



**YELLOW FEVER VACCINE
FACT SHEET FOR
HEALTH CARE WORKERS
IN BOTSWANA**



FS 739935



Promoting access to safe medicines

1. Indication

The yellow fever vaccine is used to prevent yellow fever, a viral hemorrhagic disease transmitted by infected mosquitoes (*Aedes* species).

- Provides protection against yellow fever illness, which can cause fever, jaundice, bleeding, organ failure, and death.
- A single dose generally provides long-lasting (often lifelong) immunity.
- Required for international travel to and from countries with risk of yellow fever transmission (International Health Regulations).

2. Administration

Age and Regimen (routine and travel-related use):

9 months and older	Single dose	Once only
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- A single dose is sufficient for routine immunisation and international certification.
- Booster doses are not routinely required, but may be considered in certain high-risk situations (e.g., immunocompromised individuals, outbreak response).

Route of administration:

- Subcutaneous injection (preferred).
- May also be given intramuscularly if necessary.
- Do not administer intravenously or intradermally.

Important: Always consult the vaccine information leaflet included with the product for detailed preparation and administration instructions.

3. Warnings and Precautions

Age-related risks:

- Infants <6 months: Contraindicated due to risk of encephalitis.
- Infants 6–8 months: Vaccinate only if risk of yellow fever is unavoidable.
- Adults ≥60 years: Increased risk of serious adverse events; vaccinate only if at high risk of exposure.
- **Pregnancy:** Generally avoided unless travel to high-risk areas is unavoidable.
- **Breastfeeding:** Avoid in lactating women, if possible, especially if the infant is <9 months old.
- **Immunocompromised individuals:** Contraindicated in severe immunosuppression (HIV/AIDS, chemotherapy, transplant patients).
- Recipients should be observed for at least 15 minutes post-vaccination.

4. Contraindications

Do not administer the yellow fever vaccine to individuals with:

- Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to any component (including egg proteins, gelatin).
- Infants younger than 6 months.
- Severe immunodeficiency (e.g., advanced HIV, organ transplant, malignancy on chemotherapy).
- Symptomatic HIV infection or CD4 count <200 cells/ μ L.
- Pregnancy (unless risk of exposure is very high).

5. Adverse Reactions

Common side effects:

- Fever, headache, muscle aches
- Mild rash
- Pain, redness, or swelling at injection site

Less common adverse events:

- Hypersensitivity reactions (rash, urticaria)

Serious but rare adverse events:

- Yellow fever vaccine-associated viscerotropic disease: multiple organ failure, very rare but life-threatening
- Yellow fever vaccine-associated neurotropic disease: encephalitis, Guillain-Barré syndrome, meningitis (rare)
- Severe allergic reactions (anaphylaxis)

6. Adverse Event Reporting in Botswana:

Health care workers are encouraged to report any suspected adverse events following immunisation (AEFI) to BoMRA. Reporting helps monitor vaccine safety and protect public health. Even if you are uncertain whether the vaccine caused the reaction, reporting ensures potential concerns are identified early.

Steps to report an AEFI:

1. Scan the QR code provided
2. Accept the terms and conditions
3. Complete the reporting form with all available information
4. Submit the form



Or contact:

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