

Spain



Capital City : "Madrid"
Official Language: "Castilian Spanish"
Monetary Unit: "euro (€)"

General information

See also:

- [Balearic Islands \(Spain\)](#)
- [Canary Islands \(Spain\)](#)

The information on these pages should be used to research health risks and to inform the pre-travel consultation. For advice regarding safety and security please check the UK Foreign and Commonwealth Office (FCO) website.

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.

While most travellers have a healthy and safe trip, there are some risks that are relevant to travellers regardless of destination. These may for example include road traffic and other accidents, diseases transmitted by insects or ticks, diseases transmitted by contaminated food and water, sexually transmitted infections, or health issues related to the heat or cold.

All travellers should ensure they have [adequate travel health insurance](#). If visiting European

Economic Area (EEA) countries carry an [European health insurance card \(EHIC\)](#) as this will allow access to state-provided healthcare in EEA countries, at a reduced cost, or sometimes for free. The EHIC however, is not an alternative to travel insurance.

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

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.

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 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* 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 appropriate medical attention.

Tetanus vaccination

- Travellers should have completed a primary vaccination course according to the UK schedule.
- If travelling to a country 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 [FCO foreign travel advice](#) website.

[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.

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 Melilla in Spain.
- Rabies has **not** been reported in domestic or wild animals in the rest of Spain; 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 Melilla 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 [national guidelines](#).

Rabies vaccination

For travellers to the African territories of Ceuta and Melilla:

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 world-wide.

[Rabies in brief](#)

Hepatitis A (men who have sex with men)

There have been increased numbers of Hepatitis A cases in England, mainly affecting men who have sex with men. [Many of these men have reported travel to Spain, where there has recently been a reported increase in hepatitis A among men.](#)

Hepatitis A is a viral infection of the liver spread by a virus present in the faeces of an infected person. It is transmitted through infected faeces contaminating food and water or by direct contact with an infectious person including sexual transmission.

Hepatitis A is not usually life-threatening but severity can increase with age. Most people make a full recovery within a couple of months. Following hepatitis A illness, immunity is lifelong. Gay and bisexual men with multiple partners are particularly at risk.

Prevention

- All travellers should take care with personal, food and water hygiene.
- Gay and bisexual men with multiple partners are at risk from contact with infected faeces during oral and anal sex. [Information about how gay and bisexual men can protect themselves.](#)

Hepatitis A vaccination

High risk men who have sex with men with multiple partners may benefit from vaccination and should seek advice from their sexual health or travel clinic prior to travelling.

Other risks

The risk below may be present in all or part of the country.

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. An example place of interest: Mulhacen 3,479m.

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](#)

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