

Rabies Post-exposure Management

Treatment regimen for patients **unvaccinated** against rabies

Post-exposure prophylaxis (PEP) should be administered according to the most current recommendations of the Advisory Committee on Immunization Practices (ACIP). This fact sheet is based on the ACIP recommendations published in the following documents:

-MMWR **March 19, 2010**: *Use of a Reduced (4-Dose) Vaccine Schedule for Postexposure Prophylaxis to Prevent Human Rabies.*, Vol. 59, No. RR-2

-MMWR **May 23, 2008**: *Human Rabies Prevention –United States, 2008.* Centers for Disease Control and Prevention, Vol. 57, No. RR-3.

The Maricopa County Department of Public Health should be consulted before administering PEP.
For a risk assessment call: **602-747-7111** (24 hours a day)

Local Treatment of Wounds

All bite wounds should be washed immediately and thoroughly with soap and water for 10-15 minutes, AND should be irrigated with a virucidal agent, such as diluted iodine.

Tetanus prophylaxis and measures to control bacterial infections should be provided when indicated.

Human Rabies Immune Globulin (HRIG)

HRIG is administered only once, at the beginning of post-exposure prophylaxis. Both HRIG products, HyperRab™ S/D or Imogam® are considered equally efficacious when used as described in these recommendations.

If anatomically feasible, the full dose of HRIG should be thoroughly infiltrated in the area around and into the wounds. Any remaining volume should be injected IM at a site distant from rabies vaccine administration.

The gluteal muscle is **NOT** an acceptable site for HRIG. HRIG should never be administered in the same syringe or in the same anatomical site as the first vaccine dose.

Rabies Vaccine

A regimen of four 1-mL vaccine doses is typically administered. Either Human Diploid Cell Vaccine (HDCV- Imovax®) or Purified Chick Embryo Cell Vaccine (PCECV- RabAvert®) should be used.

Rabies vaccine should be administered IM in the deltoid for adults and children. Use the anterolateral thigh for infants.

The gluteal muscle should **NOT** be used for rabies vaccine injections. Administration in this area can result in lower antibody titers. Doses of rabies vaccine administered in the gluteal site should not be counted as valid doses and should be repeated.

Treatment regimen for patients **unvaccinated** against rabies

(Day 0 = date first dose of vaccine is administered)

Day	0	3	7	14
HRIG* (20 IU/kg body weight)	X			
Rabies Vaccine** (1 mL)	X	X	X	X

* If HRIG is not given on day 0, it may be administered within seven days of the first rabies vaccine.

A **5th dose of rabies vaccine should be given to immunocompromised patients on **day 28** and serum samples should be tested to ensure that an acceptable antibody response has developed after completing the series.

Rabies Post-exposure Management

Treatment regimen for patients **previously vaccinated** against rabies

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Determining Previously Vaccinated Status

Previously vaccinated persons are those who completed a **3 dose pre-exposure vaccination series** OR a **5 dose post-exposure vaccination series** with one of the following vaccines:

- Human Diploid Cell Vaccine (HDCV- Imovax[®])
- Purified Chick Embryo Cell Vaccine (PCECV- RabAvert[®])
- Rabies Vaccine Adsorbed (RVA-licensed in US but not available in US)

AND

had a documented rabies virus neutralizing antibody titer.

Local Treatment of Wounds

All bite wounds should be washed immediately and thoroughly with soap and water for 10-15 minutes, AND should be irrigated with a virucidal agent, such as diluted iodine.

Tetanus prophylaxis and measures to control bacterial infections should be provided when indicated.

Human Rabies Immune Globulin (HRIG)

HRIG is not indicated and may inhibit the strength or rapidity of an expected immune response.

Rabies Vaccine

A regimen of two 1-mL vaccine doses should be administered. Either Human Diploid Cell Vaccine (HDCV- Imovax[®]) or Purified Chick Embryo Cell Vaccine (PCECV- RabAvert[®]) should be used.

Rabies vaccine should be administered IM in the deltoid for adults and children. Use the anterolateral thigh for infants.

The gluteal muscle should **NOT** be used for rabies vaccine injections. Administration in this area can result in lower antibody titers. Doses of rabies vaccine administered in the gluteal site should not be counted as valid doses and should be repeated.

Treatment regimen for patients <i>previously vaccinated</i> against rabies		
<i>(Day 0 = date first dose of vaccine is administered)</i>		
Day	0	3
HRIG	NOT INDICATED	
Rabies Vaccine** (1 mL)	X	X