FACTSHEET TRAVELLING WITH CHILDREN



Key aspects briefly summarized

- Recommendations and precautionary measures always apply to the entire family, immunisation status should be upto-date and completed according to planned destination and activities.
- Take prevention measures against malaria and other mosquito-borne infections by use of repellents, insecticide-treated clothes and bednets, drugs for malaria prophylaxis if visiting malaria high risk areas.
- Children need particular attention, especially to avoid accidents (water, road, animals, etc.).
- Take a first-aid-kit for treatment of small wounds, insect bites, dehydration, fever (incl. thermometer).

When travelling with children, all recommendations and precautionary measures apply to the entire family. Particular attention should be paid to risks near or in the water, when playing, near road traffic, and from animal bites. Accidents are possible everywhere and can happen quickly!

Air travel

Healthy children can fly from the age of one week onward. A pediatrician should be consulted in case of chronic illness. To avoid ear-pain due to pressure differences during takeoff and landing, infants should be breastfeed or given a bottle. Older children may chew gum. If necessary, use decongestant nose drops. Check conditions and offers for children with the airline early, especially for long-distance flights. Take preferred toys, drinks (buy at the airport after security check), and snacks in hand luggage!

Sunscreen

Avoid direct sun exposure whenever possible, especially during midday hours. Clothes, especially tightly knitted ones, provide efficient sun protection. Do not forget a sun hat (with broad rim) and sunglasses. Protect uncovered skin by regular application of sunscreen with SPF 30 or higher. For children <1 year of age, use sunscreen products with physical filter.

Mosquito protection / Malaria

Avoiding mosquito bites is crucial for prevention of malaria and other mosquito-borne infections. Apply repellents to exposed skin areas (DEET-containing products, from 2 months of age) and treat clothes with insecticide (except if the child puts the clothes in the mouth). Always sleep under a mosquito net. Talk to the child's pediatrician in case a trip to a malaria endemic area is planned. Risk-based prescription of drugs for malaria prophylaxis is possible from a body weight of 5 kg.

Vaccinations

All recommended vaccinations should be given according to the Swiss immunization schedule, as well as additional vaccinations depending on destination. There are age limits for travel vaccinations, e.g. yellow fever vaccination from 9 months of age. Rabies vaccination is often recommended for children, as there is a higher risk of exposure to animal bites that can be unrecognized, and because no treatment is available.

Diarrhea and vomiting

Consistent hand and food hygiene is essential. Breastfeed if possible. Diarrhea can quickly cause threatening fluid loss in babies and young children. Adequate fluid intake is therefore essential. Offer small amounts of liquids frequently, bring oral rehydrating solution (powder preparation) on the trip. Seek medical attention for severe fluid loss.

Fever

Seek immediate medical attention when fever occurs in infants and children when having visited a malaria endemic area, or if the child is in poor health. In case of fever without malaria exposure and a good health condition, seek medical attention if fever persists > 48h. Use oral paracetamol for reducing fever (20 mg/kg, max. 4x/day). Avoid suppositories, because they liquefy in warm temperatures.