

Spain

Including the Balearic Islands (Ibiza, Formentera, Majorca, Minorca) and the Canary Islands, (Tenerife, Lanzarote, Fuerteventura etc)

Capital City: "Madrid"

Official Language: "Castilian Spanish"

Monetary Unit: "euro (€)"

General Information

General Information

The information on these pages should be used to research health risks and to inform the pre-travel consultation.

Travellers should check the <u>Foreign, Commonwealth & Development Office (FCDO) country-specific travel advice page</u> (where available) which provides information on travel entry requirements in addition to safety and security advice.

Travellers should ideally arrange an appointment with their health professional at least four to six weeks before travel. However, even if time is short, an appointment is still worthwhile. This appointment provides an opportunity to assess health risks taking into account a number of factors including destination, medical history, and planned activities. For those with pre-existing health problems, an earlier appointment is recommended.

All travellers should ensure they have adequate travel health insurance.

If visiting European Union (EU) countries, carry an <u>European Health Insurance Card (EHIC)</u> or a <u>Global Health Insurance Card (GHIC)</u> as this will allow access to state-provided healthcare in some countries at a reduced cost, or sometimes for free. The EHIC or GHIC, however, is not an alternative to travel insurance. Check the <u>GOV.UK</u> website for guidance.

A list of useful resources including advice on how to reduce the risk of certain health problems is available below.

Resources

- Food and water hygiene
- Insect and tick bite avoidance
- Personal safety
- Sexually transmitted infections
- Sun protection

Vaccine Recommendations



Vaccine Recommendations

Details of vaccination recommendations and requirements are provided below.

All travellers

Travellers should be up to date with routine vaccination courses and boosters as recommended in the UK. These vaccinations include for example measles-mumps-rubella (MMR) vaccine and diphtheria-tetanus-polio vaccine.

Country-specific diphtheria recommendations are not provided here. Diphtheria tetanus and polio are combined in a single vaccine in the UK. Therefore, when a tetanus booster is recommended for travellers, diphtheria vaccine is also given. Should there be an outbreak of diphtheria in a country, diphtheria vaccination guidance will be provided.

Those who may be at increased risk of an infectious disease due to their work, lifestyle choice, or certain underlying health problems should be up to date with additional recommended vaccines. See details on the selective immunisation programmes and additional vaccines for individuals with underlying medical conditions at the bottom of the 'Complete routine immunisation schedule' document and the individual chapters of the 'Green Book' Immunisation against infectious disease for further details.

Certificate requirements

There are no certificate requirements under International Health Regulations.

Most travellers

The vaccines in this section are recommended for most travellers visiting this country. Information on these vaccines can be found by clicking on the blue arrow. Vaccines are listed alphabetically.

Tetanus

Tetanus is caused by a toxin released from *Clostridium tetani* bacteria and occurs worldwide. Tetanus bacteria are present in soil and manure and may be introduced through open wounds such as a puncture wound, burn or scratch.

Prevention

Travellers should thoroughly clean all wounds and seek medical attention for injuries such as animal bites/scratches, burns or wounds contaminated with soil.

Tetanus vaccination

- Travellers should have completed a tetanus vaccination course according to the UK schedule.
- If travelling to a country or area where medical facilities may be limited, a booster dose of a tetanus-containing vaccine is recommended if the last dose was more than ten years ago even if five doses of vaccine have been given previously.



Country-specific information on medical facilities may be found in the 'health' section of the <u>FCDO foreign travel advice</u> pages.

Tetanus in brief

Some travellers

The vaccines in this section are recommended for some travellers visiting this country. Information on when these vaccines should be considered can be found by clicking on the arrow. Vaccines are listed alphabetically.

Polio

Polio is caused by one of three types of polio virus and is transmitted by contaminated food and water. Previous infection with one type of polio virus does not protect against other types of the virus.

Polio in Spain

This country has reported circulating vaccine-derived poliovirus type 2 (cVDPV2) detected in an environmental (sewage) sample from the <u>Besòs Wastewater Treatment Plant</u> in the Barcelona metropolitan area, Catalonia in September 2024. Further investigations are in progress, the <u>Public Health Agency of Catalonia have published a news item</u> on their website.

Prevention

All travellers should take care with personal and food and water hygiene.

Polio vaccination

- All travellers should have completed a polio vaccination course according to the UK schedule.
- Local public health advice should be followed if relevant to individual travel circumstances.
- There is no polio certificate requirement for entering or leaving this country.

Polio in brief

Rabies

Rabies is a viral infection which is usually transmitted following contact with the saliva of an infected animal most often via a bite, scratch or lick to an open wound or mucous membrane (such as on the eye, nose or mouth). Although many different animals can transmit the virus, worldwide most cases follow a bite or scratch from an infected dog. Bats are also an important source of infection in some countries.

Rabies symptoms can take some time to develop, but when they do the condition is almost always fatal.



The risk of exposure is increased by certain activities and length of stay (see below). Children are at increased risk as they are less likely to avoid contact with animals and to report a bite, scratch or lick.

Rabies in Spain

- There is risk of rabies in the African territories of Ceuta and Melila in Spain.
- Rabies has **not** been reported in domestic or wild animals in the rest of Spain (including the Balearic Islands and Canary Islands); therefore most travellers are considered to be at low risk. However, bats may carry bat lyssavirus (bat rabies).

Prevention

- Travellers to the African territories of Ceuta and Melila should avoid contact with animals.
- For other areas in Spain travellers should avoid contact with bats. Bites from bats are frequently unrecognised. Rabies-like disease caused by bat lyssaviruses is preventable with prompt post-exposure rabies treatment.
- Following a possible exposure, wounds should be thoroughly cleansed and an urgent local medical assessment sought, even if the wound appears trivial.
- Although rabies has not been reported in other animals in the rest of Spain, it is sensible to seek prompt medical advice if bitten or scratched. It is possible, although very rare for bats to pass rabies like viruses to other animals including pets.

Post-exposure treatment and advice should be in accordance with <u>national guidelines</u>.

Rabies vaccination

For travellers to the African territories of Ceuta and Melila:

Pre-exposure vaccinations are recommended for travellers whose activities put them at increased risk including:

- those at risk due to their work (e.g. laboratory staff working with the virus, those working with animals or health workers who may be caring for infected patients).
- those travelling to areas where access to post-exposure treatment and medical care is limited.
- those planning higher risk activities such as running or cycling.
- long-stay travellers (more than one month).

For those travelling to other areas in Spain:

- Pre-exposure rabies vaccinations are recommended for those who are at increased risk due to their work (e.g. laboratory staff working with the virus and those working with bats).
- Pre exposure vaccines could be considered for those whose activities put them at increased risk of exposure to bats.

A full course of pre-exposure vaccines simplifies and shortens the course of post-exposure treatment and removes the need for rabies immunoglobulin which is in short supply worldwide.

Rabies in brief

Other Risks

There are some risks that are relevant to all travellers regardless of destination. These may for example include road traffic and other accidents, diseases transmitted by contaminated food and water, sexually transmitted infections, or health issues related to the heat or cold.

Some additional risks (which may be present in all or part of this country) are mentioned below and are presented alphabetically. Select risk to expand information.

Altitude

There is a risk of altitude illness when travelling to destinations of 2,500 metres (8,200 feet) or higher. Important risk factors are the altitude gained, rate of ascent and sleeping altitude. Rapid ascent without a period of acclimatisation puts a traveller at higher risk.

There are three syndromes; acute mountain sickness (AMS), high-altitude cerebral oedema (HACE) and high-altitude pulmonary oedema (HAPE). HACE and HAPE require immediate descent and medical treatment.

Altitude illness in Spain

There is a point of elevation in this country higher than 2,500 metres. Example places of interest: Mulhacen, Sierra Nevada on mainland Spain, 3,479m and Pico de Teide on Tenerife, 3,718m.

Prevention

- Travellers should spend a few days at an altitude below 3,000m.
- Where possible travellers should avoid travel from altitudes less than 1,200m to altitudes greater than 3,500m in a single day.
- Ascent above 3,000m should be gradual. Travellers should avoid increasing sleeping elevation by more than 500m per day and ensure a rest day (at the same altitude) every three or four days.
- Acetazolamide can be used to assist with acclimatisation, but should not replace gradual ascent.
- Travellers who develop symptoms of AMS (headache, fatigue, loss of appetite, nausea and sleep disturbance) should avoid further ascent. In the absence of improvement or with progression of symptoms the first response should be to descend.
- Development of HACE or HAPE symptoms requires immediate descent and emergency medical treatment.

Altitude illness in brief

Biting insects or ticks

Insect or tick bites can cause irritation and infections of the skin at the site of a bite. They can also spread certain diseases.

Diseases in Southern Europe



There is a risk of insect or tick-borne diseases in some areas of Southern Europe. This includes diseases such as <u>Crimean-Congo haemorrhagic fever</u>, <u>leishmaniasis</u> and <u>West Nile virus</u>.

Prevention

- All travellers should avoid insect and tick bites day and night.
- There are no vaccinations (or medications) to prevent these diseases.

Further information about specific insect or tick-borne diseases for this country can be found, if appropriate on this page, in other sections of the country information pages and the <u>insect and tick bite avoidance factsheet</u>.

Dengue

Dengue is a viral infection spread by mosquitoes which mainly feed during daytime hours. It causes a flu-like illness, which can occasionally develop into a more serious life-threatening illness. Severe dengue is rare in travellers.

The mosquitoes that spread dengue are more common in towns, cities and surrounding areas.

Dengue in Spain

Since 2018, the first locally acquired cases of dengue were reported with transmission occurring in the provinces of Cádiz, Catalonia and Murcia and the island of Ibiza.

Information on current outbreaks, where available, will be reported on our outbreak surveillance database.

Prevention

- Vaccination is not recommended.
- Travellers should avoid mosquito bites, particularly during daytime hours.

Dengue in brief

Influenza

Seasonal influenza is a viral infection of the respiratory tract and spreads easily from person to person via respiratory droplets when coughing and sneezing. Symptoms appear rapidly and include fever, muscle aches, headache, malaise (feeling unwell), cough, sore throat and a runny nose. In healthy individuals, symptoms improve without treatment within two to seven days. Severe illness is more common in those aged 65 years or over, those under 2 years of age, or those who have underlying medical conditions that increase their risk for complications of influenza.

Seasonal influenza in Spain



Seasonal influenza occurs throughout the world. In the northern hemisphere (including the UK), most influenza occurs from as early as October through to March. In the southern hemisphere, influenza mostly occurs between April and September. In the tropics, influenza can occur throughout the year.

Prevention

All travellers should:

- Avoid close contact with symptomatic individuals
- Avoid crowded conditions where possible
- Wash their hands frequently
- Practise 'cough hygiene': sneezing or coughing into a tissue and promptly discarding it safely, and washing their hands
- · Avoid travel if unwell with influenza-like symptoms
- A vaccine is available in certain circumstances (see below)*

*In the UK, seasonal influenza vaccine is offered routinely each year to those at higher risk of developing of severe disease following influenza infection, and certain additional groups such as healthcare workers and children as part of the UK national schedule (see information on vaccination). For those who do not fall into these groups, vaccination may be available privately.

If individuals at higher risk of severe disease following influenza infection are travelling to a country when influenza is likely to be circulating they should ensure they received a flu vaccination in the previous 12 months.

The vaccine used in the UK protects against the strains predicted to occur during the winter months of the northern hemisphere. It is not possible to obtain vaccine for the southern hemisphere in the UK, but the vaccine used during the UK influenza season should still provide important protection against strains likely to occur during the southern hemisphere influenza season, and in the tropics.

Avian influenza

Avian influenza viruses can rarely infect and cause disease in humans. Such cases are usually associated with close exposure to infected bird or animal populations. Where appropriate, information on these will be available in the outbreaks and news sections of the relevant country pages. Seasonal influenza vaccines will not provide protection against avian influenza.

Avian influenza in brief

Outdoor air quality

Poor air quality is a significant public health problem in many parts of the world. Exposure to high levels of air pollution over short time periods (e.g. minutes/hours/days) and longer time periods (e.g. years) is linked to many different acute and chronic health problems. These effects are mainly on the respiratory (lungs and airways) and cardiovascular (heart function and blood circulation) systems.

Current information on world air quality is available from the world air quality index project.

Prevention



Travellers with health problems that might make them more vulnerable to the effects of air pollution who are travelling to areas of high pollution should:

- discuss their travel plans with their doctor, and carry adequate supplies of their regular medication.
- take sensible precautions to minimise their exposure to high levels of air pollution.
- check local air quality data and amend their activities accordingly.
- take notice of any health advisories published by the local Ministry of Health and Department for Environment, and follow the guidance provided.

It is unclear if face masks are beneficial at reducing exposure and may make breathing more difficult for those with pre-existing lung conditions. Those who choose to use one should make sure that the mask fits well and know how to wear it properly.

Outdoor air quality in brief

<u>Latest News</u>	
<u>Latest Outbreaks</u>	