

Top Tips for Mosquito Bite Avoidance

Bite avoidance aids in the prevention of insect-borne diseases, such as malaria and Zika.

FOR MALARIA PREVENTION, REMEMBER **A B C D**

Awareness of risk

Countries have different malaria risks and it's important that you're aware of this risk before travelling. Your risk for some countries will depend on any medical conditions you may have, your age, whether you're pregnant/breastfeeding, and your trip length and duration.

Bite avoidance

1. Repellents – Use DEET at concentrations between 20-50%. DEET at 50% lasts up to 12 hours. DEET is suitable in the second and third trimester of pregnancy and when breastfeeding, as well as in children over two months old (check the packaging of the repellent). When both DEET and sunscreen are required, use SPF 30-50 **first** and apply DEET **after** sunscreen. Repellents containing icaridin (picaridin), as an alternative to DEET, should be at least 20% in concentration. Mosquitoes that spread malaria bite mainly from dusk to dawn, but other diseases are spread by daytime-biting mosquitoes; therefore, insect repellents should be used throughout the day and night.

Use biocides safely. Always read the label and product information before use.

2. Insecticides – For example, permethrin can be sprayed in a room to kill resting mosquitoes.

3. Environment – Ensure you're sleeping somewhere with effective air conditioning and screening on windows and doors. If not, sleep under a mosquito net that's been treated with insecticide. Mosquito nets should be free of tears and tucked into the mattress.

4. Clothing – Wear light, loose-fitting trousers, socks, and long-sleeve tops, especially at night when most malaria-carrying mosquitoes bite.

Chemoprophylaxis (antimalarial medicines)

These are the medicines used to help prevent malaria. They are not 100% effective, but when taken as advised, antimalarials are very successful. It's important to take them exactly as recommended and for the right duration. Make sure you read the leaflet before taking your antimalarials.

Diagnosis

Suspected malaria is a medical emergency. You must seek medical help straight away if you experience flu-like symptoms such as fever, sweating or chills, muscle pain or tenderness, malaise (a general feeling of discomfort), headache, diarrhoea, or cough. Be aware of these symptoms during your trip, and even several weeks, months, or up to a year after you return.

MYTHS - There is **no evidence** to support the following remedies as repellents:

- Herbal remedies or homeopathy
- Vitamin B1 or B12
- Garlic or savoury yeast extract spread
- Heavy metal music
- Tea tree oils, bath oils, citronella oil
- Alcohol
- Electronic 'buzzers'

Useful resources

This factsheet isn't intended to cover everything you need to consider before your trip. Be sure to get a travel consultation before you go and take steps to prevent mosquito bites. Here are some useful websites:

<https://travelhealthpro.org.uk/factsheets>

<https://travelaware.campaign.gov.uk>

<https://www.nhs.uk/livewell/travelhealth/Pages/Travelhealthhome>

<https://www.nhsinform.scot/healthy-living/travel-health/travel-health-and-vaccinations>