

What is rabies?

- Rabies is a dangerous viral infection that humans can get from infected animals; it attacks the nervous system. Rabies is found worldwide, but it is rare in Canada.
- Early symptoms of the disease usually show up from 3 to 8 weeks after exposure, and include numbness near the bite, fever, headache and feeling unwell, leading eventually to delirium and paralysis and death. Once symptoms appear, rabies is nearly always fatal.
- It is spread through close contact with the saliva (fluid from the mouth) of infected animals, most often from a bite or scratch, but occasionally from licks on broken skin or mucous membranes (the skin lining the mouth, nose or eyelids).
- Skunks, bats, raccoons and foxes are the most common wildlife carriers of rabies in Canada, and they can transmit to people, dogs, cats and livestock.
- It is difficult to feel or see the mark of a bat's bite, so if you are directly exposed to a bat, you should seek medical help immediately; you will likely need the post-exposure vaccine.
- Rabies is more common in developing countries where stray animals, especially infected dogs, live close to humans; it is best to avoid touching stray or wild animals.

Who needs the rabies vaccine?

- The rabies vaccine helps to protect individuals from developing rabies after they have been bitten, licked or scratched by an animal with rabies. The vaccine may be given either
- **Pre-exposure** to protect certain people at high risk, e.g. some travellers, just in case they ever come into contact with a rabid animal. It involves 3 doses of rabies vaccine—one injection per day on days 0, 7, and 21 or 28

OR

- **Post-exposure** as a precaution / treatment, after an incident with a proven or suspected rabid animal. It involves both rabies vaccine and rabies immune globulin—Rablg—which is a sterilized blood product containing concentrated amounts of rabies antibodies:
 - 4 doses of rabies vaccine to help you make your own antibodies, with one injection per day on days 0, 3, 7 and 14 (plus a fifth dose of vaccine on day 28 if you have immune system problems or you are taking anti-malarial medication)
 - several injections of Rablg at the same time, preferably on the first day of treatment (day 0), but it may be given up to and including day 7

Who should get the rabies *pre-exposure* vaccine?

- Any individual at high risk of exposure to rabid animals
 - veterinarians and veterinary staff, animal control and wildlife workers
 - certain laboratory workers exposed to live rabies virus
 - spelunkers (cave explorers)
 - hunters and trappers in high-risk areas, such as the Far North
 - workers / travellers to developing countries, if high risk of rabies and limited access to post-exposure treatment (e.g. children who touch stray animals)

Who should get the publicly funded (free) rabies *post-exposure* treatment?

- Anyone who has had direct contact with the infected saliva of a proven or suspected rabid animal should immediately receive rabies vaccine and rabies immune globulin.

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Who should not get the rabies vaccine?

Pre-exposure:

- Anyone who has had a serious allergic reaction to this vaccine in the past, or to any component of the vaccine
 - RabAvert® - rabies antigen, polygeline (bovine gelatin), human serum albumin, neomycin, chlortetracycline, amphotericin B, chick protein - ovalbumin, potassium glutamate, sodium EDTA. Does not contain latex.
 - Imovax Rabies® - rabies antigen, human albumin, MRC-5 human diploid cells, beta propiolactone, neomycin, phenol red. Does not contain latex.
- Anyone with a high fever or moderate to severe illness should wait until they feel well to get the pre-exposure vaccine.
- Anyone who is pregnant or lactating should delay pre-exposure vaccination unless high risk of exposure and it is clearly necessary.

Post-exposure:

- There are no contraindications to post-exposure treatment if there is a significant exposure to a proven rabid animal.

What are the common side effects of the rabies vaccine?

- Some people may feel sore, swollen or itchy for a few days where the needle was given and have general muscle aches, headaches, dizziness, and / or feel unwell for a day or two.
- Tylenol® or ibuprofen may be taken afterwards, as directed, to reduce discomfort or fever.
- Children under 19 years of age must **NOT** be given ASA, Aspirin® or salicylates.

What else do I need to know?

- Avoid animals acting in a highly unusual way, e.g. aggressive, disoriented or too tame.
- If an animal attacks for no reason, it is more likely to be rabid.
- If bitten, scratched or licked on broken skin or mucous membrane by a possibly rabid animal, immediately wash and flush the affected area for at least 15 minutes with soap and water and disinfectant.
- You should also receive a tetanus booster (Td or Tdap, which includes the one recommended adult dose of pertussis) if you have not had a booster in the past 10 years.
- A rabies booster may be given every 2 to 5 years, for frequent high-risk exposure.

When should I seek medical attention after immunization?

- If you or your child experiences any unusual side effects, seek medical attention and notify public health.
- Go to Emergency at a hospital right away or call 911 if you or your child has any of the following after immunization: swelling of the face and neck; problems breathing; hives and itchy, reddened skin

Your Record of Protection

After you receive any immunization, make sure your health care provider updates your personal immunization record. Keep it in a safe place. Please inform us of any immunizations not received from public health.

Other Questions?

Talk to your health care provider or call our Immunization Program at 613-966-5500 or 1-800-267-2803, ext. 221. | TTY Dial 711 (1-800-267-6511) | hpePublicHealth.ca

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