



Philadelphia Department of Public Health  
**Division of Disease Control**

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## **Health Advisory**

### **Human Rabies Vaccine Supply and Rabies Post-Exposure Prophylaxis Recommendations** **August 31, 2009**

Effective immediately, IMOVA<sup>®</sup> Rabies vaccine (manufactured by Sanofi Pasteur) is available for both pre-exposure use and post-exposure prophylaxis. As a result, previous limits on ordering IMOVA<sup>®</sup> Rabies vaccine for pre-exposure and post-exposure use are no longer in effect. Health care providers can order this vaccine through [www.vaccineshoppe.com](http://www.vaccineshoppe.com) or by calling 1-800-VACCINE (1-800-822-2463). Providers do not need to complete a rabies post-exposure use form or obtain a passcode from the health department prior to ordering. RabAvert vaccine manufactured by Novartis Vaccines continues to be available for both pre-and post-exposure prophylaxis without any ordering restrictions.

New ACIP recommendations issued on July 10, 2009 also reduce the number of post-exposure vaccine doses in the series from 5 to 4. The new post-exposure vaccine schedule consists of 4 doses administered on days 0, 3, 7, and 14 and eliminates the 5<sup>th</sup> dose previously recommended on day 28. For persons with broadly defined immunosuppression, 5 doses of post-exposure prophylaxis should still be administered. Human rabies immune globulin (HRIG) continues to be recommended on day 0 for persons not previously immunized for rabies. The dose of HRIG for post-exposure prophylaxis is 20 IU/kg.

Decision-making regarding the need for rabies PEP should be guided by the following considerations:

- Bites from known or suspect rabid animals are the highest risk for rabies. Whenever possible, wild animals (e.g., raccoons, bats, skunks, foxes, groundhogs, woodchucks, etc.) that were involved in human exposures should be tested for rabies.
- Bites from healthy, domestic animals are at lower risk for rabies. Every effort should be made to observe these animals (e.g., dogs, cats, ferrets) involved in bite cases for 10 days, before administering rabies post-exposure prophylaxis. When animal bites are reported to DDC the information regarding the animal is forwarded to the PDPH Vector Control Program for animal follow-up, if the animal's location and owner information are reported with the bite.
- Non-bite exposures such as contamination of open wounds, abrasions (including scratches) or mucous membranes with saliva or other potentially infectious material (e.g., neural tissue) very rarely cause rabies. Other indirect contact (e.g., petting or handling an animal, contact with blood, urine, feces or contact of saliva with intact skin) do not constitute exposures.
- Bites from squirrels, hamsters, guinea pigs, gerbils, chipmunks, rats, mice, other small rodents, and rabbits almost never require rabies post-exposure prophylaxis. Consult with DDC staff if you believe rabies PEP might be indicated following an exposure to one of these animals.
- Rabies PEP for persons exposed to bats should be limited to cases where a sleeping person, incapacitated person, or very young child has been in a room with a bat that is not available for testing. If the bat is available for testing, provision of PEP should be based on test results.

Pre-exposure vaccination should be considered for certain occupational groups (veterinarians and their staff, animal handlers, certain laboratory workers) whose activities bring them into frequent contact with the rabies virus or potentially rabid animals. International travelers may also be candidates for pre-exposure vaccine if they are traveling to an area where rabies is enzootic and access to appropriate medical care is limited.

**All animal bites should be reported to PDPH by calling 215-685-6748. For public health consultation contact DDC at 215-685-6740. On weekends and after normal business hours, call 215-686-4514 and ask to speak with the person on-call for the Division of Disease Control.**