

# RABIES

## PREVENTION / VACCINATIONS

### Key aspects briefly summarized

- Rabies is a fatal viral disease transmitted by saliva and other body fluids from infected mammals.
- Do not touch or feed wild or foreign animals!
- Get advice on rabies prevention measures in time before traveling.



### Disease

Rabies is a viral infection that is transmitted between mammals. **Dogs**, cats, wild predators, **bats**, occasionally monkeys and other mammals are of particular importance for human infection. The period of time within which rabies breaks out after a bite or scratch varies from a few days to weeks/months (rarely years) and is **fatal in almost 100% of cases**. Therefore, the prevention of transmission and, after possible exposure, the rapid initiation of measures to prevent infection and disease are of highest importance.

### Measures to prevent rabies

#### 1. Contact prevention

- Do not touch or feed unfamiliar or wild mammals
- Do not touch dead mammals

#### 2. "Vaccinate before" (pre-exposure basic vaccination). Who should get vaccinated beforehand?

All travelers who visit areas where rabies may occur and who are likely to travel repeatedly to such areas should vaccinate before possible contact. In addition, vaccination is strongly recommended for all travelers who are particularly at risk:

- during long-term stays in affected areas
- for short trips with high individual risk (e.g. bicycle or motorcycle trips, hiking in remote areas, infants and children)
- for workers with animals, hunters or for speleologists (CAVE: bats!)

For most travelers, 2 vaccinations prior to travel are sufficient, with the first vaccination done one month prior to departure, if possible. A single third booster rabies vaccination should be given before the next trip, but no earlier than one year. For persons with immunosuppression, 3 vaccinations must be administered before travel.

#### 3. Behavior after bites or scratches (postexposure prophylaxis)

A bite or scratch wound, as well as contact (licking) of injured skin or mucous membrane with the saliva of mammals, is **always an emergency**, as any unvaccinated mammal can potentially be infected with rabies!

Therefore, immediately carry out the following measures:

1. **Clean immediately thorough the wound** with plenty of **water and soap** (e.g. curd soap) for over **10-15 minutes**; then use disinfectant like iodine solution (e.g. Betadine®, Braunol® etc.). **This applies regardless of prior vaccination against rabies.**
2. **Get emergency post-exposure vaccination: active** vaccination (+ in addition **passive immunization**, if you have not had a pre-exposure rabies vaccination); vaccination schedule to be used: see table below. **Start vaccinations as soon as possible** after contact.
3. Get a booster vaccination against tetanus if the last tetanus vaccination was done more than 10 years ago.
4. Depending on the wound, additional antibiotic therapy may be indicated.
5. If the mammalian contact is with monkeys from the macaque group, prophylaxis against the "Simian Herpes B Virus", which can cause brain inflammation, should be discussed with a doctor.

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### IMPORTANT:

If you have been bitten or scratched by a mammal or if you have had any other exposure to a body fluid with a mammal:

**Seek medical attention immediately (i.e., during the trip) to receive the vaccinations listed below!**

### Post-exposure vaccination schedule for unvaccinated individuals

Start vaccination **as soon as possible**, preferably on the same day

Name and dosage of the vaccine	How to inject?	Vaccination scheme
<b>Passive:</b> Anti-rabies Immunoglobulin/antibody	Injection is made around the wound	Single dose (ideally together with the first dose of active vaccination, but can still be given up to/within the 7th day after the start of active vaccination).
<b>and active:</b> Rabipur PCEC Rabies Mérieux HDC Verorab Verocell Rabivac HDC RabAvert PCEC Imovax Rabies HDC/Verocell Vaxirab PDEC and others	Intramuscular (i.m.)	<b>4 x (1-1-1-1)</b> days 0, 3, 7, and 14 (Note: however, depending on the mode of administration or locally applicable vaccination recommendations, there are other vaccination schedules).

### Post-exposure vaccination schedule for persons already vaccinated against rabies

**Only active vaccinations** must be given - vaccinations as soon as possible, **within days** after exposure

Active vaccines	Vaccination schedule
Rabipur PCEC Rabies Mérieux HDC Verorab Verocell Rabivac HDC RabAvert PCEC Imovax Rabies HDC/Verocell Vaxirab PDEC and others	<b>2 x (day 0 and 3)</b> That means: 3 days apart  (anti-rabies immunoglobulins/antibodies are NOT given after an already existing basic rabies immunization, because vaccinated persons have already formed their own antibodies)

After a post-exposure vaccination, a control of the vaccination success by means of antibody measurement in the blood is recommended. Since this is possible in only a few travel countries, an appropriate consultation with a doctor is recommended after return.

The number of the Swiss Tropical and Public Health Institute for **medical emergencies: +41 61 2848 144** ( available 24 hours, charged according to the TarMed medical tariff).

This factsheet has been provided by the following specialized institution:

Vaccination information throughout Switzerland: 0900 575 131 (2.69/min from landline)  
Mo to Fr 8.30 -11.30 / 14.00 -17.00

