International travellers could be at risk of malaria infection in 97 countries around the world, mostly in Africa, Asia and the Americas. People infected with malaria often experience fever, chills and flu-like illness at first. Left untreated, the disease can lead to severe complications and, in some cases, death. Malaria symptoms appear after a period of seven days or longer. Fever occurring in a traveller within three months of possible exposure is a medical emergency that should be investigated immediately.

Malaria is caused by the *Plasmodium* parasite and is transmitted by female *Anopheles* mosquitoes which bite between dusk and dawn. There are five different types of parasites that infect humans: *P. falciparum*, *P. vivax*, *P. ovale*, *P. malariae*, and *P. knowlesi*. Of these, *P. falciparum* and *P. vivax* are the most prevalent, and *P. falciparum* is the most dangerous, with the highest rates of complications and mortality. This deadly form of malaria is a serious public health concern in most countries in sub-Saharan Africa.

WHO estimates that 214 million cases of malaria occurred worldwide in 2015 (uncertainty range: 149–303 million) and about 438 000 people died from the disease (uncertainty range: 236 000–635 000), mostly children under five years of age in sub-Saharan Africa.

**WHO recommendations**

Prevention of mosquito bites between dusk and dawn is the first line of defence against malaria. Measures to prevent mosquito bites include sleeping under long-lasting insecticidal nets, and using protective clothing and insect repellents. Depending on the malaria risk in the area to be visited, international travellers may also need to take preventive medication (chemoprophylaxis) prior to, during, and upon return from their travel.
Some groups of travellers, especially young children, pregnant women and individuals with a weakened immune system, are at particular risk of developing serious illness if they become infected with malaria. In pregnant women, malaria increases the risk of maternal death, miscarriage, stillbirth and low birth weight, as well as the associated risk of neonatal death. Pregnant women should avoid travelling to areas where malaria transmission occurs, and parents are advised not to take infants or young children to areas where there is risk of *P. falciparum* malaria. When travel cannot be avoided, it is very important to take effective preventive measures against malaria, even when travelling to areas with *P. vivax* malaria transmission. Prior to their travel to malaria-endemic countries or regions, individuals should consult their national disease control centres, or other institutions offering travel advice, for information regarding the preventive measures that should be taken.

Links to national travel and health websites can be found here: http://www.who.int/ith/links/national_links/en/

**International travel and health**

Each year, WHO releases *International Travel and Health*, a comprehensive and up-to-date guide regarding the prevention and treatment of all diseases potentially affecting travellers. The publication is aimed at health practitioners and national disease control centres, and includes information about the geographical distribution of malaria, epidemiological details for all malaria-endemic countries, and all recommended preventive measures.

Links to the most recent Country Profiles can be found here: http://www.who.int/malaria/publications/country-profiles/en/

The publication also contains WHO recommendations on protective measures against mosquito bites, information about possible serious side-effects resulting from the use of various malaria medications, and the state of antimalarial drug resistance in countries.

The International travel and health document can be found here: http://www.who.int/ith/en/

The document can also be purchased from the WHO Online Bookshop: http://apps.who.int/bookorders/anglais/home1.jsp?sesslan=1

WHO regrets that it cannot respond to individual queries about malaria risk for specific itineraries in particular countries.

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