

Don't let your
holiday become a
DISASTER



Consult a specialist
travel doctor for all
your travel needs.

Where possible consult
your travel doctor
8 weeks prior to travelling
to ensure adequate time
for immunisations.

Your local travel clinic is:

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RABIES
Closer than you think!



RABIES: Important Information

THE DISEASE

Rabies is an extremely serious viral disease that is nearly always fatal. It is transmitted to humans from infected saliva as a result of an animal bite or scratch, most commonly from dogs. Monkeys, cats and other mammals may also transmit the disease to humans.

WHO IS AT RISK?

Children travelling to rabies endemic regions are at greatest risk of exposure to the virus because they are more likely to be bitten by animals such as dogs and monkeys. Children are also less likely to recognise and report bites and scratches. Treatment is therefore unlikely to be sought in a timely manner.

Although children are at greatest risk, all travellers to rabies endemic areas should be aware of the danger of contact with animals. Developing countries have a large population of stray dogs and avoiding them is often difficult.

GLOBAL PATTERN

Rabies is present on every continent with the exception of Antarctica. It is most common in developing countries, with the greatest risk areas being Asia and Africa. It is now present in areas that have previously been rabies free. Bali is one such example where rabies has only been present since 2008. Approximately 55,000 people die from rabies each year. However the real figure is known to be far greater as rabies is a grossly under-reported disease.



VACCINATION

PRE-EXPOSURE VACCINATION

Why consider vaccination?

If exposure to the rabies virus occurs, immunoglobulin is required urgently. In developing countries immunoglobulin or adequate medical assistance may be unavailable or difficult to obtain.

Vaccination reduces the risk of rabies infection; gives the traveller peace of mind; reduces anxiety and avoids disruption to holiday plans.

How is the vaccine administered?

Rabies vaccines are usually administered intramuscularly. Alternatively, rabies vaccines can be given intradermally but only at licensed travel clinics by specially trained staff that have expertise and regularly use this technique. Intradermal administration of rabies vaccine is approved by the World Health Organisation and the National Health & Medical Research Council (NHMRC) Australia.

The intradermal option is less than half the cost of the intramuscular vaccine.

Prior to travel, THREE DOSES OF RABIES VACCINE ARE REQUIRED (days 0, 7 AND 28).

POST-EXPOSURE VACCINATION

Travellers who DO receive pre-exposure vaccination MUST seek further medical attention after a potential rabies exposure. Vaccination does however, simplify post-exposure treatment.

Treatment involves:

- Two doses of rabies vaccine at days 0 and 3 following exposure.
- Immediate and thorough wound cleansing with soap and water and an antiseptic such as Betadine solution.

Travellers who DO NOT receive pre-exposure vaccination require:

- Immediate medical attention.
- Thorough wound cleansing with soap and water and an antiseptic such as Betadine solution.
- Immunoglobulin (injected into the wound).
- A series of four rabies vaccinations given at days 0, 3, 7 and 14 (a fifth dose on day 28 is required for people who are immunosuppressed or Aboriginal or Torres Strait Islanders).

BOOSTER DOSES

Please consult your specialist travel doctor prior to further travel as a booster dose may be required.

