

Japanese Encephalitis

What is Japanese Encephalitis?

Japanese Encephalitis (JE) is a viral infection spread by night time biting culex mosquitoes and occurs in many parts of Asia and Oceania. It is typically a disease found in rural areas especially where pig farming and rice growing occur together. Occasionally it can also occur in urban areas.

Most human infections with JE do not result in symptoms or present with non-specific flu-like symptoms. Of those who develop encephalitis approximately 30% die. In those who survive, it is estimated that 30-50% will develop long term neurological or psychiatric problems.

There is no specific treatment.

Young children, people over 55 years and pregnant women have a higher risk of developing serious illness if infected.

Disease risks:

In countries where Japanese encephalitis occurs, most culex mosquitoes will not be infected with the virus. The risk to most travellers to Asia is considered to be low, especially for short-term travellers visiting urban areas. The overall incidence of JE among travellers to Asia is estimated to be less than one case per 1 million travellers.

Effective mosquito bite avoidance particularly during dusk till dawn hours can reduce the risk of acquiring this disease, including:

- sleeping in rooms with close-fitting gauze over the windows and doors
- sleeping under a mosquito net that's been impregnated with insecticide
- covering up with long-sleeved tops, trousers and socks
- applying a good quality deet 50% insect repellent to exposed areas of skin.

Vaccine recommendations:

Consider the vaccine if you will be:

- Travelling for long periods usually 30 days or more especially in rural endemic areas during the transmission season for that country
- Living long term with prolonged stays in urban settings
- Travelling for less than one month in rural endemic areas, but your planned activities or an outbreak of Japanese encephalitis in the area, put you at particular risk

Your travel health advisor will advise you if vaccination is recommended for your trip.

Ixiaro vaccine Schedule For all those aged 2 months or older: 2 doses: Day 0 & 28.

For those aged between 18-65 years a rapid schedule of day 0 & 7 may be offered.

For those deemed high risk and travelling imminently days 0 & 7 and can be provided off licence with a private prescription, for those aged >2 months to <18 years and >65 years.

A first booster (3rd dose) should be considered if still at risk after 12-24 months (or 12 months if > 65).

A second booster (4th dose) is advised for those aged 18-65 years at 10 years after the first booster. No data available on boosters for younger or older age groups.

Side effects of Ixiaro include: headache, muscle aches and flu like symptoms.

For further information see:

<https://travelhealthpro.org.uk/disease/98/japanese-encephalitis>

<https://www.nhs.uk/conditions/japanese-encephalitis/>