accidents on roads crowded with vehicles and pedestrians and from inexpert slaughter of animals.

The Saudi authorities forbid the taking of photographs (still or video, including mobile telephone photographs) at the Holy Mosque at Mecca or at the Prophet's Mosque at Medina. This restriction also includes the courtyards surrounding these holy sites. Any violation is likely to lead to the confiscation of one's camera.

In summer, temperatures above 40°C (104°F) or even 50°C (122°F), lack of shade, bare heads, and dehydration readily lead to heat exhaustion and heat stroke, especially in children and those who are not acclimatized, unless precautions are taken. Standing barefoot on marble paving may cause burns on the soles. At certain points, men must stand with head and arms uncovered.

Respiratory, intestinal, and skin infections are common. Influenza is the most commonly acquired respiratory infection, whereas pneumonia is the most common cause of hospital admission. Tuberculosis infection is also a risk. TD is common. Risk exists for hepatitis A and typhoid fever. Heat, sweat, and crowding promote bacterial and fungal skin infections, including boils.

The following are recommended during the Hajj:

- Arrive a few days early to acclimatize.
- Observe hand hygiene (frequent, thorough handwashing with soap and water for 20 seconds [or using a hand sanitizer containing 60% alcohol]), especially after visiting the toilet and before preparing food or eating.
- Observe respiratory hygiene (cough and sneeze etiquette).
- Avoid close contact with animals, especially camels.
- Avoid contact with and sharing personal belongings with ill-appearing persons.
- Eat freshly cooked food and avoid street vendors. See Food and Beverage Precautions.
- Avoid consumption of raw camel milk, camel urine, or improperly cooked meat.
- Drink plenty of drinking water, either bottled or supplied by the Tawafa Establishment.
- Avoid the heat of the day, seek shade, and (whenever possible) travel the stages of Hajj after sunset. In the sun, use sunscreen on exposed skin, use an umbrella for shade, and wear socks (not forbidden) if standing barefoot on very hot stone, but beware of slipping.
- Wear a face mask to reduce the risk of respiratory infection when in crowded places.
- Do not use unauthorized barbers.
- Keep the skin as cool, clean, and dry as possible; seek treatment for any new skin infection.
- Consider hiring a professional proxy for animal slaughter.
- Women and children should stay close to their male companions, especially at crowded points.
- Use a wheelchair if elderly or infirm; all sites are accessible.
- Use of fragrance and smoking tobacco are forbidden.
- Take all regular medications.
- In the event of TD, start self-treatment and drink more fluids.

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