

Health Requirements and Recommendations for Travelers to Saudi Arabia for Hajj – 1446H (2025)

The Ministry of Health in the Kingdom of Saudi Arabia issues this document to address health requirements and recommendations for visitors traveling to Saudi Arabia for the purposes of Hajj, or seasonal works in Hajj areas¹ during 1446H (2025).

1 Capability and Diseases Affecting Public Health:

The Ministry of Health requires that pilgrims must be free of illnesses that would interfere with their capacity to safely conduct the Hajj. These include the following illnesses that typically impede pilgrims from carrying out the rituals:

- Failure of a major organ (advanced kidney failure requiring dialysis, advanced heart failure with symptoms at rest or on minimal physical effort, chronic lung diseases requiring intermittent or continuous oxygen use, advanced liver cirrhosis accompanied by signs of liver failure).
- Severe neurological and psychiatric disorders that impair cognition or are accompanied by severe physical disabilities.
- Senility accompanied by dementia.
- Pregnancy in the last two months or high-risk pregnancy at any stage.
- Active infectious diseases that pose a public health risk especially in crowded settings (such as open pulmonary tuberculosis and hemorrhagic fevers).
- Active cancer patients on chemotherapy or other therapies that severely suppress the immune system.

2 Required vaccinations.

Vaccine	Target Group	Approved Vaccine
Meningococcal meningitis	All the pilgrims	<ol style="list-style-type: none"> 1. The polysaccharide vaccine (ACYWX), or the polysaccharide vaccine (ACYW-135), provided that the period since receiving the vaccine is not less than (10) days and does not exceed (3) years. 2. The quadrivalent conjugate vaccine (ACYW-135), provided that the period since receiving the vaccine is not less than (10) days and does not exceed (5) years. <ul style="list-style-type: none"> • Health authorities at the pilgrims' country of origin should ensure their vaccination within the required validity period and make sure that the type of vaccine and its date is clearly shown in the vaccination certificate. If the vaccine type is not indicated on the certificate, it will be considered valid for 3 years only.

¹ Makkah (the Holy City), Madinah, Jeddah and Taif

²Current evidence suggests that conjugate vaccines are safe and effective for those above 55 years of age.

³ it is recommended to get (bOPV) or (IPV) dose within the previous 12 months and administered not less than 4 weeks prior to arrival.

⁴ it is recommended to get (OPV) dose within the previous 6 months and administered not less than 4 weeks prior to arrival.

SARS-CoV-2 - Coronavirus (COVID-19)	<p>Pilgrims with any of the following conditions:</p> <ul style="list-style-type: none"> - Age over 65 years - Pregnant women - Chronic heart diseases - Chronic respiratory diseases - Chronic kidney failure - Hereditary blood disorders (sickle cell anemia, thalassemia) - Congenital or drug-induced immunodeficiency, or cancer - Chronic neurological diseases 	<p>Proof of Immunization Against COVID-19 Includes at Least One of the Following:</p> <ol style="list-style-type: none"> 1. A single dose of the updated COVID-19 vaccines for the 2024-2025 season, or 2. Completion of the primary vaccination series (two or more doses received during the years 2021 to 2023), or 3. Laboratory-confirmed recovery from a COVID-19 infection during the year 2024.
Poliomyelitis	All travelers from countries where wild poliovirus or circulating vaccine-derived poliovirus (cVDPV1) or (cVDPV3) is present (Annex 1 – Table 1).	At least one dose of bivalent oral polio vaccine (bOPV) or inactivated polio vaccine (IPV) ³
Poliomyelitis	All travelers from countries that have reported positive results for circulating vaccine-derived poliovirus (cVDPV2) in human samples, or an Acute Flaccid Paralysis (AFP) case (Annex 1 – Table 2).	At least one dose of the inactivated polio vaccine (IPV), and if (IPV) is not available, proof of at least one dose of the oral polio vaccine (OPV) ⁴ containing the type 2 poliovirus (including the novel OPV2).
Yellow Fever	All travelers over 9 months of age from countries and regions where yellow fever is endemic (Annex 2).	Yellow Fever vaccine. The Yellow Fever vaccination certificate is valid for life starting 10 days after vaccination.

3 Recommended vaccinations:

Vaccine	Target Group	Approved Vaccine
SARS-CoV-2 - Coronavirus (COVID-19)	All pilgrims who are not part of the above-mentioned categories.	Immunized according to the updated roadmap from the World Health Organization (SAGE) for COVID-19 vaccines. https://www.who.int/publications/i/item/WHO-2019-nCoV-Vaccines-SAGE-Prioritization-2023.1
Seasonal Influenza	All pilgrims	Updated seasonal influenza vaccines for the 2024-2025 season.
Poliomyelitis	All travelers from countries that have reported positive results for circulating vaccine-derived poliovirus (cVDPV2) in environmental samples (Annex 1 – Table 3).	At least one dose of the inactivated polio vaccine (IPV), and if (IPV) is not available, proof of at least one dose of the oral polio vaccine (OPV) ⁴ containing the type 2 poliovirus (including the novel OPV2).

¹ Makkah (the Holy City), Madinah, Jeddah and Taif

² Current evidence suggests that conjugate vaccines are safe and effective for those above 55 years of age.

³ it is recommended to get (bOPV) or (IPV) dose within the previous 12 months and administered not less than 4 weeks prior to arrival.

⁴ it is recommended to get (OPV) dose within the previous 6 months and administered not less than 4 weeks prior to arrival.

4 Preventive Measures by Health Authority at Points of Entry

Preventive Measure	Targeted Countries
The health authorities in the Kingdom of Saudi Arabia may decide to administer an antibiotic for meningococcal bacteria at entry points based on a risk assessment.	Countries experiencing outbreaks of <i>Neisseria meningitidis</i> , as well as countries at risk of such outbreaks, and those where outbreaks of non-vaccine strains of <i>Neisseria meningitidis</i> occur (Annex 3).
The health authorities in the Kingdom of Saudi Arabia may decide to administer a single dose of the bivalent oral polio vaccine (bOPV) at entry points based on a risk assessment.	Countries where wild poliovirus or vaccine-derived poliovirus (cVDPV1 or cVDPV3) is circulating (Annex 1 – Table 1), regardless of age or previous vaccination history.
Present a valid certificate proving that disinfection has been carried out according to international health regulations. The Ministry of Health has the right to subject any means of transportation to health inspection to ensure it is free of disease vectors.	All aircraft, ships, and other means of transportation arriving from countries and regions affected by yellow fever, Zika virus, and/or dengue fever (Annex 2, Annex 4).
The health authorities in the Kingdom of Saudi Arabia apply health screening procedures for diarrhea cases and conduct rapid cholera testing when necessary, as well as administer preventive prophylactic treatment when required.	Travelers coming from countries affected by cholera outbreaks.

5 General Health Recommendations and Guidelines

The Ministry of Health recommends that pilgrims, especially those with chronic diseases, ensure they carry documents that confirm their health condition, along with an adequate supply of the medications they take, which should remain in their original packaging.

The Ministry of Health recommends that pilgrims update their vaccinations against essential diseases, such as diphtheria, tetanus, whooping cough, polio, measles, chickenpox, and mumps, in addition to the mandatory vaccines mentioned above.

5.1 Acute Respiratory Infections

Pilgrims are advised to follow the following health guidelines:

- Wash hands with soap and water or a disinfectant, especially after coughing and sneezing.
- Use disposable tissues when coughing or sneezing and dispose of used tissues in wastebaskets.
- Wear masks while performing the rituals and in crowded places.
- Avoid contact with those who appear ill and avoid sharing their personal belongings.
- Avoid visits and contact with camels in farms, markets, or barns.

5.2 Food and Water-Borne Diseases

Pilgrims are advised to follow the following health guidelines:

- Ensure hand hygiene before and after eating, after using the restroom, before preparing and eating food, and after handling animals.
- Make sure to wash fresh vegetables and fruits thoroughly.
- Cook food properly and store it at safe temperatures.
- Avoid eating exposed cooked food or food stored outside the refrigerator.
- Avoid drinking unpasteurized milk or consuming raw meat or animal products that have not been properly cooked.

5.3 Heat-Related Conditions

Travelers coming for Hajj, especially the elderly, are advised to avoid direct exposure to sunlight and to drink sufficient amounts of fluids. The Ministry of Health also recommends that countries sending pilgrims educate them and provide them with information on how to prevent heat stress. Pilgrims who take medications that may exacerbate dehydration (such as diuretics) are advised to consult their treating physician before arriving in the Kingdom.

5.4 Zika Virus Disease and Dengue Fever:

Pilgrims are recommended to take necessary measures to avoid mosquito bites during the day and evening, which include wearing protective clothing (preferably light-colored) that covers as much of the body as possible; using physical barriers such as window screens and closed doors; and applying insect repellent (as per the label instructions on the product) to skin or clothing that contains (DEET), (IR3535) or (Icaridin).

6 Responding to International Health Events

In the case of a public health emergency of international concern, or in the case of any event subject to notification under the International Health Regulations (2005), the Ministry of Health will undertake all additional necessary measures in consultation with the WHO.

Appendix 1:

Table 1: Countries with Wild Poliovirus or Vaccine-Derived Poliovirus (cVDPV1, cVDPV3) at the Time of Preparation of This Document:

Wild Poliovirus (WP1): Afghanistan, Pakistan

Vaccine-Derived Poliovirus (cVDPV1): Mozambique, Democratic Republic of the Congo

Vaccine-Derived Poliovirus (cVDPV3): Guinea

Table 2: Countries that have reported positive results for Vaccine-Derived Poliovirus (cVDPV2) in human samples or an Acute Flaccid Paralysis (AFP) case, and require proof of vaccination for travelers from these countries at the time of preparation of this document:

Africa: Angola, Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Ethiopia, Guinea, Kenya, Liberia, Mali, Mauritania, Niger, Nigeria, Republic of the Congo, Sierra Leone, Somalia, South Sudan, Tanzania

Others: Indonesia, Palestine, Yemen

Table 3: Countries that have reported positive results for Vaccine-Derived Poliovirus (cVDPV2) in environmental samples, and travelers are advised to get vaccinated at the time of preparation of this document:

Africa: Algeria, Angola, Chad, Côte d'Ivoire, Djibouti, Egypt, Equatorial Guinea, Ethiopia, Ghana, Gambia, Kenya, Liberia, Mozambique, Niger, Nigeria, Senegal, Sierra Leone, Somalia, South Sudan, Sudan, Uganda, Zimbabwe

Others: Palestine, Spain, Yemen

Appendix 2:

Countries and regions where yellow fever is endemic according to the World Health Organization's International Travel Guide at the time of preparation of this document.

Africa: Angola, Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone, South Sudan, Sudan, Togo, Uganda.

The Americas: Argentina, Bolivia, Brazil, Colombia, Ecuador, French Guiana, Guyana, Panama, Paraguay, Peru, Suriname, Venezuela.

Appendix 3:

Countries experiencing outbreaks of *Neisseria meningitidis* and countries at risk of such outbreaks at the time of preparation of this document.

Africa: Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Côte d'Ivoire, Democratic Republic of the Congo, Eritrea, Ethiopia, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Mali, Mauritania, Niger, Nigeria, South Sudan, Rwanda, Senegal, Sudan, Tanzania, Togo, Uganda.

Appendix 4:

Countries where transport operators are required to present a valid certificate proving the disinfection of disease vectors (*Zika* and/or *Dengue*) in accordance with the International Health Regulations at the time of preparation of this document:

Africa: Angola, Benin, Burkina Faso, Cape Verde, Cameroon, Central African Republic, Côte d'Ivoire, Djibouti, Egypt, Eritrea, Ethiopia, Gabon, Ghana, Guinea, Kenya, Liberia, Mali, Mauritania, Mauritius, Niger, Nigeria, São Tomé and Príncipe, Senegal, Somalia, Sudan, Seychelles, Togo, Uganda.

The Americas: Anguilla, Antigua and Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Bonaire, Brazil, British Virgin Islands, Cayman Islands, Colombia, Costa Rica, Cuba, Curacao, Dominica, Dominican Republic, Ecuador, El Salvador, French Guiana, Grenada, Guadeloupe, Guatemala, Guyana, Haiti, Honduras, Easter Island, Jamaica, Martinique, Mexico, Montserrat, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Barthélemy, Saint Kitts and Nevis, Saint Lucia, Saint Martin, Saint Vincent and the Grenadines, Sint Eustatius and Saba, Suriname, Trinidad and Tobago, Turks and Caicos Islands, U.S. Virgin Islands, Venezuela.

Asia: Bangladesh, Cambodia, Cook Islands, French Polynesia, Fiji, India, Indonesia, Laos, Maldives, Malaysia, Marshall Islands, Micronesia, Myanmar, Palau, Papua New Guinea, Philippines, Samoa, Singapore, Solomon Islands, Sri Lanka, Thailand, Tonga, Vanuatu, Vietnam.