

Cholera

Cholera is an infection that usually causes profuse watery diarrhoea; the majority of travellers are at low risk

Cholera is a disease, characterised by profuse, watery diarrhoea, caused by certain toxin-producing forms of the bacteria called *Vibrio cholera*. Cholera is transmitted by ingesting (eating and drinking) contaminated water or food. It is common in many low-income countries and is largely linked to poverty, bad sanitation and poor access to clean drinking water.

The risk of cholera for most travellers is extremely low. Activities that may increase risk include drinking untreated water or eating poorly cooked food (particularly seafood) in areas where outbreaks are occurring. Travellers living in unsanitary conditions, including humanitarian workers in disaster/refugee areas, are also at risk.

Cholera can be mild or occur without symptoms in healthy individuals. Symptoms include sudden, profuse, watery diarrhoea with associated nausea and vomiting. If untreated, cholera can rapidly lead to serious dehydration and shock; fifty percent of those with serious complications, die. With quick and effective treatment, risk of dying is less than one percent.

Prevention

Travellers can reduce their risk of being ill from cholera by ensuring good personal hygiene and following advice on preventing [food and water spread diseases](#).

Cholera vaccines

In the United Kingdom (UK) cholera vaccination is not recommended for most travellers. It is only advised for travellers whose activities or medical history put them at increased risk, including:

- Aid workers.
- Those going to areas of cholera outbreaks who have limited access to safe water and medical care.
- Those for whom vaccination is considered potentially beneficial (i.e. for those who do not fit into the above groups, but are still considered at higher risk).

There are two cholera vaccines available in the UK: **Dukoral**[®] and **Vaxchora**[®].

Dukoral[®] is an oral (drink), inactivated cholera vaccine that protects against *V. cholerae* serogroup O1.

Vaccine schedule (Dukoral)

Age range	Schedule	Duration of protection
Adults and children from 6 years	Two doses with an interval of at least 1 week but less than 6 weeks between them*	2 years

Age 2 to below 6 years	Three doses with an interval of at least 1 week but less than 6 weeks between them*	6 months
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***If more than 6 weeks have elapsed between doses the primary course should be restarted. If more than 2 years (or 6 months for children aged 2 to below 6 years of age) has elapsed since the last dose of vaccine, the primary course should be repeated.**

Further information about Dukoral® can be found in the [Summary of Product Characteristics \(SPC\)](#).

Vaxchora® is also an oral (drink) cholera vaccine that protects against *V. cholerae* serogroup O1.

Vaxchora® is a live vaccine (it contains live attenuated cholera bacteria) and is contraindicated for anyone who is immunosuppressed.

In the UK, it was given marketing authorisation (licensed) in 2020. The UK Joint Committee on Vaccination and Immunisation (JCVI) have agreed to include recommendations for use of Vaxchora® in an updated chapter of Immunisation against infectious disease (also known as 'the Green Book'), which will be published in due course.

Vaccine schedule (Vaxchora)

Age range	Schedule	Duration of protection
Adults and children from 2 years of age**	A single oral dose should be administered at least 10 days prior to potential exposure to <i>V. cholerae</i> O1	No data are available on revaccination interval

****The safety and efficacy of Vaxchora® in children less than 2 years has not been established.**

Further information about Vaxchora® can be found in the [Summary of Product Characteristics \(SPC\)](#).

Resources

- More detailed information can be found in our [cholera factsheet](#)
- [UKHSA: Immunisation against infectious disease. Cholera](#)
- [UKHSA: Guidance. The diagnosis, management and epidemiology of cholera](#)