

## **Rabies - risk, treatment and vaccination options at NHSL**

Rabies is a viral infection which is usually transmitted following contact with the saliva of an infected animal most often via a bite, scratch or lick to an open wound or mucous membrane (such as on the eye, nose or mouth). Although many different animals can transmit the virus, most cases follow a bite or scratch from an infected dog or cat. In some parts of the world, bats are an important source of infection.

Rabies symptoms can take some time to develop, but when they do, the condition is almost always fatal.

The risk of exposure is increased by certain activities and length of stay. Children are at increased risk as they are less likely to avoid contact with animals and to report a bite, scratch or lick.

Your travel clinic specialist will highlight the risk of rabies in endemic countries. You can also check your destination on the UKHSA / Public health website: <https://travelhealthpro.org.uk/>

QR code: Travel Health Pro



### **Prevention**

- Travellers should avoid contact with animals. Animals do not necessarily “look” rabid
- Following a possible exposure, wounds should be thoroughly cleansed and an urgent local medical assessment sought, even if the wound appears trivial. Rabies is preventable with prompt post-exposure treatment, presuming this is available and sought in time.



QR code: RABIES INFO LEAFLET

<https://travelhealthpro.org.uk/disease/148/rabies>

### **Vaccination**

A course of pre-exposure vaccines shortens the course of booster vaccines and removes the need for emergency rabies immunoglobulin which is in short supply world-wide.

Pre-exposure vaccinations are recommended for travellers whose activities put them at increased risk including, but not restricted to:

- those at risk due to their work (e.g. laboratory staff working with the virus, those working with animals or health workers who may be caring for infected patients).
- those travelling to areas where access to post-exposure treatment is limited.
- those planning higher risk activities such as running or cycling.
- long-stay or regular travellers

## Schedules

Standard UK immunisation consists of 3 doses of Rabies vaccine on days 0,7 and 21 days+ and is what most travellers are familiar with / previously had.

NHSL Regional Infectious Disease Unit travel clinics can also offer a 2 visit course on days 0 +7 to those who are medically appropriate. This is a World Health organisation approved schedule which is also licensed in the UK.

A 2 visit course is considered a full primary course. It is repeatedly demonstrated in research as non-inferior (as effective) to a 3 dose course. This allows NHSL to offer full rabies courses at a lower cost, over fewer visits.



QR code: WHO Rabies Vaccines recommendations  
<https://www.who.int/publications/i/item/who-wer9316>

There are two ways to offer a 2 visit course:

X2 small 0.1ml intradermal injections, one in each limb on days 0 + 7 (x4 total)

Or

X2 Intramuscular injections – one on day 0 + one on day 7 (x2 total)

## Vaccines

NHSL use vaccines that are currently UK licensed for both 2 and 3 dose schedules:



Verorab

or

Rabipur



These vaccines are generally interchangeable and you may be offered one or the other informed by your medical history (such as requiring egg free vaccine, or being immunocompromised which always requires 3 visits) and stock availability.

Should you have any questions please ask your NHSL clinical specialist at your travel appointment.