



VACCINATION AGAINST CHIKUNGUNYA –

Recommendation of the Swiss Expert Committee for Travel Medicine as of 06 November 2025

Two chikungunya vaccines have been licensed in Europe: **Vimkunya®** (virus-like particle vaccine, licensed in 2025) and **Ixchiq®** (live-attenuated vaccine, licensed in July 2024). Neither vaccine is licensed in Switzerland; use in Switzerland is therefore off-label. Consultation with a travel or tropical medicine specialist is advised.

General considerations:

In Switzerland, chikungunya is rare among travellers, except during outbreaks. Severe disease may occur in the elderly, immunocompromised individuals, or those with serious underlying conditions.

Recommendation:

Pending market authorization in Switzerland, the Swiss Expert Committee for Travel Medicine provides the following recommendations for chikungunya vaccination:

1. Chikungunya vaccination is **recommended for**:
 - Persons aged 12 years and older travelling to an area with a **chikungunya outbreak** (see [current outbreaks list of US CDC](#)).
 - Laboratory workers who might be exposed to the virus.
2. Chikungunya vaccination may be **considered for**:
 - Persons aged 12 years and older travelling or moving to an area with elevated risk for chikungunya (see list of [countries with elevated risk of US CDC](#)) if planning to **stay for an extended period of time or repeated stays** (for example, cumulative period of 3 months or more).

Vaccine considerations (off-label use!):

- **Vimkunya® vaccine**: can be used in persons aged 12 years and older.
 - **Contraindications**: hypersensitivity to any of the vaccine components.
- **Ixchiq® vaccine**: should be used only with caution in immunocompetent persons aged 12 -59 years weighing risks and benefits due to potentially serious adverse events, see [NaTHNaC LINK](#) and EpiNews.
 - **Contraindications**: i) hypersensitivity to any of the vaccine components; ii) immunocompromised individuals; iii) pregnant women (though official wording in EMA is “not recommended”).

Special populations:

- **Pregnancy / breastfeeding**: advise against travelling as also regions with frequent co-circulation of other mosquito-borne infections (e.g. Zika, dengue, yellow fever, malaria etc.) and weigh risk-benefit. If vaccination is considered, Vimkunya® vaccine is recommended.
- **Immunocompromised hosts and elderly** (above 60 years): Vimkunya® would be the vaccine of choice.

For side effects and other details, see EMA authorization for [Ixchiq®](#) and [Vimkunya®](#). A SOP will be soon available on the PRO version of www.healthytravel.ch.

Epidemiological background:

Chikungunya virus (CHIKV) causes an infection spread to humans predominantly through the bite of infected Aedes mosquitoes, which are typically active during the daytime (in particular after sunrise and at dusk). CHIKV typically circulates in tropical and subtropical regions of Asia, Africa, Latin America and the Caribbean where Aedes mosquitoes have a wide distribution. In 2025, outbreaks occurred in La Réunion and other countries in the Indian Ocean (for updates see [current outbreaks list of US CDC](#)). Some countries are considered as having an [elevated risk for chikungunya infection](#).

In recent years, Aedes mosquitos have also been found in parts of Europe (France, Italy and Spain) and the United States. In 2024 and 2025, these countries experienced local transmission clusters in the summer months among persons without travel history ([ECDC LINK](#)).

Symptoms and prevention: see [factsheet chikungunya](#).