Swiss Society for Tropical and Travel Medicine
Société Suisse de Médecine Tropicale et de Médecine des Voyages
Società Svizzera di Medicina Tropicale e dei Viaggi
Swiss Society of Tropical and Travel Medicine

Expertenkomitee für Reisemedizin
Comité d'experts pour la médecine des voyages
Comitato di esperti per la medicina di viaggio
Expert committee for travel medicine

VACCINATION AGAINST CHIKUNGUNYA –
Recommendation of the Swiss Expert Committee for Travel Medicine as of June 2026

Two chikungunya vaccines have been licensed in Europe: **Vimkunya®** (virus-like particle vaccine, a non-live vaccine, licensed by EMA and FDA in 2025) and **Ixchiq®** (live-attenuated vaccine, licensed by EMA and FDA in July 2024). Ixchiq® is not liscensed in Switzerland. For Ixchiq®, the company withdrew submission to FDA in 2026 after FDA suspended license in 2025; EMA has issued safety concerns in 2026, see LINK. If considering Ixchiq® vaccine, consultation with a travel or tropical medicine specialist is advised. Vimkunya® received Swissmedic approval in April 2026.

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. Chronic arthralgia/arthritis may occur in 20-30% of patients, varying depending on epidemics studied.

Recommendation:

The Swiss Expert Committee for Travel Medicine recommends an individualized approach to chikungunya vaccination, balancing the estimated risk of exposure against the cost of vaccination. The risk of exposure should be assessed based on the epidemiological situation at the destination, the duration and frequency of travel. **The recommendations apply exclusively to Vimkunya®.**

1. Chikungunya vaccination **is recommended for:**
   - Persons aged 12 years and older travelling to an area with a **chikungunya outbreak** (see current outbreaks list at www.healthytravel.ch) for **any** duration of travel.
   - Laboratory personnel with potential occupational exposure to chikungunya virus.
2. Chikungunya vaccination **may be recommended for:**
   - Persons aged 12 years and older travelling or moving to an area with **elevated risk** for chikungunya (see list of countries at www.healthytravel.ch) if planning to **stay for an extended period of time or repeated stays** (e.g. cumulative time >1 month).

Vaccine considerations:

- **Age:** Vimkunya® vaccine can be used in persons aged 12 years and older.
- **Contraindications:** hypersensitivity to any of the vaccine components.

Special populations:

- **Pregnancy / breastfeeding:** advice against travelling. This is particularly important because chikungunya-endemic regions frequently experience co-circulation of other mosquito-borne infections, including Zika, dengue, yellow fever, and malaria. If travel is unavoidable, vaccination with Vimkunya® may be considered following an individual risk–benefit assessment. Although this population was not studied in clinical trials, no specific safety concerns are anticipated.
- **Immunocompromised hosts and elderly** (above 60 years): Vimkunya® is a non-live vaccine and can therefore be given to this vulnerable population.

For side effects and other details, see Swissmedic authorization for Vimkunya® and EMA documents. A Standard Operating Procedure (SOP) for Vimkunya® is 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 occurs in unpredictable very rapidly evolving regional epidemics in tropical and subtropical regions of Asia, Africa, Latin America and the Caribbean - often followed by several interepidemic years. In 2025, outbreaks occurred in La Réunion and other countries in the Indian Ocean (for updates, see current outbreaks list at HealthyTravel. 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.