China

Risk Ratings

HIGH MEDICAL RISK for China

Risk Summary

Normal travel is possible to most parts of China. Foreign business travellers face few major security issues when travelling in the country. Petty crime, particularly in crowded areas such as markets and train stations, and confidence tricksters, ranging from basic tourist scams to more elaborate commercial fraud, are the main risks to travellers. Violent crime against foreigners is rare, but not unheard of.

The authorities require activists to apply for permits before holding demonstrations. Nonetheless, demonstrations with or without official permits occur regularly. Protests mainly relate to land disputes, forced relocations, environmental and labour issues (unpaid salaries and poor working conditions) and local officials’ alleged corruption or abuse of power. All protests should be avoided as a routine security precaution.

China’s complex business environment can have security implications in some circumstances, for example, when restructuring, downsizing or starting operations. Foreign-invested companies and foreign travellers engaged in business with them are not immune to falling victim to China’s complex corporate business regulations.

Other travel risks include natural disasters. China is primarily affected by seasonal typhoons, earthquakes and floods. Driving standards in the main cities are generally adequate, but deteriorate significantly as one moves away from Tier 1 and Tier 2 cities and into more rural areas.

The Xinjiang Uighur Autonomous Region (XUAR) is occasionally affected by social unrest due to ethnic tensions between the local ethnic-Uighur population and ethnic-Han Chinese. Such tensions have also resulted in low-level bombings and knife attacks carried out by Uighur militants, though the majority of such incidents are concentrated in the south-western prefectures of Xinjiang. While travel to Xinjiang can continue, members should be locally hosted and should ensure they have a comprehensive journey management plans in place.

The information above is intended as a summary of the travel security environment; however, the risks can change at short notice during a crisis or evolving situation. Please check our travel security alerts to ensure you are informed of the most recent developments.

STANDING TRAVEL ADVICE

Alerts

1. Hong Kong: Small gatherings possible around courthouse during trial of activist leaders
2. Human case of bird flu in Guangxi

View All Alerts

Vaccinations for China

Hepatitis A  Recommended for all travellers and expatriates.

Hepatitis B  Recommended for all travellers and expatriates.

Japanese encephalitis  Vaccine is recommended for people who will

Polio  To protect themselves from polio, it is

Rabies  Consider for certain travellers, especially: For

Tickborne encephalitis  May be recommended for those visiting forests,

Typhoid fever  Recommended for adventurous and long-term

Yellow fever  A yellow fever vaccination certificate is

Routine Vaccinations

- All routine vaccinations should be current: these include Measles-Mumps-Rubella, Polio, Tetanus-Diphtheria-Pertussis, and Varicella.
- Annual influenza vaccination.

Other Medical Precautions

- Before you go - See your doctor and dentist and ensure you are in the best health before you leave. Other preparations:
Before You Go

See your doctor and dentist and ensure you are in the best health before you leave. Other preparations:

- **Check your routine vaccinations**
  Check your routine vaccinations are up to date (polio; varicella; measles, mumps and rubella; tetanus, diptheria and pertussis, seasonal influenza). See a travel health practitioner 6 to 8 weeks before departure for destination-specific health preparations. You may need additional vaccinations, some of which require several doses, or be recommended malaria medication which may need to be started a week or more before arriving in the malarial country.

- **Documentation**: Arrange a copy of your personal health record to carry with you when you travel. Include a letter from your doctor explaining your need for all medications you are carrying, including any over-the-counter medications, in English and the language of your destination(s). Make sure you have copies of your prescriptions.

- **Medication**: Check the regulations of your destination country regarding importation of your medication, as some drugs may be strictly prohibited (especially narcotics and psychotropics) and may result in severe penalties. Take any medicines you require in their original packaging, including any information leaflets, with them clearly labelled with your name (matching your passport name), and your doctor’s name. Have enough to cover the trip, and extra in case of delays, however note that many destinations limit quantities of certain drugs to a 30-day supply. Carry medication in your hand luggage, with copies of your prescriptions.

Vaccinations for China

Recommendations may vary for short-term visitors. Always consult your travel health advisor or contact International SOS to discuss your specific needs.

<table>
<thead>
<tr>
<th>Vaccination</th>
<th>Recommendation</th>
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<tbody>
<tr>
<td><strong>Hepatitis A</strong></td>
<td>Recommended for all travellers and expatriates, especially:</td>
</tr>
<tr>
<td></td>
<td>- For long-term or frequent visitors.</td>
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<tr>
<td></td>
<td>- For adventurous travellers who travel to more remote locations or stay in areas with poor sanitation.</td>
</tr>
<tr>
<td></td>
<td>- For men who have sex with men, people who use illicit drugs or those with liver disease.</td>
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<tr>
<td><strong>Hepatitis B</strong></td>
<td>Recommended for all travellers and expatriates.</td>
</tr>
<tr>
<td><strong>Japanese encephalitis</strong></td>
<td>Vaccine is recommended for people who will participate in ‘higher risk’ activities while in an area where Japanese encephalitis risk exists.</td>
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<tr>
<td></td>
<td>You are engaging in a ‘higher risk’ activity if you:</td>
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<tr>
<td></td>
<td>- Travel during the peak Japanese encephalitis season (consult the “Health Threats” section of the International SOS country guides to see specific season details for this country).</td>
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<td></td>
<td>- Spend a significant amount of time outdoors, particularly in the evening and night-time, in areas outside of cities. (ex. camping, trekking, biking, fishing, hunting, farming).</td>
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<td></td>
<td>- Stay in accommodation that will likely have mosquitoes indoors, ex. lacking air conditioning, window screens, and bed nets.</td>
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<tr>
<td></td>
<td>- Spend a month or more in a risk area during transmission season.</td>
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<tr>
<td></td>
<td>Japanese encephalitis vaccine is not available in many of the risk countries. Have the complete vaccine series before departure.</td>
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<tr>
<td><strong>Polio</strong></td>
<td>To protect themselves from polio, it is recommended that all travellers to the Xinjiang Uighur autonomous region of China take a polio booster before arrival.</td>
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<td></td>
<td><em>(The above-mentioned recommendations/requirements are as stated by the World Health Organization, the Ministry of Health or other health authorities. However national authorities may differ in how they implement these recommendations. Consult your travel health practitioner for individualised vaccination recommendations 6-8 weeks before your trip and check with the embassy or consulate of your destination.)</em></td>
</tr>
<tr>
<td><strong>Rabies</strong></td>
<td>Consider for certain travellers, especially:</td>
</tr>
<tr>
<td></td>
<td>- For expatriates and long-term visitors.</td>
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<tr>
<td></td>
<td>- For children who tend to play with animals and may not admit to being bitten or scratched.</td>
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<tr>
<td></td>
<td>- If you are travelling to a location where quality medical care may not be available immediately after being bitten/scratched by an animal.</td>
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<tr>
<td></td>
<td>- (Unvaccinated people need immunoglobulin within 24 hours of an animal injury, and this medication is scarce in some countries. If you are pre-vaccinated, you do not need this immunoglobulin after an injury.)</td>
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<tr>
<td></td>
<td>- If contact with dogs, monkeys or other potentially rabies-carrying animals is likely.</td>
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<tr>
<td></td>
<td>- Jogging increases your risk of dog bite.</td>
</tr>
<tr>
<td><strong>Tickborne encephalitis</strong></td>
<td>May be recommended for those visiting forests, fields or pastures during the summer tick season or who drink unpasteurized milk.</td>
</tr>
<tr>
<td><strong>Typhoid fever</strong></td>
<td>Recommended for adventurous and long-term travellers, especially those who will:</td>
</tr>
<tr>
<td></td>
<td>- Visit friends and relatives.</td>
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<tr>
<td></td>
<td>- Eat from local vendors or restaurants.</td>
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</tbody>
</table>
Malaria

Threat from: Bites and Stings

Malaria is present in some areas of China: southern China, along the China-Myanmar border in western Yunnan province and areas in Motuo county, Tibet autonomous region.

Prevention:
- mosquito bite avoidance
- medication: consult your travel health doctor for an individual recommendation. Some authorities recommend preventive medication if visiting the risk areas.

Zika Virus

There is no Zika Virus in China.

Standard of Care

Emergency Response

Always try to call International SOS whenever medical care or advice is required, especially in emergencies.
The public ambulance service can have variable response times due to traffic congestion. Staff may not speak English and training and the equipment varies. Patients are usually taken to the closest public hospital which may not provide the best care available locally.

There are very few private ambulance services in China.

If possible, use a private vehicle or taxi to take the patient to a private clinic or hospital.

<table>
<thead>
<tr>
<th>Emergency Numbers</th>
<th></th>
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<tbody>
<tr>
<td>Fire</td>
<td>119</td>
</tr>
<tr>
<td>Police</td>
<td>110</td>
</tr>
</tbody>
</table>

Standard of Health Care

Let International SOS assist you.

International SOS will assist you to find the best available emergency, inpatient or outpatient care, will provide language assistance, may be able to pay your medical expenses, and will assist with evacuation when required.

Inpatient care

In first tier cities such as Beijing and Shanghai, selected providers offer an overall good standard of medical care. In smaller cities, the standard of medical care is lower while in rural areas only basic care may be available.

The large public hospitals in the major cities offer a wide scope of services and specialties. However, high bed-occupancy rates, long waiting times, complex administration, lack of privacy and low levels of English being spoken can cause issues for foreigners.

Serious medical conditions often require evacuation to Hong Kong.

OutPatient Care

Selected private outpatient clinics in the major cities provide quality general practice and specialist care.

Paying for Health Care

Payment is expected at the time of service. Patients may be expected to pay a deposit at the time of admission.

Do not defer medical treatment because of financial concerns. Contact International SOS, and if our terms allow, we will make financial arrangements on your behalf.

Dental Care

Selected private clinics in the larger cities provide high-quality dental care. Elsewhere the standard of dental care is inconsistent or low.

Blood Supplies

The blood supply is not consistently screened and is considered unsafe.

Even in areas where the blood supply is considered safe, it’s best to avoid blood transfusions if possible. Screening cannot detect every blood-borne disease, and immune reactions can vary from minor to life-threatening. If a blood transfusion is recommended and circumstances permit, seek a second opinion from International SOS or your health advisor.

Medication Availability

Selected medical facilities, used by expatriates and visitors, have the best-stocked pharmacies. Avoid small local pharmacies. Counterfeit medication may be a problem.

Foreign manufactured medications and vaccinations are not widely available.

High quality "joint venture products" - medications produced in developed countries and packaged in China - may be available.

People staying in China for an extended period are permitted to hand-carry a one year supply of medication with them through customs if they have a prescription.

Since brand names vary, know the generic (chemical) names of your medications. It is always advisable to bring an adequate supply of prescription and other medications from your home country. Check the expiration date on all medications.

Clins & Hospitals

Medical Providers

No matter where you are, contact International SOS first if you are sick, injured or need medical advice.

Our medical staff will advise you, help you select the correct doctor, hospital or clinic, and make any necessary appointments on your behalf. If our terms allow, we will also make financial arrangements for you.

It is recommended that you contact International SOS before accessing medical care in China.

Hospitals / Clinics

If you are unable to contact International SOS, the following list of hospitals and clinics is provided in case of medical emergencies.

Beijing
Beijing United Family Hospital
Category: Hospital
Address: 2 Jiangtai Lu
Chaoyang District
Beijing, Beijing 100016
Telephone: 86 10-59277000
86 4008919191

China-Japan Friendship Hospital
Category: Hospital
Address: No 2 Yinhua Yuan East Road
He ping li
Beijing, Beijing 100029
Telephone: 86 10 6428 2297
86 10 6420 5071
86 10 6420 6419

Raffles Medical Beijing Clinic
Category: Hospital
Address: Suite 106 Wing 1 Kunsha Building
16 Xinyuanli
Chaoyang District
Beijing, Beijing 100027
Telephone: 86 10 6462 9112

Dalian
Raffles Medical Dalian Clinic
Category: Clinic
Address: No.128-223, Jin Ma Road
Jin Pu New District
Dalian, Liaoning 116000
Telephone: 86 0411-87919925

Nanjing
Raffles Medical Nanjing Clinic
Category: Hospital
Address: Ground Floor, Grand Metro Park Hotel
319 East Zhongshan Road
Nanjing, Jiangsu 210016
Telephone: 86 (25)-84802642

Shanghai
Huashan Worldwide Medical Center (Foreigner)
Category: Hospital
Address: 8F of No1 building(outpatient building) / 15F & 16F of No6 building(inpatient)
12 Wulumuqi Zhong Road
Jingan District
Shanghai, Shanghai 200040
Telephone: 86 (21)-52887850
86 (21)-52887851(nurse station)
86 (21)-52889998(appointment)
86 (21)-62483986/52889999(appointment)
86 (21)-62499295(hotline)
86 21 52887250 (inpatient)

ParkwayHealth Medical and Dental Centers: Specialty and Inpatient Center
Category: Hospital
Address: 2/3 Floor 170 Diansui Road
Shanghai, Shanghai 200020
Telephone: 86 21-6242 7804 (Japanese pt)
86 21-63859383
86 400 819 6622

Shanghai United Family Hospital and Clinics
Category: Hospital
Address: 1139 Xian Xia Road
Shanghai, Shanghai 200336
Telephone: 86 21-22153900
86 4006393900 (AppI)
Shenzhen
Raffles Medical Shenzhen
Category: Hospital
Address: 2F, No. 4333 DongBin Rd
          2nd Floor HuBin Square
          NanShan District
          Shenzhen, Guangdong 518054
Telephone: 86 755 26693567

Tianjin
Raffles Medical Tianjin Clinic
Category: Clinic
Address: 1F Sheraton Hotel Apartment Building
          Zi Ji Shan Road
          He Xi District
          Tianjin, Tianjin 300074
Telephone: 86 (22)-23520143

Raffles Medical Tianjin TEDA Clinic
Category: Clinic
Address: 102-C2 MSD, No.79 1st Avenue
          TEDA
          Tianjin, Binhai Area 300457
Telephone: 86 (022) 6537 76167617

Food & Water

Food and Water Precautions

Travellers have a small risk of developing diarrhoea in any country. It may be advisable to drink bottled water only, especially on short trips. Always wash your hands with soap before eating, or use an alcohol-based hand sanitizer. See the following country-specific recommendations:

Water and Beverages

Tap water is unsafe.
- Drink only bottled or boiled water or carbonated drinks.
- Avoid ice, as it may have been made from unsterile water.

Food Risk

Food-borne illness is common. To reduce your risk:
- Food served in larger hotels and well-known restaurants should be safe.
- Busier restaurants may be safer as they are more likely to serve freshly cooked food.
- Always choose food that has been freshly cooked and is served hot.
- Avoid food that has been stored warm – such as in a “bain marie.”
- Avoid raw foods, shellfish, pre-peeled fruit and salad.
- Fruit that you wash and peel yourself is safe.
- Avoid street vendors and market food because the standard of hygiene may be low and food may not be fresh.

More on food and water safety

Health Threats

Health threats present include:

Malaria | Threat from: Bites and Stings

Malaria is transmitted by mosquitoes that usually bite from dusk to dawn. Symptoms can develop as early as seven days or as late as several months after exposure. Early malaria symptoms are flu-like and can include fever, sweats/chills, head and body aches, and generally feeling tired and unwell. People also sometimes feel nauseous and vomit or have diarrhoea. Untreated, malaria can cause serious complications like anaemia, seizures, mental confusion, kidney failure and coma. It can be fatal.

Follow the ABCDEs to minimise malarial risk:

A: Awareness - Be Aware of the risk, the symptoms and malaria prevention.
B: Bite Prevention - Avoid being Bitten by mosquitoes, especially between dusk and dawn.
C: Chemoprophylaxis - If prescribed for you, use Chemoprophylaxis (anti-malarial medication) to prevent infection and if infected reduce the risk of severe malaria.
D: Diagnosis - Immediately seek Diagnosis and treatment if a fever develops one week or more after being in a malarial area (up to one year after departure).
E: Emergency - Carry an Emergency Standby Treatment (EST) kit if available and recommended (this is the kit which contains malaria treatment).

China

Malaria is present in some areas of China: southern China, along the China-Myanmar border in western Yunnan province and areas in Motuo county, Tibet autonomous region.

Prevention:
- mosquito bite avoidance
- medication: consult your travel health doctor for an individual recommendation. Some authorities recommend preventative medication if visiting the risk areas.
**Malaria Risk**

<table>
<thead>
<tr>
<th>Malaria Risk</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Higher risk</td>
<td></td>
</tr>
<tr>
<td>Lower risk</td>
<td></td>
</tr>
<tr>
<td>No risk</td>
<td></td>
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</tbody>
</table>

*This map is intended as a visual aid only and not a definitive source of information about malaria risk.*

**Travelers’ diarrhea** | Threat from: Food and/or water

Travelers’ diarrhea is the most common travel-related illness. It usually occurs within the first week away from home. It is spread through contaminated food and water.

Prevention is through choosing safe food and water, and paying attention to hygiene. Select food that is thoroughly cooked while fresh and served hot. Avoid undercooked or raw meat, fish or shellfish. Avoid salad and raw vegetables unless you can wash them with clean (treated) water and you peel them yourself.

Unless you are certain that the tap water is drinkable - choose bottled water and beverages, avoid ice.

**China** Travelers' diarrhea risk is high, especially during the summer months.

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**Dengue fever** | Threat from: Bites and Stings

Dengue, or "break-bone" fever, is a viral disease of the tropics and sub-tropics. It is transmitted by the *Aedes aegypti* and *Aedes albopictus* mosquitoes that bite during the daytime and are found in and around human habitation. Symptoms include high fever, severe headaches, joint and muscle pain. A rash often follows. The acute illness can last up to ten days, but complete recovery can take two to four weeks.

Occasionally, a potentially fatal form of dengue called severe dengue (previously known as dengue hemorrhagic fever or DHF) occurs. Severe dengue is mostly seen in persons who have been previously infected with dengue - the fatality rate is about 2.5%.

Prevention is through avoiding mosquito bites. A dengue vaccine, Dengvaxia, is available in several countries however it is not recommended for people who have never had dengue infection. It should only be used by people who have already been infected with dengue. Hence, travellers who have already had the disease or are seropositive and planning to visit areas with high transmission can consider vaccination in consultation with a travel health specialist.

**China**

Occurs in southern provinces of China including: Guangdong, Guangxi, Fujian, Yunnan and Hainan Island. Sporadic cases have been detected in Wuhan and Wenzhou provinces.

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**Rabies** | Threat from: Animals

Rabies is a viral disease contracted when bitten or scratched by an infected (rabid) animal, often a dog. Once it enters the body, the virus travels along nerves and causes paralysis. As it reaches important organs like the spinal cord and the brain, it causes coma and death.

In countries where rabies is present in animals or bats, ALL animal / bat bites, scratches and licks to broken skin must be treated seriously. Rabies vaccination is very effective in preventing rabies, even after a bite/scratch by a rabid animal.

**Rabies vaccination**

Pre-exposure vaccination is often recommended for expatriates and long-term visitors to destinations where rabies is present. It's especially recommended if quality medical care may not be available after being bitten or scratched by an animal. Pre-exposure treatment can be especially useful for children, since they may not tell their parents that they have been bitten/scratched.

Pre-exposure vaccination makes it easier to treat a bite or scratch. That's important because some types of rabies treatment can be in short supply in many countries, even in cities.

If bitten, scratched or licked (on broken skin) by an animal:

https://www.internationalsos.com/MasterPortal/PrintDisplay.aspx
- Immediately cleanse the wound with soap and water and a povidone-iodine solution if available.
- Seek medical advice from a qualified source or your assistance company.
- Notify local health authorities immediately. You may need post-exposure vaccination, even if you have had pre-exposure vaccination. (THIS CAN BE LIFE SAVING.)

**China**

Rabies is endemic, or consistently present, amongst dogs in China. Very few of them are vaccinated against the disease. China has a high number of stray dogs, including an estimated 100,000 or more in Beijing.

Since 2003, more than 2000 human cases of rabies have occurred annually. In some provinces, the disease periodically becomes the top cause of human deaths due to infectious diseases.

Post-exposure treatment for rabies (immunoglobulin) is not readily available. Unvaccinated people who have a risky animal encounter may need to be evacuated to Hong Kong for treatment.

**Typhoid fever | Threat from : Food and/or water**

**Typhoid fever** is a serious infection caused by a type of salmonella bacteria spread by contaminated food or water. Choosing safe food and water will greatly reduce the risk of developing the disease.

Symptoms usually begin one to three weeks after exposure. Although typhoid fever is often called a diarrheal disease, some patients do not have diarrhea. Persistent, high fever is typical. Other early symptoms are flu-like, body aches and pains, weakness, loss of appetite and a continuous dull headache. A rash with pink spots may appear on the chest and abdomen of some patients. In severe cases, perforation of the bowel can cause severe bleeding or infection in the abdomen, which can be fatal.

Typhoid is cured with antibiotic treatment. Preventive vaccinations are available.

**China**

Due to relatively low levels of hygiene, preventive vaccinations are available.

**Hepatitis A | Threat from : Food and/or water**

Hepatitis A is a viral disease that causes liver inflammation. The virus is present in the faeces of an infected person. It spreads through contaminated food and water, and is common in areas with poor sanitation. Person-to-person spread also occurs, when the virus is inadvertently transferred into the mouth, including during sexual activity.

People at higher risk of infection include men who have sex with men, illicit drug users and people with liver disease.

Symptoms begin on average 28 days after exposure (range 2 to 8 weeks), and include fever, chills, fatigue, abdominal pain, nausea, vomiting, dark urine and jaundice (yellow colour of the skin and eyes). Many infected people suffer only a mild illness. Most cases recover fully after four or more weeks. However for some, the disease can be severe, and occasionally is fatal. There is no specific treatment and cases are managed through supportive therapy.

Prevention is through vaccination, attention to hygiene, and access to safe food and water.

**Japanese encephalitis | Threat from : Bites and Stings**

**Japanese encephalitis** is a serious viral illness, spread by mosquitoes. It occurs in most of Asia as well as some parts of the Western Pacific, mostly in rural agricultural areas. Although many people won't have any symptoms, it can cause encephalitis (inflammation of the brain) with permanent brain damage, or be fatal. Prevention is through preventing mosquito bites. In addition, vaccination is recommended for travellers at higher risk.

**China**

Japanese encephalitis occurs in all provinces except Xinjiang (Tibet), Xizang and Qinghai. Peak disease activity occurs in the north from May to September, and from April to October in southern areas. Chongqing, Guizhou, Shanxi, Sichuan and Yunnan provinces record the highest numbers of cases. Vaccination is generally not recommended for travel confined to Beijing and other major cities.

**Polio | Threat from : Food and/or water**

Polio is highly infectious, and is spread from person-to-person. People can be infected with polio if they eat or drink something that has been contaminated with faeces, particularly in countries with less-developed sanitation systems. It may also spread through the oral and nasal secretions of an infected person. In countries with higher levels of sanitation, respiratory droplets coughed by an infected person are an important means of transmission.

Most infected people show no symptoms, or have only mild ones including fever, headache, nausea and vomiting. In about one in 100 cases, the virus reaches the central nervous system and causes some form of paralysis.

Polio has now been eradicated from most countries. However, it remains endemic (consistently present) in three countries: Afghanistan, Nigeria and Pakistan. As of July 2018, the endemic countries as well as Democratic Republic of Congo, Kenya, Papua, New Guinea, Somalia and Syria have the potential to spread the disease to other countries. However, there are some countries which are no longer infected by wild poliovirus or cVDPV, but are vulnerable to re-infection. These include Cameroon, Central African Republic Chad, Equatorial Guinea, Ethiopia, Guinea, Iraq, Laos, Liberia, Madagascar, Myanmar, Niger, Sierra Leone, South Sudan and Ukraine.

Polio prevention involves selecting safe food and water, as well as vaccination. Many countries give a primary vaccination against polio during childhood. It entails several doses of oral (OPV) or injected (IPV) vaccine. Unvaccinated people, or those whose vaccination status is unknown, should receive IPV before travel to areas where polio is a risk.

**China**

The last indigenous polio case was recorded in 1994. However in 2011, a few polio cases were reported mostly from the Hotan prefecture in Xinjiang Uyghur autonomous region and were thought to be linked to Pakistan.

https://www.internationalsos.com/MasterPortal/PrintDisplay.aspx
The Xinjiang Uygur autonomous region borders countries where polio is endemic (Afghanistan and Pakistan), hence vaccination is recommended for travellers to this region.

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**Schistosomiasis | Threat from: Swimming/bathing**

*Schistosomiasis*, also known as bilharzia, is a disease caused by parasitic worms that live in freshwater lakes, rivers and rice paddies. It can penetrate the skin of persons who are wading, swimming, bathing or washing in contaminated water. There is no vaccine.

To prevent infection:
- Avoid swimming or wading in fresh water in countries where schistosomiasis occurs.
- Using soap during bathing reduces the risk of infection, as does a vigorous rubdown with a towel immediately after contact with contaminated water. Do not rely on these methods to prevent schistosomiasis.
- Heat bath water for five minutes at 50°C (122°F).
- Water held in a storage tank for at least 48 hours should be safe.

**China**

The number of cases of schistosomiasis reported each year in China has been rapidly increasing following the flood disaster along the Yangtze River in 1998. The most affected regions are located along the river and include central China's Hubei, Hunan and Jiangxi provinces and east China's Jiangsu and Jiangxi provinces. In the southwest, the affected regions include Yunnan and Sichuan provinces.

The risk to international travelers is low.

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**HIV, Hepatitis B and C, & STIs | Threat from: Sex/blood/needles**

HIV/AIDS, hepatitis B, and hepatitis C are spread by contact with bodily fluids (especially blood and semen).
- unprotected sex,
- needle sharing during IV drug use, or
- unsafe blood or medical/dental instruments.

Genital herpes (HSV), genital warts (HPV), gonorrhrea, chlamydia, syphilis and most other sexually transmitted diseases are spread by genital contact.

Prevention:
- In many countries, hepatitis B is now a routine childhood immunisation and need not be repeated. All non-immune travellers should consider vaccination.
- Always use new condoms (preferably brought from your home country).
- IV drug users should not share needles.
- Avoid having tattoos or piercings done.
- In healthcare settings, make sure that needles and syringes sterile and not shared between patients.
- Call International SOS or your corporate medical department if you are hospitalised.
- Be aware of your risk when assisting anyone with an injury. Protect yourself from contact with bodily fluids.
- Seek medical attention within 24 hours if you accidentally come into contact with someone else’s bodily fluids.

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**Tickborne encephalitis | Threat from: Bites and Stings**

The virus is mainly transmitted to humans by the bite of an infected tick. Ticks are usually found at the edge of forests and in clearings, long grass and hedges and are more common in the summer months. Often, the bite goes unnoticed. Infection can also be acquired by consuming unpasteurized dairy products from infected cows, goats or sheep.

About 14 days after the tick bite, the patient suffers fever, headache, muscle aches, nausea and fatigue. The symptoms usually resolve in a week or so, but up to one third of patients develop a second, more severe illness. Symptoms may include severe headaches, decreased mental state, convulsions, weakness and/or coma. These symptoms indicate that the virus is affecting the brain. About one percent of cases are fatal. Fortunately, only one out of 250 people who get infected with the virus actually becomes ill.

To prevent infection, it is important to prevent tick bites, especially as most travellers have not been vaccinated.

- Wear long pants with tight cuffs, and tuck pant legs into socks.
- Use insect repellent containing DEET.
- Consider soaking or spraying your clothes with the insecticide permethrin. (Do not apply permethrin directly to the skin.)
- After visiting a forest or pasture, search for ticks on your body and clothing. If a tick is found, remove it gently using tweezers.

A safe, effective vaccine is available in Canada, Europe and the UK. It is not available in the U.S. The vaccine is given routinely to populations living in infected areas of Europe and Russia. However, the CDC does not generally recommend its use for travelers. Travelers at high-risk of exposure should consult their travel health practitioners for an individual recommendation on vaccination.

**China** Transmission is greatest during spring to autumn (March to November). The main risk areas are the forested areas below 1400m in the north east of the country - including the Changbai mountains, Jilin province, Daxingan Mountain, Inner Mongolia, and Xiaoxinggan Mountain in Heilongjiang province.

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**Tuberculosis (TB) | Threat from: Coughing/sneezing**

*Tuberculosis* (TB) is a serious bacterial disease. The bacteria can be coughed or sneezed into the air by an infected person. Most people who contract TB have had prolonged, close, exposure to an infected person. This means they have spent days or weeks – not just a few hours – sharing the same air space with an infected person (e.g., living in the same house). People who work or live in institutions such as nursing homes or correctional facilities are also at higher risk.
Active TB causes a variety of symptoms that are sometimes vague, but often include cough, fever, night sweats, unintended weight loss and lethargy. Latent (inactive) TB causes no symptoms. Most strains of TB can be treated with antimicrobial drugs. Up to four different types of medicines may be used together to treat a patient. If left untreated, active TB can be life-threatening.

Some forms of TB have become resistant to drugs (MDR TB), and some forms are extensively resistant to drugs (XDR TB). These diseases are hard to treat. People sometimes contract MDR or XDR TB through direct contact with a person who is already infected. Or, in other cases, people with more traditional TB infections develop a drug-resistant strain. This can happen if anti-TB medication is used inappropriately or stopped too soon.

Many countries where TB is common will routinely give the Bacillus Calmette-Guerin (BCG) vaccine against tuberculosis to babies or children. The BCG vaccine protects these children against severe TB. If you live in an area with higher rates of TB infection, you may also consider vaccinating children up to 16 years old if you plan to live there for 3 months or more.

Travellers and expatriates may be able to reduce their chance of contracting TB by limiting the amount of time they spend in crowded places. Avoiding people who are coughing also minimises risk. Consider TB screening of local staff who live with you – especially if you have young children in your household.

China

The World Health Organization (WHO) has designated China a "high burden country" for tuberculosis. The country falls in the "moderate incidence" range for tuberculosis as per WHO. Moderate incidence range is between 50 to 299 new cases each year per 100,000 population. WHO has also designated the country a "high burden country" for multi-drug resistance tuberculosis (MDR-TB). Extensively drug-resistant TB (XDR-TB) has also been reported in the country. BCG vaccination is given at birth and is included in the country's immunization schedule.

Expatriates or frequent travellers should consider consulting their doctor as TB screening may be offered.

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**Scrub typhus | Threat from: Bites and Stings**

The bacterial disease scrub typhus is also known as tropical typhus or "chigger fever". Humans become infected when bitten by disease-carrying mites. A lump develops at the bite site. It ulcerates and forms an eschar (like a cigarette burn). Glands near the bite swell. Sudden onset symptoms progress, including high fever, headaches and sore muscles. About a third of those infected develop a rash.

Complications, such as pneumonia and nervous system impairment, can occur. Treatment with timely appropriate antibiotics will cure the disease. Untreated, mortality can be as high as 30 percent. No vaccine is available. Prevent infection by avoiding mite habitats (such as rodent infested areas, recently cleared forests clearings and rice paddies) and by preventing mite bites.

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**Crimean-Congo Fever (CCHF) | Threat from: Bites and Stings**

Crimean Congo haemorrhagic fever (CCHF) is a viral disease that affects animals and humans. It is transmitted to humans by an infected tick bite or upon direct contact with infected animals, patients or infected fluids. Symptoms occur within two to twelve days of exposure to infection. The illness presents with fever, chills, headache, body aches and haemorrhage (bleeding). Continued bleeding leads to shock and death about 10 days after symptoms begin. Around half of all infected people die. If the patient survives, recovery is long and slow.

Risk to travellers is low. High risk groups include agricultural workers, healthcare workers, military personnel and people who camp in rural areas. There is no vaccine against CCHF. To prevent tick bites, wear long sleeves and long pants, and use insect repellents.

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**Hantaviruses | Threat from: Animals**

Hantaviruses are a group of viruses that belong to the bunyaviridae family. They can cause two different types of illness in humans: hemorrhagic fever with renal failure syndrome (HFRS) and hantavirus pulmonary syndrome (HPS). The latter also known as hantavirus cardiopulmonary syndrome (HCPS). It is a widely distributed disease and occurs across Americas, Europe and Asia.

Regardless of which illness they cause, hantaviruses are carried by infected rodents that can carry the virus for their entire lives without any signs of illness. Virus is present in the animal's saliva, urine and feces. Humans become sick when they inhale the aerosol droplets of these excretions.

Although not clearly known, symptoms of HCPS appear about one to eight weeks after exposure to the virus. Early symptoms include fatigue, fever, and muscle aches. About 50 percent of all patients also experience headache, dizziness, and abdominal symptoms (nausea, vomiting, diarrhea, pain). Late symptoms are cough/hotness of breath and a feeling of overall tightness in the chest. Heartbeat and breathing may both become rapid at this stage. Most people recover from the disease. The overall case fatality rate is about 30 percent, and most deaths occur rapidly - within 24 hours of hospitalization.

The incubation period for HFRS is usually 2 to 4 weeks, but could be as short as a few days. Patients usually experience a fever that begins suddenly, headache, muscle pain, gastrointestinal upset, eye pain and blurred vision. Patients may later develop hemorrhage, including bleeding from the skin, conjunctiva of the eye, and mouth. Complications include kidney failure. Most patients fully recover. The overall mortality ranges from 5-15 percent, depending on the strain of the virus.

The best way to avoid infection is to eliminate rodents from your living space and worksite, and/or avoid contact with them. Keep food tightly contained, clean dishes immediately after use, do not leave pet food out all day, and seal holes to the outside - generally, make your environment inhospitable to rodents. When in an area known to be infested with rodents, avoid activities that can stir up dust, like vacuuming or sweeping, as there may be virus-containing rodent feces, urine, or saliva present. Do not sit in meadows, on haystacks, or woodpiles where rodents are likely to nest.

Treatment is supportive. Ribavirin has improved the chances of surviving HFRS although its effectiveness has not been proven in HCPS. A vaccine is available to protect against certain viruses that cause HFRS, most especially those that are prevalent in mainland China.

China

Most of the hantavirus infections occur during spring and summer in the eastern and north eastern areas. Cases of Hemorrhagic fever with renal syndrome (HFRS) have been documented in 29 of 31 provinces of China.
Avian influenza | Threat from: Animals

Bird flu (avian influenza) is a group of influenza viruses that usually occur in birds but can infect other animals and people too. H5N1 and H7N9 have infected hundreds of people; other strains like H6N6, H10N8 and H6N1 have also caused severe illness in humans. Strains which have only caused mild illness in humans to date are H9N2. H7N2, H7N7, H7N3 and H10N7. Most humans have been infected after contact with infected poultry, the disease does not spread easily from person-to-person. The illness usually begins like an ordinary flu infection: sudden fever, cough, sore throat and muscle pain. A severe lower respiratory tract infection (pneumonia) may then develop. Gastrointestinal symptoms, such as diarrhoea, may occur. There is no vaccine available against these avian flu s. Avoid contact with birds and animals, cook food thoroughly and maintain high levels of hygiene to prevent the illness.

China

China is a “hot spot” for bird flu. Avian flu H5N1 and H7N9 are persistently present (endemic) in birds in many areas. Other strains have been detected in poultry and migratory wild birds. The risk to human health is ongoing, particularly in “wet markets”.

Since the first case human cases of H5N1 occurred in 2003-4, sporadic cases have been documented every year, with about 60% of them being fatal. At least one cluster of human-to-human transmission has been reported.

In 2013, the first cases of H7N9 cases were discovered, and seasonal “waves” of infection have occurred every year since. Around 40% of cases are fatal. Human H7N9 cases have been detected in most provinces, and the cities of Beijing and Shanghai.

A few severe illnesses and fatalities due to other strains (H5N6, H10N8) have been reported, as well as mild illnesses due to H9N2.

Air Pollution | Threat from: Environment

Poor air quality, also known as “haze”, “smog” and “air pollution”, can negatively impact one’s health. Some groups are especially vulnerable to problems caused by polluted air. These include children, the elderly and anyone with underlying chronic health problems such as heart disease, emphysema, bronchitis or asthma.

The chemicals in polluted air can affect the lungs resulting in wheezing, coughing, shortness of breath and even pain. Polluted air can also irritate the eyes and nose, and may interfere with immune system function. Long-term exposure can result in reduced lung function, particularly in children. It can also lead to lung cancer.

Limiting exposure to polluted air is the best way to avoid these problems. When air quality is poor, it may be advisable to avoid outdoor physical activities. While inside, keep doors and windows closed, and use an air conditioner or “recirculate” if possible. If the air quality is frequently problematic, consider using an air cleaner. During particularly bad periods, you may want to wear a mask while outside. Ask your healthcare provider before using a mask, especially if you have underlying health conditions.

See the International SOS Air Pollution website - use your membership number to log in.

China

Major cities including Beijing and Shanghai experience high levels of air pollution on an ongoing basis, partially due to rapid economic and industrial development. Increasing motor vehicle traffic and dust from construction projects and sandstorms in northern China also add to the levels of pollution. Air quality is routinely monitored by the Ministry of Environmental Protection.

Altitude | Threat from: Environment

Altitude illness is a potentially fatal condition that can affect people who normally live at a low altitude and travel to a higher altitudes. It can occur from elevations of 1,500 meters onwards, but is more common at elevations above 2,500 meters (8,000 feet).

People most at risk are those who have experienced altitude illness before, people who have heart or lung problems and people under the age of 50. There are three different types of altitude illness: Acute Mountain Sickness (AMS), High Altitude Cerebral Edema (HACE) and High Altitude Pulmonary Edema (HAPE). AMS is the most common and mild form of altitude illness. HACE and HAPE are more severe. HACE is a medical emergency and if not treated and managed quickly, can result in coma and death. Management of altitude illnesses involves immediate descent and oxygen treatment. Most people who are affected, even those who develop HACE or HAPE, recover completely if moved to a lower elevation. There are medicines that can be administered by trained medical professionals.

Anyone travelling to high altitude, especially higher than 2,500 meters, should be aware of and recognise the symptoms of altitude illness. See your travel health professional before departure, for individual advice on preventative measures, especially if you have ever suffered altitude sickness in the past, or if you have an underlying medical condition.

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