# **Destination Guide for Denmark**



## **Overview**

# **Destination Guide Content**

## **Destination Risk Levels**

- Low Medical Risk for Denmark
- Insignificant Travel Risk for Denmark
- LowTravel Risk for Copenhagen

# Copenhagen: LOW

The crime rate is higher in Copenhagen than in less-populated areas. Travellers should take precautions against street crime and petty theft, particularly at the city's main railway station and transport hubs. The capital is the most likely site of any prospective terrorist attack, due to the concentration of targets, thereby necessitating higher levels of vigilance in public areas. Avoid public protests, even if they appear peaceful, and maintain a degree of situational awareness of the social-cultural environment during your travels. In addition, Copenhagen has a significant Muslim population, and the city may witness protests by Islamic groups in response to the perceived Islamophobia within the Danish society and its institutions.

# **Standing Travel Advice**

- Travel to Denmark can continue with standard security precautions.
- Take basic security precautions against petty theft and street crime.
- There is an underlying threat of terrorist attack by radical religious groups. Embassies, government buildings, transport hubs and public areas in the capital Copenhagen are among the more likely targets. Report any suspicious packages or behaviour to the authorities.
- Security alerts or hoaxes can trigger the short-notice evacuation of transport hubs or public locations, which can cause disruption. Follow all directives issued by the authorities during any security operation and do not act on the basis of unverified information.

# **Destination Guide for Denmark**



# **Before You Travel**

## **Destination Guide Content**

# **Visa Requirements**

# **IMMIGRATION REQUIREMENTS AND PROCEDURES**

## **British**

Passport Required Yes

Visa Required No/3

Return Ticket Required Yes

## **Australian**

Passport Required Yes

Visa Required No/2

Return Ticket Required Yes

## Canadian

Passport Required Yes

Visa Required No/2

Return Ticket Required Yes

#### **USA**

Passport Required Yes

Visa Required No/2

Return Ticket Required Yes

# **Entry/Exit Requirements**

## **Entry/Exit Requirements**

A comprehensive and detailed account of restrictions on goods that can be brought into the country can be found in the Danish Customs

Agency's website. Arms and ammunition without the permission of the police department, drugs without a doctor's prescription, fresh food, and personal consignments of milk and meat products from non-EU countries are among those not allowed.

# **Cultural Tips**

## **CULTURAL ISSUES AND ETIQUETTE**

## General tips

- Smoking is restricted on public transport and in some public buildings.
- It is illegal to conceal your face in public, including with balaclavas, fake beards, ski masks or full veils. Exceptions to the ban are permitted for health reasons. Violators could face fines of 1,000 krone (approx. \$153).
- There are no legal restrictions for LGBTQ individuals. Societal attitudes towards the LBGTQ community are tolerant and accepting. Violence is very rare.

# **Getting There**

#### **METHOD OF ARRIVAL**

#### By air

Copenhagen's Kastrup Airport (CPH), situated on the island of Amager, is the country's main international hub. Aarhus Airport (AAR) provides services to eastern, central and northern Jutland Island. Aalborg Airport (AAL) in Nørresundby serves the city of Aalborg; Billund (BLL), Sønderborg (SGD), and Esbjerg (EBJ) airports also receive short-haul international flights. Hans Christian Andersen Airport (ODE) in Odense operates seasonal flights between April and October. Bornholm Airport (RNN) on the island of Bornholm serves the town of Rønne and caters to scheduled flights to domestic destinations and several European cities. Heavy snowfall during winter months (October-March) can disrupt flights.

Security is good at all major airports. Pickpocketing and bag-snatching in

departure and arrival lounges pose a low risk.

Airlines have variable security standards. You may wish to consult the European Commission's website for a list of airlines banned within the EU and the US Federal Aviation Administration's website for a database of aviation accidents and statistics.

## By land

The country's geography can make car and rail travel to Copenhagen from the rest of Europe time-consuming, though a bridge allows overland travel to Copenhagen from the European mainland. The Øresund Bridge between Copenhagen and Malmö (Sweden) allows road travel between the two countries. The E45 motorway passes through Hamburg (Germany), running along the east coast of the Jutland peninsula, linking with the city of Aarhus. There are direct train connections from Copenhagen to many major European cities including Stockholm (Sweden), Oslo (Norway), Hamburg and Berlin (Germany), Amsterdam (Netherlands), Brussels (Belgium) and Paris (France).

## By sea

Denmark has an extensive network of safe and reliable ferry services within the islands as well as with other European countries such as Norway, Sweden, Germany, England and Poland. Hirtshals, Esbjerg, Frederikshavn and Copenhagen are the main ports.

# **Getting Around**

#### **BY AIR**

The standard of security and service on internal flights is excellent. However, the country's small size and the availability of alternative options mean that business travellers are unlikely to undertake internal air travel. National carrier Scandinavian Airlines (SAS) provides frequent flights between the cities of Copenhagen, Billund, Aalborg and Aarhus.

## **BY ROAD**

The road network is good and several international and local car hire companies provide services in main cities. A valid national driving license or an international driving permit is required. Traffic drives on the right and driving standards are high. Motorists should indicate change of lanes on motorways. Drivers must wear seatbelts and motorcyclists are required to wear helmets; vehicles, including motorcycles, must drive with low-beam headlights on at all times. A warning triangle is obligatory. All driving signs are international. Pedestrians and drivers are required to yield the right-of-way to cyclists in Denmark; when crossing streets, it is important to watch for traffic from cycle lanes, often located nearest to the curb.

The speed limit on motorways is approximately 81 miles per hour (130kph), though some stretches, clearly marked by road signs, retain a 69 mph (110kph) speed limit. Speed limits on most other roads vary between 43 mph and 50 mph (70-80kph), while the maximum speed is 31 mph (50kph) in built-up areas.

Business travellers should report all road traffic accidents to the police for insurance purposes. Strict penalties are imposed for drink-driving, speeding offences and use of mobile phones while driving, while police officers can levy on-the-spot fines and have the right to impound vehicles if no payment is made.

## **BY TAXI**

Taxis are safe and readily available in city centres. Foreign nationals should not use unlicensed minicabs. If in doubt, they should liaise with their hotel to arrange a taxi. Travellers can hail a taxi on the street or hire at taxi stands. Taxi drivers usually speak English. Available taxis will display the sign 'Fri' (free) and a green light. Taxis run by a meter and the price is fixed. Charges by kilometre are variable, according to the time of day. Passengers can request that drivers print a receipt with details of the journey. Rideshare apps are available and considered safe. These services are permitted to pick up fares from the airport and ferry terminals.

#### **BY TRAIN**

The railway network run by Danish State Railways (DSB) and Arriva is extensive and convenient. The extensive bridge network allows trains to travel unhindered between the major islands, including Zealand and Funen, and the Jutland peninsula. Food and drinks are on sale on most trains. Pickpockets, particularly targeting tourists, have been reported to operate on trains between Copenhagen and Malmo (Sweden). Luggage and backpacks should be kept in sight at all times.

Copenhagen has an extensive metro network, with trains departing from stations approximately every three minutes. It is the fastest way to get around the city. Train tickets can be purchased from kiosks at the stations and shopping centres.

#### **BY OTHER MEANS**

## By ferry

Car and passenger ferries operate between Bornholm (the easternmost area of Denmark, situated in the Baltic Sea), Funen, the Jutland peninsula, Zealand and ports in Sweden. A bridge allows overland travel between Fyn, Jutland and Zealand.

Ferries are safe, though business travellers should take precautions against petty crime. They offer efficient services and a good standard of cabin accommodation. Ferry services can be disrupted during the winter months (December-March) because of bad weather.

## By bus

Denmark has a good intercity bus network that connects most cities as well as more remote areas. However, trains are generally more convenient.

## **Business Women**

#### **BUSINESSWOMEN**

Danish society is egalitarian and tolerant, and women who operate in business and political circles face lower levels of gender discrimination than in other European countries. Female business travellers face no particular security risks, but – as in any other country – women should follow standard security precautions, particularly at night.

# **Working Week**

#### **WORKING WEEK**

- Working week: Monday-Friday.
- Working hours are flexible but some time between 06.00 and 18.00,
   Monday to Friday, with a 30-minute lunch break.
- Banking hours: 09.30/10.00 to 16.00, Monday-Wednesday and Friday. On Thursday, they are open until 17.00/17.30.

# **Language & Money**

## **LANGUAGE**

The official language is Danish. Most Danes speak good English, while other Western European languages such as German, French and Spanish are spoken by some.

#### **MONEY**

The Danish krone (plural: Kroner, DKK) is the national currency, and it is pegged to the euro. Major credit cards can be used in big shops, restaurants and hotels in Copenhagen and other main towns, but may not be accepted in rural areas. Also, some outlets may not accept foreign credit/debit cards, or their use may entail the payment of a fee; enquire about the accepted mode of payment first. All credit card transactions require the use of a PIN code rather than a signature. It is advisable to enquire about the same before the transaction.

Wages and prices are high by international standards. ATMs are widespread and are connected to international networks such as Visa, MasterCard and Cirrus. Currency should be exchanged at banks since they offer the best conversion rates. Be aware of the potential for credit card fraud when making purchases or withdrawing cash. Exercise prudence when extracting money from ATMs and check if any suspicious devices are attached to the machine or placed over the card slot.

# **Tipping**

#### **TIPPING**

Tipping is not necessary as a service charge is usually included in the bill.

# **Geography & Weather**

# **CLIMATE**

#### Climate overview

- The climate in Denmark is milder than those of neighbouring Scandinavian countries.
- The country has four distinct seasons: spring months (April-May) are mild, summer months (June-August) are warm, autumn months (September-November) are rainy and winter months (December-March) are cold, with frost and snowfall.
- Monitor the Danish Meteorological Institute website for weather updates.

## Heavy snowfall

• Winter weather tends to disrupt travel. However, the authorities are accustomed to, and equipped for, dealing with heavy snowfall.

#### **Storms**

- The country is susceptible to strong storms.
- Storms can disrupt air and overland travel, as well as essential services such as power supply.
- Heavy rain and storm surges can lead to severe flooding, as seen in December 2023, when storm Pia caused significant damage and disruption in the south-east.

## **GEOGRAPHY**

Denmark is part of Scandinavia, and located in northern Europe between the North Sea to the west and the Baltic to the south. The country includes the autonomous provinces of the Faroe Islands, and the almost uninhabited landmass of Greenland in the North Atlantic.

The main part of Denmark is the Jutland peninsula, which shares a border with Germany. The rest of the country consists of 406 islands, 78 of which are inhabited. Of these, the largest and most densely populated are Zealand, which hosts the capital Copenhagen, Funen and the north Jutland Island. Other major cities are Aarhus, Odense and Aalborg.

# **International Dialing & Power**

#### **DIALLING CODES**

Country Code 45

#### COMMUNICATIONS

Local pay telephones accept coins (kroner and euros) and telephone cards, which can be purchased at any post office. Some payphones may also accept credit cards. Mobile telecommunication networks operate on GSM 900MHz or GSM 1800MHz and coverage is generally good, LTE and 5G services are also widely available. The major network providers are Telenor, YouSee, Telia and Telmore. Short-term mobile telephone rental is possible, but is more expensive than using roaming services. All major hotels have internet, fax and telex facilities, and there are also internet services available at Copenhagen airport. The postal service is efficient and reliable, and mail sent within the country is usually delivered by the next working day. Letters sent to Europe reach their destination in two to four days. Courier companies such as FedEx and UPS are present in the country.

# Information Security

According to the Danish Defence Intelligence Service, cyberespionage aiming to steal Danish intellectual property and business secrets such as business plans, research results, technical knowhow, financial information and contracts is the most severe cyberthreat in the country. Both the Danish government and private companies are exposed to cyberespionage attacks, especially from foreign states. In late January 2023, Denmark raised the risk of cyberthreat from 'medium' to 'high' after the websites of its government, military and commercial banks were targeted allegedly by pro-Russian groups in a series of distributed denial-of-service attacks.

The biggest cyberincident in the country took place in 2017, when Danish transport and shipping giant AP Moller – Maersk was attacked with a NotPetya ransomware. The cyberattack hit vessels and disabling computer systems in various Maersk-run ports around the world, causing losses up to US\$300m. The attack resulted in the rapid increase in awareness and understanding from the government regarding cyberthreats.

Although regulations and legal protections on cybersecurity remain limited in Danish law, Denmark continues to be the most cybersecure nation in the world. Hacking, denial-of-service attacks, and destructive attacks on IT systems (malware, ransomware, spyware, worms, Trojans and viruses) are criminal offences punishable by a fine or imprisonment. Phishing is not criminalised, but is generally a part of another criminal offence such as data fraud.

#### **Advice**

- Minimise the number of devices you bring in-country and avoid carrying sensitive data with you.
- Log out of any social media accounts or potentially sensitive apps prior to your arrival in country. Avoid posting on social media when in-country or sharing details of your location with those who do not have a need to know.
- Keep devices on your person as much as possible. If unattended, ensure devices are powered down. If using hotel safes, secure them with a secondary personally-lockable device.
- Ensure anti-virus software is up to date prior to travel and conduct a thorough check of all devices post-trip
- Use a Virtual Private Network (VPN) to protect communications and secure data. Always familiarise yourself with the legal status of any VPN or application in your destination country prior to travel.
- Use the 'forget network' setting upon your return if you connected to any public Wi-Fi networks while travelling.
- Obtain profile-specific advice considering your industry and position in the company.

## **ELECTRICITY**

This is the most common plug type used:

## Calendar

## **Holidays & Security Dates**

#### 2025

**26 Dec** Boxing Day

In many countries, if this holiday falls on a Saturday or Sunday, a public holiday is observed on the following Monday or Tuesday respectively.

31 Dec New Years Eve

# 2026

**01 Jan** New Year's Day

In many countries, if this holiday falls on a Saturday or Sunday, a public holiday is declared for the following Monday.

**07 May** General Prayer Day

05 Jun Constitution Day

# **Destination Guide for Denmark**



## **Medical**

# **Destination Guide Content**

## **Medical Care**

#### **Excellent**

## Standard of Health Care

Medical care in Denmark is of an international standard and is provided largely in public facilities. All specialties are available in the large regional and university hospitals, and most doctors speak English. There is an increasing demand for private health care, due in part to growing waiting lists and reduced capacity in the public sector. The majority of private facilities are in Copenhagen, are small in size and are fairly limited in the scope of services they can provide. Private hospitals do not offer emergency treatment and their inpatient facilities are usually limited to pre-planned treatments. Emergency treatment is available at the majority of public regional and university hospitals and a high level of cooperation exists between the public and private sectors. In Greenland and the Faroe Islands, medical facilities are limited and evacuation may be required for serious illness or injury. This is normally arranged by the Danish emergency services.

## **EMERGENCY NUMBERS**

Ambulance 112

Fire service 112

Police 112

**Hospitals & Clinics** 

## **Bispebjerg Hospital**

Category: Hospital

Address: 23 Bispebjerg Bakke Copenhagen NV, Copenhagen

Phone: 45 38635000

Email: direktion.bbh-frh@regionh.dk

# **Herlev Hospital**

Category: Hospital

Address: 1 Borgmester Ib Juuls Vej, Copenhagen, Copenhagen

Phone: 45 38683868

Email: hospitalsdirektionen.herlev-og-gentorte-hospital@region.dk

## **Vaccinations**

## **Hepatitis A**

Many travel health professionals recommend hepatitis A vaccination for all travellers regardless of destination, especially those who are at higher risk (see US CDC), such as gay, bisexual, and other men who have sex with men, people who use illicit drugs or those with liver disease.

Hepatitis A is a viral disease that causes liver inflammation. The virus is present in the faeces of an infected person. It spreads through contaminated food and water and is common in areas with poor sanitation. Person-to-person spread also occurs, when the virus is inadvertently transferred into the mouth, including during sexual activity. People at higher risk of infection include men who have sex with men, illicit drug users and people with liver disease.

Not everyone gets symptoms. If symptoms do occur, they begin two to four weeks or more after infection and can last for weeks or months. Symptoms include fever, fatigue, loss of appetite, diarrhoea, nausea/vomiting, abdominal pain/discomfort, jaundice (yellow colour of the skin and eyes), dark urine, clay-coloured stool, joint pain and itching. Many infected people suffer only a mild illness. Most cases recover fully after four or more weeks. However, for some, the disease can be severe, and occasionally is fatal. There is no specific treatment and cases are managed through supportive therapy.

Prevention is through vaccination, attention to hygiene, and access to safe food and water.

Watch the Hepatitis Video Podcast (Vimeo) View Viral Hepatitis Infographic Poster (PDF)

#### The Disease

*Hepatitis* is a general term that means inflammation of the liver. Medications, poisons, alcohol and infections can all cause hepatitis.

Hepatitis A is inflammation of the liver caused by a virus. The virus is highly contagious. People are mostly infected through eating or drinking contaminated food or water, or through direct contact with an infected person. Usually people make a full recovery, however occasionally the disease can be severe or fatal. There is an effective vaccine available.

#### Transmission

The illness is transmitted via the "faecal-oral route". The virus is present in the stool of an infected person. Others are infected when they consume food / drink contaminated with the virus. This is more common in areas with poor sanitation systems and limited access to clean water.

It is also possible to get the disease via direct contact with an infected person's faecal matter, for example through incompletely washed hands, sexual contact or through shared illicit drugs.

## **Symptoms**

Not everyone gets symptoms. Most childhood infections will be asymptomatic or mild. Most adults will develop symptoms, and severity increases with age. If symptoms do occur, they begin two to four or more weeks after infection and can last for weeks or months. They include any or all of the following:

- fever
- fatigue
- loss of appetite
- diarrhoea
- nausea/vomiting
- abdominal pain/discomfort
- jaundice (yellowing of the skin and eyes)
- dark urine, clay-coloured stool
- joint pain
- itching

Most people make a full recovery. About 10 to 15% of symptomatic persons with hepatitis A may experience relapse or prolonged illness up to six months. Sometimes the disease is severe and can be fatal (less than 1% of all cases), particularly in older people, and those with other underlying liver disease (such as infection with hepatitis B or C). It is thought to be due to the immune mechanisms rather than infection levels.

## Diagnosis

Blood tests are required to confirm the diagnosis.

#### **Treatment**

There is no specific medication to treat hepatitis A. Medications to relieve symptoms should only be used under medical advice as they may contribute to damage of the liver.

#### Prevention

Prevention is through **hygiene**, careful selection of **food and water**, and **vaccination**.

Good hygiene, and choosing safe food and water are important, especially in areas where hepatitis A is common:

- Maintain a high level of personal hygiene, including during sexual activity.
- Do not drink tap water. Choose boiled or bottled water from reputable sources, water that has been treated with chlorine or iodine, or carbonated beverages.
- Avoid ice, as it may have been made with unsafe water.
- Ask locally which restaurants and hotels serve safe food.
- Select food that has been thoroughly cooked while fresh and served very hot.
- Do not eat raw shellfish.

**Vaccination** is effective, widely available and generally recommended for any traveller who has not already had the vaccine (or the disease). Two doses, given six months apart, are required for lifelong immunity. All travellers should consider it, particularly:

- If travelling to areas with high rates of hepatitis A.
- When living conditions are crowded or have poor sanitation.
- Men who have sex with men.
- Illicit drug users.
- People with liver disease.

**Postexposure prophylaxis:** After exposure, people who are not immune may be recommended Hepatitis A vaccination or immune globulin (antibodies) as soon as possible (within two weeks) to prevent infection.

#### Risk to travellers

Hepatitis A is common in areas with limited access to sanitation. People who live with an infected person, men who have sex with men, illicit drug users and people with liver disease are at higher risk in any area.

US Centers for Disease Control and Prevention (CDC) Hepatitis A Information European Centre for Disease Prevention and Control (ECDC) Factsheet about hepatitis A

## **Hepatitis B**

Recommended for health care workers and anyone who may have a new sexual partner, share needles or get a tattoo or body piercing.

Many travel health professionals recommend hepatitis B vaccination for all travellers and international assignees, regardless of destination.

#### The Disease

The hepatitis B virus, like HIV, is transmitted through contact with blood, blood products or body fluids. Modes of transmission include:

- Unprotected sexual intercourse
- Infected blood transfusions
- Needle sharing by IV drug users
- Use of unsterilized needles, syringes or equipment
- From mother to child during childbirth

Symptoms develop between 45 and 160 days after infection when the virus invades the liver causing fever, abdominal pain, nausea and loss of appetite. Jaundice (yellowing of the skin and eyes) is a common feature and the urine may become dark. There is no specific treatment and recovery usually takes about four weeks. Many individuals may have no symptoms but can still be infectious to others.

Approximately 1 in 10 of those infected do not recover fully and suffer ongoing liver damage called chronic hepatitis B - this can eventually cause liver cirrhosis and/or cancer. The very young and the elderly are more likely to develop a chronic infection.

#### Vaccination

In many countries, hepatitis B is included in the routine childhood immunizations and need not be repeated. For unvaccinated travelers: *Routine schedule* 

- Individual hepatitis B vaccination requires a series of three injections given on days zero, 30 and after 6-12 months.
- A combined vaccine for hepatitis A and B is available in many countries. It also requires a series of three injections given on days zero, 30 and after six months.

## Accelerated schedule

Can be used for travelers who will depart before the first two doses of the routine schedule can be given:

- Use an *individual* hepatitis B vaccine
- Doses on days 0, 7 and 21
- Fourth dose required after 6 months

Accelerated combined hepatitis A and B vaccine

- Doses on days 0, 7 and 21
- Fourth dose of hepatitis B alone or the combined vaccine required after
   12 months

Watch the Hepatitis Video Podcast (Vimeo) View Viral Hepatitis Infographic Poster (PDF)

#### The Disease

Hepatitis B is a viral disease affecting the liver. It is transmitted through contact with blood, blood products or body fluids of an infected person. It can cause a mild illness but occasionally can develop into a chronic illness.

#### **Transmission**

The hepatitis B virus, like HIV, is transmitted through contact with blood, blood products or body fluids (e.g. semen, saliva) on broken skin. Modes of transmission include:

- Unprotected sexual intercourse with an infected partner
- Infected blood transfusions
- Needle sharing by IV drug users
- Use of unsterilized needles, syringes or equipment
- From mother to child during childbirth

• Contact with wounds of an infected person

The virus remains viable outside the body on any surface for about seven days and can lead to infection. Blood spills including dried blood can be infectious.

## **Symptoms**

Symptoms develop between 30 and 180 days after exposure to infection. Hepatitis B can either be acute (short term illness) or chronic (long term illness). Most people will not develop symptoms during the acute phase. Others experience fever, pain in muscles and joints, abdominal, nausea and loss of appetite. Jaundice (yellowing of the skin and eyes) is a common feature and the urine may become dark. Recovery may take several weeks. Risk of chronic illness is related to age. Babies who get infected from their mothers or those that get infected before five years of age are very likely to develop chronic infection. Less than 5% of adults and about 90% of children may develop chronic infection. In chronic illness, virus continues to remain in the body although people do not have symptoms. Many individuals may appear healthy but can spread the infection to others. Life threatening conditions such as liver cirrhosis and/or cancer may develop.

# Diagnosis

The disease can be confirmed by blood tests.

#### **Treatment**

There is no specific cure for the disease. Treatment is mainly supportive, consisting of rest, adequate nutrition and medications to reduce discomfort.

#### Prevention

Avoid direct contact with body fluids.

**Vaccine:** This can prevent the illness and its serious outcomes such as cirrhosis and cancer. In many countries, hepatitis B vaccination is included in the routine childhood immunizations.

#### Risk to Travellers

Most travellers are at low risk unless they have contact with the infected blood or body fluids.

**CDC** Hepatitis B information

## **Measles**

- Recommended for all travellers and international assignees.
- All travellers should be up to date with their measles vaccination (schedule differs by country). Vaccination for adults is available as MMR

(measles, mumps and rubella), two doses given at least four weeks apart are required.

Some individuals cannot be vaccinated due to certain health conditions. Measles is a highly contagious viral disease that can have serious complications.

## **Transmission**

Measles spreads very easily when an infected person talks, coughs, or sneezes, releasing droplets into the air. If a healthy person breathes in these droplets, they can get sick. The virus can stay in the air and infect people for up to 2 hours after the infected person has left. It can also land on objects and surfaces, where it can live for several hours. If you touch these surfaces and then touch your face, you can get infected.

A person with measles is infectious from four days before the appearance of the rash until four days after it has appeared. After being exposed to the virus, approximately 90% of people who are not immune will become infected.

## **Symptoms**

Measles symptoms usually start 7-14 days after being exposed to the virus. Early signs include a high fever, cough, runny nose, and red, watery eyes. Small white spots, known as Koplik's spots, may appear inside the mouth. A few days later, a red, blotchy rash starts on the face and spreads to the rest of the body.

Measles can lead to serious complications, especially in young children, adults over 20, pregnant women, and people with weakened immune systems. Common complications include ear infections and diarrhea. More severe complications can be pneumonia, which is a lung infection, and encephalitis, which is swelling of the brain. These severe complications can sometimes be fatal.

Pregnant women who contract measles have an increased chance of miscarriage and pre-term delivery. Their babies may also experience low birth weights and birth defects.

## Diagnosis

This illness is usually diagnosed clinically. If necessary, a lab test can confirm measles.

#### **Treatment**

There is no particular treatment for measles. Symptoms can be managed with over-the-counter preparations, good nutrition and adequate fluid intake. Antibiotics are required if there are bacterial complications (such as pneumonia, ear infection). Sick people should be isolated from non-immune people, and should not go out in public until at least four days after their rash appears.

#### **Prevention**

Measles can be effectively prevented by vaccination, which many countries routinely administer during childhood. The MMR (measles, mumps, and rubella) vaccine is highly effective and safe, providing lifelong immunity for most people after two doses. Vaccination not only protects individuals but also helps prevent the spread of the virus within communities. People who are not immune and are at higher risk for complications (such as pregnant women, unvaccinated infants and people with weakened immune systems) may be given a dose of antibodies if exposed to the virus. In addition to vaccination, good hygiene practices, such as regular handwashing and avoiding close contact with infected individuals, can help reduce the risk of transmission.

## **Risk to Travellers**

Measles occurs throughout the world. Outbreaks are common in areas where there is low vaccination coverage. Measles is highly contagious and can spread quickly in places where people gather, such as airports and tourist destinations. Anyone who has not been immunised, or has not previously had measles, is at risk of infection.

- International SOS article on measles, mumps and rubella vaccination
- CDC Measles Information
- See routine childhood vaccination schedules: Australia, Canada, Europe, USA, UK

# **Tickborne encephalitis**

## Recommended for:

- people who will spend time in forested or grassy areas during tick season (particularly those who will hike, camp, perform fieldwork, etc.);
- people residing in this country for longer periods (i.e., six months or more).

Tickborne encephalitis (TBE) is a viral infection which is mostly transmitted to people through tick bites. Ticks live in or near forests and are usually active during warmer months. TBE infection can also be acquired by consuming unpasteurized dairy products from infected cows, goats or sheep. Most people will not have any symptoms. For those who do, initial symptoms include fever, headache, muscle aches, nausea, and fatigue. These may resolve in a week or so, but if the infection spreads to the brain, the symptoms may become more severe (decreased mental state, severe headaches, convulsions, weakness and/or coma). TBE can be fatal. Prevention is through avoiding tick bites and vaccination.

## The Disease

Tickborne encephalitis (TBE) is a viral infection which is mostly transmitted to people through tick bites. It occurs in many areas of Europe and Asia.

## **Transmission**

These viruses are mainly transmitted to humans by the bite of an infected tick. Ticks are usually found in forests, long grass and hedges and are more active between early spring and late autumn. Often, the bite goes unnoticed. Infection can also be acquired by consuming unpasteurized dairy products from infected cows, goats or sheep.

## **Symptoms**

Many people have no symptoms. If symptoms do develop, they first start about 7 to 14 days after the tick bite. Initially there may be fever, headache, muscle aches, nausea and fatigue. These symptoms usually resolve in a week or so, but up to one third of people go on to a second phase of illness with inflammation of the brain and spinal cord. Symptoms then include severe headaches, decreased mental state, convulsions, and muscle paralysis. Recovery takes months and there may be long-term brain and nervous system damage. TBE can be fatal.

## Diagnosis

The disease can only be diagnosed through laboratory tests.

### **Treatment**

There is no specific medication to treat TBE. Patients are managed with supportive treatment.

#### Prevention

Avoid tick bites:

- Wear long pants with tight cuffs, and tuck pant legs into socks.
- Use insect repellent containing DEET, picaridin, IR3535, Oil of Lemon Eucalyptus (OLE), para-menthane-diol (PMD), or 2-undecanone.

- Consider soaking or spraying clothes with the insecticide permethrin. (Do not apply permethrin directly to the skin.)
- Look for ticks on the body and clothing, and remove them promptly.

Do not consume unpasteurised dairy products.

#### Vaccine

A vaccine is available in many countries. It is recommended for people visiting endemic countries during the warmer months (early spring to late autumn) and participating in outdoor activities. In countries where the disease in endemic, the TBE vaccine is often included in routine immunisation schedules.

#### Risk to Travellers

Travellers at increased risk of exposure are those going to endemic countries and whose itineraries include outdoor recreational activities (e.g., camping, hiking) or working in forested areas (e.g., farming, field research) between early spring and late autumn.

#### References

CDC Tickborne encephalitis information

European Centre for Disease Prevention and Control Tickborne encephalitis factsheet

UK TravelHealthPro Tick-borne encephalitis factsheet

## Malaria

#### None

## **Health Threats**

# Known health threats for this country

#### **Rabies**

Rabies is a viral disease contracted when bitten or scratched by an infected (rabid) animal, often a dog. Once it enters the body, the virus travels along nerves and causes paralysis. As it reaches important organs like the spinal cord and the brain, it causes coma and death.

In countries where rabies is present in animals or bats, ALL animal / bat bites, scratches and licks to broken skin must be treated seriously. Rabies vaccination is very effective in preventing rabies, even after a bite/scratch by a rabid animal.

### Rabies vaccination

Pre-exposure vaccination is often recommended for expatriates and long-term visitors to destinations where rabies is present. It's especially recommended if quality medical care may not be available after being bitten or scratched by an animal. Pre-exposure treatment can be especially useful for children, since they may not tell their parents that they have been bitten/scratched.

Pre-exposure vaccination makes it easier to treat a bite or scratch. That's important because some types of rabies treatment can be in short supply in many countries, even in cities.

If bitten, scratched or licked (on broken skin) by an animal:

- Immediately cleanse the wound with soap and water and a povidoneiodine solution if available.
- Seek medical advice from a qualified source or your assistance company.
- Notify local health authorities immediately. You may need post-exposure vaccination, even if you have had pre-exposure vaccination. (THIS CAN BE LIFE SAVING.)

## Lyme disease

Lyme disease occurs in North America, Europe and Asia. It is transmitted to humans by the bite of a particular species of tick. Lyme disease can cause an expanding rash at the site of the bite, fever, arthritis and nerve problems such as facial palsy.

To prevent tick bites:

- Avoid tick habitats
- Use insect repellents
- Check daily for ticks

Lyme disease vaccination is no longer available.

If you develop a rash at the site of a tick bite or other symptoms of Lyme disease, seek medical attention. A course of antibiotics can cure Lyme disease.

## **Tickborne encephalitis**

Tickborne encephalitis (TBE) is a viral infection which is mostly transmitted to people through tick bites. Ticks live in or near forests and are usually active during warmer months. TBE infection can also be acquired by consuming unpasteurized dairy products from infected cows, goats or sheep.

Most people will not have any symptoms. For those who do, initial symptoms include fever, headache, muscle aches, nausea, and fatigue. These may resolve in a week or so, but if the infection spreads to the brain, the symptoms may become more severe (decreased mental state, severe headaches, convulsions, weakness and/or coma). TBE can be fatal. Prevention is through avoiding tick bites and vaccination.

## HIV, Hepatitis B and C, and STIs

HIV/AIDS, hepatitis B, and hepatitis C are spread by contact with bodily fluids (especially blood and semen).

- unprotected sex,
- needle sharing during IV drug use, or
- unsafe blood or medical/dental instruments.

Genital herpes (HSV), genital warts (HPV), gonorrhoea, chlamydia, syphilis and most other sexually transmitted diseases are spread by genital contact.

Prevention:

- In many countries, hepatitis B is now a routine childhood immunisation and need not be repeated. All non-immune travellers should consider vaccination.
- Always use new condoms (preferably brought from your home country).
- IV drug users should not share needles.
- Avoid having tattoos or piercings done.
- In healthcare settings, make sure that needles and syringes are sterile and not shared between patients.
- Call International SOS or your corporate medical department if you are hospitalised.
- Be aware of your risk when assisting anyone with an injury. Protect yourself from contact with bodily fluids.
- Seek medical attention within 24 hours if you accidentally come into contact with someone else's bodily fluids.

# **Hepatitis A**

Hepatitis A is a viral disease that causes liver inflammation. The virus is present in the faeces of an infected person. It spreads through contaminated food and water and is common in areas with poor sanitation. Person-to-person spread also occurs, when the virus is inadvertently transferred into the mouth, including during sexual activity. People at higher risk of infection include men who have sex with men, illicit drug users and people with liver disease.

Not everyone gets symptoms. If symptoms do occur, they begin two to four weeks or more after infection and can last for weeks or months. Symptoms include fever, fatigue, loss of appetite, diarrhoea, nausea/vomiting, abdominal pain/discomfort, jaundice (yellow colour of the skin and eyes), dark urine, clay-coloured stool, joint pain and itching. Many infected people suffer only a mild illness. Most cases recover fully after four or more weeks. However, for some, the disease can be severe, and occasionally is fatal. There is no specific treatment and cases are managed through supportive therapy. Prevention is through vaccination, attention to hygiene, and access to safe food and water.

# **Hepatitis B**

#### The Disease

The hepatitis B virus, like HIV, is transmitted through contact with blood, blood products or body fluids. Modes of transmission include:

- Unprotected sexual intercourse
- Infected blood transfusions
- Needle sharing by IV drug users
- Use of unsterilized needles, syringes or equipment
- From mother to child during childbirth

Symptoms develop between 45 and 160 days after infection when the virus invades the liver causing fever, abdominal pain, nausea and loss of appetite. Jaundice (yellowing of the skin and eyes) is a common feature and the urine may become dark. There is no specific treatment and recovery usually takes about four weeks. Many individuals may have no symptoms but can still be infectious to others.

Approximately 1 in 10 of those infected do not recover fully and suffer ongoing liver damage called chronic hepatitis B - this can eventually cause liver cirrhosis and/or cancer. The very young and the elderly are more likely to develop a chronic infection.

### **Vaccination**

In many countries, hepatitis B is included in the routine childhood immunizations and need not be repeated. For unvaccinated travelers: *Routine schedule* 

- Individual hepatitis B vaccination requires a series of three injections given on days zero, 30 and after 6-12 months.
- A combined vaccine for hepatitis A and B is available in many countries. It also requires a series of three injections given on days zero, 30 and after six months.

## Accelerated schedule

Can be used for travelers who will depart before the first two doses of the routine schedule can be given:

- Use an *individual* hepatitis B vaccine
- Doses on days 0, 7 and 21
- Fourth dose required after 6 months

Accelerated combined hepatitis A and B vaccine

- Doses on days 0, 7 and 21
- Fourth dose of hepatitis B alone or the combined vaccine required after 12 months

#### Food & Water

## **Generally safe**

Food Risk

Food is considered safe.

Water and Beverages

Tap water is safe to drink.

# **Destination Guide for Denmark**



**Security** 

#### **Destination Guide Content**

# **Personal Security**

#### STANDING TRAVEL ADVICE

- Travel to Denmark can continue with standard security precautions.
- Take basic security precautions against petty theft and street crime.
- There is an underlying threat of terrorist attack by radical religious groups.
   Embassies, government buildings, transport hubs and public areas in the capital
   Copenhagen are among the more likely targets. Report any suspicious packages or behaviour to the authorities.
- Security alerts or hoaxes can trigger the short-notice evacuation of transport hubs or public locations, which can cause disruption. Follow all directives issued by the authorities during any security operation and do not act on the basis of unverified information.

## **Crime**

# **Petty crime rare**

#### **CRIME**

Levels of violent and petty crime are low, though there is a higher incidence of street crime in Copenhagen, particularly in the Vesterbro Norrebro and Nordvest districts. Pickpocketing and purse-snatching have been known to occur, particularly at popular tourist spots and at transport nodes and stations, such as Copenhagen Central Station. Thieves dressed as professionals may operate at airports, hotel lobbies and in cruise ship docking areas. People should keep a watchful eye on comestibles in bars and other entertainment venues and not accept any from strangers.

Exercise caution if commuting to and from Copenhagen airport or between Copenhagen and Malmo (Sweden) by train, as there have been incidents of luggage theft. Always keep your belongings with you to mitigate the risk of opportunistic petty crime.

Residential break-ins have emerged as a security concern in recent years; international assignees should ensure their house is fitted with basic anti-burglary measures, including alarm systems and quality locks and deadlatch. The presence of organised criminal groups, including motorcycle gangs, and scuffles between rival gangs and confrontations with the security forces have increased, though these pose only insignificant, indirect risks to business travellers.

## **Terrorism**

# Minimal risk to foreigners

## **TERRORISM**

Denmark emerged as a potential target for terrorist attacks, partly because of its previous troop contribution to US-led operations in Afghanistan, Iraq, and its participation in the international coalition against the extremist Islamic State (IS) movement. The controversial publication of cartoons in 2005-06 depicting the Muslim prophet Muhammad by a Danish newspaper also made it a target for Islamist groups. Denmark has sophisticated agencies to counter the threat posed by terrorist groups. While a large-scale terrorist attack remains unlikely, small-scale or 'lone wolf' attacks targeting government buildings, the Jewish community or 'soft' civilian targets, including public transport, are possible. Given the concentration of such targets in Copenhagen, the risk of related incidents is higher in the capital than elsewhere. Such attacks could be indiscriminate, posing a risk to business travellers and Danish nationals alike.

## **Social Unrest**

#### **SOCIAL UNREST**

Protests held by the country's active leftist and anti-globalisation groups can take place, resulting in localised clashes with the police. The focal point of such activity is generally Norrebro district in Copenhagen.

Protests by union workers and against austerity measures are sporadic; these are localised and unlikely to affect the workforce. Domestic developments perceived to be anti-Islamic can trigger protests by the country's Muslim community.

Far-right activists are active, and demonstrations by these groups are common, notably to mark the death anniversary of Adolf Hitler's deputy, Rudolf Hess, on 16 August. However, these activists seldom resort to violence, and racist attacks and harassment are rare.