

Ecuador

WHO and CDC Statements

Malaria Risk and Prevention

WHO - *International Travel and Health* (current online update, Country List)

(2021) Malaria risk due to *P. vivax* (67%) and *P. falciparum* (33%) exists throughout the year below 1500 m, with moderate risk in coastal provinces. Risk is low in Quito and in provinces that are part of the Inter-Andean or Sierra region. Risk of *P. vivax* malaria is present in some provinces of the country, predominantly in the Amazon region, especially the provinces of Morona Santiago, Pastaza, Orellana and Sucumbíos. Risk of *P. falciparum* malaria is present in some provinces of the country with predominance on the coast, especially the province of Esmeraldas, as well as in the Amazon region, especially the provinces of Pastaza and Morano Santiago.

- Recommended prevention in risk areas: **C** – Risk of *P. falciparum* malaria, in combination with reported chloroquine and sulfadoxine–pyrimethamine resistance. Mosquito bite prevention plus atovaquone–proguanil or doxycycline or mefloquine chemoprophylaxis (select according to reported side effects and contraindications) ^a

^aAlternatively, for travel to rural areas with low risk of malaria infection, mosquito bite prevention can be combined with stand–by emergency treatment (SBET).

WHO Country List footnote: When available, the date of the most recent update or confirmation is indicated in parentheses in the country list. If no date is indicated, the most recent update or confirmation was provided before 2013.

CDC - *Health Information for International Travel* (current online edition)

Areas with malaria: Areas at altitudes < 1,500 m (4,921 ft) in the provinces of Carchi, Esmeraldas, Morona Santiago, Orellana, and Pastaza. Rare cases in other provinces in areas <1,500 m (4,921 ft). Not present in the cities of Guayaquil and Quito or the Galápagos Islands (see Map 2-12).

- Drug resistance³ : Chloroquine.
- Malaria species: *P. vivax* 72%, *P. falciparum* 28%.
- Recommended chemoprophylaxis: Areas with malaria in Carchi, Esmeraldas, Morona Santiago, Orellana, and Pastaza Provinces: Atovaquone-proguanil, doxycycline, mefloquine, or tafenoquine.⁴ Other areas with rare cases of malaria: None (practice mosquito avoidance).

³ Refers to *P. falciparum* malaria unless otherwise noted.

⁴ Primaquine and tafenoquine can cause hemolytic anemia in people with G6PD deficiency. Patients must be screened for G6PD deficiency before starting primaquine or tafenoquine. See *Tafenoquine Approved for Malaria Prophylaxis and Treatment* for more information.

Yellow Fever Vaccination

WHO - *International Travel and Health* (current online update, Country List)

Country requirement: (2021) a yellow fever vaccination certificate is required for travellers aged 1 year or over arriving from Brazil, Democratic Republic of the Congo, and Uganda and for travellers having transited for more than 12 hours through an airport of the same countries.

WHO Country List footnote: When available, the date of the most recent update or confirmation is indicated in parentheses in the country list. If no date is indicated, the most recent update or confirmation was provided before 2013.

Yellow fever vaccine recommendation: (2021) yes

Recommended for all travellers aged 9 months or over going to the following provinces east of the Andes below 2300 m: Morona-Santiago, Napo, Orellana, Pastaza, Sucumbios, and Zamora-Chinchipe.

Generally not recommended for travellers whose itineraries are limited to the following provinces west of the Andes including below 2300 m: Esmeraldas, Guayas, Los Rios, Santa Helena, and Santo Domingo de los Tsachilas and designated areas of Azuay, Bolivar, Canar, Carchi, Chimborazo, Cotopaxi, El Oro, Imbabura, Loja, Pichincha, and Tungurahua.

Not recommended for travellers whose itineraries are limited to all areas above 2300 m, the cities of Guayaquil and Quito, and

the Galápagos Islands.

It should be noted that, although urban areas (cities) and the Galapagos Islands are not risk areas for yellow fever, the jungle area of the Amazon Region of Ecuador – where the provinces of Orellana, Sucumbios, Pastaza, Napo, Morona Santiago, Zamora Chinchipe and the coastal province of Esmeraldas are found and where the vectors *Haemagogus* spp. and *Sabethes* spp. are transmitters of the disease – is considered risky and endemic for the circulation of the virus.

CDC - *Health Information for International Travel* (current online edition)

Yellow fever vaccine recommendation:

Recommended for all travelers ≥ 9 months of age traveling to areas $< 2,300$ m (7,546 ft) in elevation in the following provinces east of the Andes Mountains: Morona-Santiago, Napo, Orellana, Pastaza, Sucumbios, and Zamora-Chinchipe (Map 2-11).

Generally not recommended for travelers whose itineraries are limited to areas $< 2,300$ m (7,546 ft) in elevation in the following provinces west of the Andes mountains: Esmeraldas,* Guayas, Los Rios, Santa Elena, Santo Domingo de los Tsachilas, and designated areas of Azuay, Bolivar, Canar, Carchi, Chimborazo, Cotopaxi, El Oro, Imbabura, Loja, Pichincha, and Tungurahua (Map 2-11).

Not recommended for travelers whose itineraries are limited to all areas $> 2,300$ m (7,546 ft) in elevation, the cities of Guayaquil and Quito, or the Galápagos Islands (Map 2-11).

*The CDC vaccination recommendation for Esmeraldas Province differs from that published on the WHO International Travel and Health website.

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