# Travel-linked chikungunya cases in England treble as vaccines become available



Holidaymakers have been urged to take mosquito-bite precautions after a sharp rise in travel‑associated chikungunya infections reported in England this year. According to the UK Health Security Agency’s surveillance for January to June 2025, 73 cases were recorded in England over that period, up from 27 in the same months of 2024, with most infections linked to recent travel to Sri Lanka, India and Mauritius and concentrated in London. The agency says there is currently no risk of onward transmission in the UK because the two Aedes mosquito species that spread the virus are not established here.

The increase in cases in England sits against a backdrop of substantial global activity. European and international public‑health monitoring puts the total number of chikungunya cases in 2025 in the low hundreds of thousands, with large outbreaks across the Americas and the Indian Ocean — notably Réunion and Mayotte — and sizable rises in parts of Asia. China has also reported thousands of locally acquired infections in Guangdong province, where local authorities and health teams have moved to detect cases and limit mosquito breeding.

Public‑health bodies warn the pattern seen in Europe is partly driven by infected travellers arriving from affected areas. The European Centre for Disease Prevention and Control notes that importation, together with the presence of competent Aedes vectors in parts of southern Europe, increases the risk of local transmission and has documented a small number of locally acquired cases this year in the EU. That said, UK agencies continue to assess the immediate risk to the British mainland as low.

Clinically, chikungunya typically presents with an abrupt fever and intense joint pain — the symptom that gave the disease its name — often accompanied by rash, muscle pain, headache, nausea and fatigue. For most people symptoms resolve in days to weeks, but joint pain can persist for months or longer in some cases, and newborns, older adults and people with underlying health conditions face a higher risk of severe disease. Once recovered, people are usually immune to reinfection.

There is now a medical countermeasure available in the UK. The Medicines and Healthcare products Regulatory Agency approved a live‑attenuated chikungunya vaccine, IXCHIQ, for adults in February 2025 and later authorised a second vaccine, Vimkunya, for use from age 12 in May 2025. The regulator said the authorised products are prescription‑only, elicit strong antibody responses in trials and will be subject to ongoing safety monitoring; it also listed common, generally transient side‑effects such as injection‑site reactions, fever and changes in blood counts. These approvals underpin a move towards targeted prevention, rather than universal vaccination, and clinicians are advised to consult national guidance and consider individual risk when recommending immunisation.

Public‑health advice remains focused on avoiding mosquito bites. “Simple steps, such as using insect repellent, covering exposed skin and sleeping under insecticide‑treated bed nets, can effectively reduce the risk,” Hilary Kirkbride, head of travel health at the UKHSA, told The Independent. Travel medicine specialists echo that prevention is multifaceted: Dr Richard Dawood, a travel medical specialist at Fleet Street Clinic, told The Independent that the arrival of vaccines is “an extra tool in the armoury” and that for frequent travellers or those likely to make repeat journeys to regions with ongoing transmission, vaccination may be worth considering.

How travellers should act will depend on their itinerary and personal risk. Public‑health and travel‑medicine advisers recommend people travelling to areas with active outbreaks — or those who anticipate repeated travel to such regions over coming years — to seek tailored advice from a travel clinic, check up‑to‑date guidance such as TravelHealthPro, and discuss whether a prescription vaccine is appropriate. For most short, one‑off trips to low‑risk parts of Europe the immediate risk remains small, but the calculus changes if visiting outbreak hotspots.

Responses where the virus is circulating have combined clinical surveillance and mosquito control. In China’s Foshan city public‑health teams reported rapid case detection, laboratory confirmation and an intensive vector‑control response, while other jurisdictions have imposed broader containment measures. The ECDC has urged enhanced surveillance and vector control across Europe to reduce the likelihood that imported infections will seed local transmission.

For now, UK health authorities continue to emphasise prevention and proportionate monitoring: check official travel health advice before you go, use proven bite‑avoidance measures, and consult a clinician about vaccination if you are travelling to a country with current chikungunya activity or have individual risk factors that would make disease more serious.

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* Paragraph 1 – [[1]](https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html), [[3]](https://www.gov.uk/government/publications/travel-associated-infections/travel-associated-infections-in-england-wales-and-northern-ireland-january-to-june-2025)
* Paragraph 2 – [[1]](https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html), [[6]](https://www.ecdc.europa.eu/en/chikungunya-monthly), [[7]](https://weekly.chinacdc.cn/en/article/doi/10.46234/ccdcw2025.172)
* Paragraph 3 – [[3]](https://www.gov.uk/government/publications/travel-associated-infections/travel-associated-infections-in-england-wales-and-northern-ireland-january-to-june-2025), [[6]](https://www.ecdc.europa.eu/en/chikungunya-monthly), [[1]](https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html)
* Paragraph 4 – [[1]](https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html), [[3]](https://www.gov.uk/government/publications/travel-associated-infections/travel-associated-infections-in-england-wales-and-northern-ireland-january-to-june-2025)
* Paragraph 5 – [[4]](https://www.gov.uk/government/news/ixchiq-vaccine-approved-to-protect-adults-against-chikungunya), [[5]](https://www.gov.uk/government/news/vimkunya-vaccine-approved-to-prevent-disease-caused-by-the-chikungunya-virus-in-people-12-years-of-age-and-older)
* Paragraph 6 – [[1]](https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html), [[3]](https://www.gov.uk/government/publications/travel-associated-infections/travel-associated-infections-in-england-wales-and-northern-ireland-january-to-june-2025)
* Paragraph 7 – [[1]](https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html), [[4]](https://www.gov.uk/government/news/ixchiq-vaccine-approved-to-protect-adults-against-chikungunya), [[5]](https://www.gov.uk/government/news/vimkunya-vaccine-approved-to-prevent-disease-caused-by-the-chikungunya-virus-in-people-12-years-of-age-and-older)
* Paragraph 8 – [[7]](https://weekly.chinacdc.cn/en/article/doi/10.46234/ccdcw2025.172), [[1]](https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html), [[6]](https://www.ecdc.europa.eu/en/chikungunya-monthly)
* Paragraph 9 – [[3]](https://www.gov.uk/government/publications/travel-associated-infections/travel-associated-infections-in-england-wales-and-northern-ireland-january-to-june-2025), [[1]](https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html)

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## Bibliography

1. <https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html> - Please view link - unable to able to access data
2. <https://www.independent.co.uk/travel/news-and-advice/chikungunya-virus-uk-symptoms-travel-advice-b2809382.html> - The Independent article reports a rise in travel-associated chikungunya cases in England, noting 73 cases between January and June 2025 compared with 27 in the same period in 2024. Most infections were linked to travel to Sri Lanka, India and Mauritius, and cases were concentrated in London. It summarises symptoms — sudden fever, severe joint pain, rash and fatigue — and explains transmission by Aedes mosquitoes. The piece highlights vaccine availability in the UK, travel precautions such as repellents and nets, advice from UKHSA and travel clinics, and quotes travel medicine specialists urging targeted vaccination for frequent travellers to at-risk regions.
3. <https://www.gov.uk/government/publications/travel-associated-infections/travel-associated-infections-in-england-wales-and-northern-ireland-january-to-june-2025> - The UK Health Security Agency's report 'Travel-associated infections in England, Wales and Northern Ireland: January to June 2025' documents 73 chikungunya cases in EWNI during that period, a rise from 27 in 2024. It details case demographics and travel histories — most linked to travel to Sri Lanka, India and Mauritius — and states all cases occurred in England, with London reporting the majority. The report describes clinical features, transmission by Aedes mosquitoes, and notes there is currently no risk of onward transmission in the UK because the key mosquito vectors are not established. It advises mosquito-bite prevention for travellers.
4. <https://www.gov.uk/government/news/ixchiq-vaccine-approved-to-protect-adults-against-chikungunya> - The Medicines and Healthcare products Regulatory Agency announced approval of the live-attenuated chikungunya vaccine IXCHIQ on 4 February 2025 for adults aged 18 years and older. The press release explains the vaccine contains a weakened form of the virus that cannot multiply, is given as a single dose by prescription, and generated strong antibody responses in clinical trials with high seroconversion maintained at two years. It lists common adverse effects including transient blood count changes, fever and injection-site reactions, and emphasises ongoing safety monitoring. The approval supports preparedness against potential further spread of chikungunya UK and international public health responses.
5. <https://www.gov.uk/government/news/vimkunya-vaccine-approved-to-prevent-disease-caused-by-the-chikungunya-virus-in-people-12-years-of-age-and-older> - The MHRA announced on 1 May 2025 that Vimkunya, a chikungunya vaccine by Bavarian Nordic, received a marketing authorisation variation to extend use to people aged 12 years and older. The notice explains the vaccine reduces risk of chikungunya disease and will be prescription-only. It details that regulatory assessment confirmed safety, quality and efficacy standards and that product information and patient leaflets will be published on the MHRA products site. The statement also stresses ongoing pharmacovigilance and that clinicians should consult official guidance when considering vaccination for travellers to areas with active chikungunya transmission and individual clinical risk assessment recommended.
6. <https://www.ecdc.europa.eu/en/chikungunya-monthly> - The European Centre for Disease Prevention and Control's chikungunya overview (June 2025 update) summarises global and regional activity, reporting roughly 220,000–240,000 cases and multiple deaths across several countries in 2025. It highlights large outbreaks in the Americas and the Indian Ocean, including extensive transmission in Réunion and Mayotte, and rising cases in Asia. The ECDC emphasises that importation by infected travellers and presence of competent Aedes vectors increases the risk of local transmission in Europe. It recommends enhanced surveillance, vector control, and traveller advice, and provides data on locally acquired cases in EU countries to inform public health responses nationally.
7. <https://weekly.chinacdc.cn/en/article/doi/10.46234/ccdcw2025.172> - China CDC Weekly reports an outbreak of chikungunya fever in Foshan City, Guangdong Province in July 2025, documenting thousands of confirmed cases concentrated in Shunde District. The field note describes epidemiology, clinical features and laboratory confirmation by RT‑PCR, noting peak daily reports in mid‑July and no severe illness or deaths among early cases. Genomic analysis identified strains belonging to the ECSA genotype. The report outlines public health responses including active case detection, vector control measures, targeted insecticide spraying, installation of bed nets and enhanced surveillance to interrupt transmission and protect vulnerable populations and community engagement to reduce breeding sites rapidly.