

Rabies Vaccine

What is rabies?

- A viral disease which causes an acute inflammation of the brain and other nerve tissue in the body, resulting in death often within 2 to 6 days, often due to respiratory paralysis.
- Initial onset with headache, fever, malaise, sensory changes, disorientation, excitability, and eventually convulsions, delirium, and paralysis.
- Usually transmitted by contact with the saliva of an infected animal. The virus may enter the body through a break in the skin (a bite or a scratch), or through the mucous membranes of the mouth, nose, or eyes, and then eventually reaching the brain.
- Symptoms usually occur within 3 to 8 weeks after contact, but in some individuals it has been known to take several years after the initial contact for the disease to develop.
- No specific treatment; only supportive measures once the disease develops. In most cases, rabies can be prevented by prompt post-exposure use of Rabies Immune Globulin and Rabies vaccine.

Indications for rabies vaccine:

- For individuals who are at high risk for exposure to rabid animals, either through their occupation (veterinarian, trapper, etc.) or through travel to countries where rabies is endemic.
- For individuals who have had close contact with a possibly rabid animal, and especially when that animal is not available to be quarantined or tested.
- Booster of a single dose (the timing is determined by a blood titre) for those who may be at continued risk.

Pre-exposure administration:

- Three doses of vaccine are given: day 0, day 7, and day 21.
- If several individuals need this vaccine, the vial for each dose may be split and may be given intradermally, (0.1 ml. each) in which case each injection is given into the back of the upper arm. **A blood titre test must be done in 4 weeks after the final dose to determine the level of rabies antibodies. If inadequate, a full booster dose may be needed.**
- In the event that only one person is receiving the vaccine, each dose (1.0 ml) is given into the deltoid muscle of the upper arm.
- Booster of a single full dose (1.0 ml) is given as needed (determined by blood titre testing).
- Persons who continue to be at risk for exposure to rabies should have a blood titre test done every two years to determine the possible need for a booster dose.

Post-exposure administration:

- After an exposure to a possible rabid animal, your physician should be contacted as soon as possible to determine the need for post exposure rabies vaccine.
- Rabies Immune Globulin (RIG) is given if the client has no history of rabies vaccination, and then a series of five full doses (1.0 ml) of rabies vaccine: day 0, day 3, day 7, day 14 and day 28.

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COUNTY OF
LAMBTON

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Who should NOT get this vaccine?

- Do not give to persons with severe allergy to any vaccine component, including bovine serum, polymyxin, or neomycin.
- Do not give to persons with fever or serious infection.
- May be given to pregnant women if the risk is unavoidable, or after consulting the physician.

THERE ARE NO CONTRAINDICATIONS TO POST-EXPOSURE RABIES VACCINE

Adverse reactions:

- May cause redness, tenderness and itchiness at the site of injection in the first 24 hours after administration.
- A small percentage of people may develop slight fever, headache, or joint pain which may last up to 1 - 2 days.
- On rare occasions, generalized swelling, rash, fever, nausea and vomiting may occur within 2 - 21 days after administration. This type of reaction is more common after booster doses of vaccine, and may occur in up to 7% of individuals.

Severe reactions are rare. However, you should wait 15 minutes after your injection before leaving.

Report any severe reaction to your health care provider or to Community Health Services Department.

Always ensure the doctor or nurse updates your yellow Immunization record card and keep it in a safe place. Call the Community Health Services Department at 519-383-8331 to update your (and your family's) immunization record when you have a vaccine at your doctor's or elsewhere.