

Summary of Rabies Post-Exposure Prophylaxis (PEP) Recommendations

WOUND CLEANSING

All PEP should begin with immediate thorough cleansing of all wounds with soap and water. If available, a virucidal agent such as providone-iodine solution should be used to irrigate wounds.

RABIES POST-EXPOSURE PROPHYLAXIS (PEP) FOR IMMUNOCOMPETENT PERSONS NOT PREVIOUSLY IMMUNIZED

PRODUCT	ROUTE	SITE	EACH DOSE	# DOSES	SCHEDULE
Globulin*	Infiltrate around bite; excess IM	Wound; Gluteus or anterolateral thigh	20 IU/kg (0.133mL/kg)	1	Day 0
Vaccine**	IM	Deltoid (anterolateral thigh)	1.0 mL	4	Days 0, 3, 7 and 14

*Globulin = Human Rabies Immune Globulin (HRIG, i.e., “Imogam” or “HyperRab”)

- If anatomically feasible, the full dose of HRIG should be thoroughly infiltrated in the area around and into the wound. Any remaining volume should be injected intramuscularly at a site distant from the vaccine. HRIG should not be administered in the same syringe as vaccine.
- HRIG is given at a dose of 20 IU/KG of body weight all on Day 0. Do not administer more than the recommended dose.
- HRIG is administered only once, at the beginning of prophylaxis, to a previously unvaccinated person to provide immediate antibodies until the patient responds to vaccine by actively producing antibodies.
- If HRIG was not administered when vaccination was begun, it can be administered through the seventh day after the administration of the first dose of vaccine. Beyond the seventh day, HRIG is not indicated since an antibody response to rabies vaccine is presumed to have occurred.

** Vaccine = Human Vaccine (Human Diploid Cell Vaccine (HDCV) = “Imovax” and Purified chick embryo cell vaccine (PCECV) = “RabAvert”)

- Give 1.0 ml IM in the deltoid on days 0, 3, 7, 14. Anterolateral thigh may be used in infants and young children.
- Administer first vaccine dose in a separate syringe at a site distant from HRIG. Do not mix with HRIG. Subsequent doses (2-4) may be administered in the same location as RIG (e.g., deltoid, anterolateral thigh) if that is the preferred site for administration.
- This vaccine schedule is the only schedule recommended by the Centers for Disease Control and Prevention (CDC) shown to prevent human rabies. Should any variation from the above schedule occur, expert consultation must be obtained immediately.
- Appropriate completion of the series is the responsibility of the treating physician.
- See recommendations for immunocompromised persons on page 2.

RABIES POST-EXPOSURE PROPHYLAXIS (PEP) FOR PREVIOUSLY IMMUNIZED IMMUNOCOMPETENT PERSONS

- **Wound cleansing:** Immediately and thoroughly clean the wound as above.
- **Previously immunized:** any immunocompetent person with a history of a complete pre-exposure or postexposure vaccination regimen with HDCV, PCECV, or previous vaccination with any other type of rabies vaccine and a documented history of antibody response to the prior vaccination.
- **RIG:** Do not give RIG.
- **Vaccine:** HDCV or PCECV 1.0 mL, IM, one each on day 0 and day 3. The deltoid is recommended for older children and adults. The anterolateral thigh may be used in infants and young children.

Summary of Rabies Post-Exposure Prophylaxis (PEP) Recommendations

RABIES POST-EXPOSURE PROPHYLAXIS (PEP) FOR IMMUNOCOMPROMISED PERSONS

- **Wound cleansing:** Immediately and thoroughly clean the wound as above.
- **Immunosuppression:** Corticosteroids, other immunosuppressive agents, antimalarials, and immunosuppressive illness might reduce immune responses to rabies vaccines.
- **RIG:** Administer RIG as above.
- **Vaccine (previously unvaccinated persons):** HDCV or PCECV 1.0 mL, IM, one each on day 0, 3, 7, 14 and 28. The deltoid is recommended for older children and adults. The anterolateral thigh is recommended for infants and young children. Post-vaccination serologic testing is necessary to assure full protection.
- **Vaccine (previously vaccinated persons with documented immunity):** Handle on a case-by case-basis guided by post-vaccination serologic testing. The two-dose series may be an option for some persons in this category.

POST-VACCINATION SEROLOGIC TESTING

- **Immunocompetent persons:** Not indicated unless ongoing exposure (e.g. occupational risk) is anticipated.
- **Immunocompromised persons:** Obtain a serologic specimen 1-2 weeks after vaccination series is completed. The specimen should completely neutralize challenge virus at least at a 1:5 serum dilution by the rapid fluorescent focus inhibition test (RFFIT). Commercial tests not approved by the FDA are not appropriate substitutes for RFFIT.

OTHER CONSIDERATIONS

- **Tetanus:** should be brought up to date.
- **Antimicrobial prophylaxis:** should be considered for some bite wounds.

INFORMATION AND RECOMMENDATIONS

- **Morbidity and Mortality Weekly Report (MMWR):** Complete CDC recommendations are available at: <http://www.cdc.gov/mmwr/pdf/rr/rr5902.pdf> and <http://www.cdc.gov/mmwr/pdf/rr/rr57e507.pdf>
- **Vaccine Information Statement (VIS):** The CDC VIS should be given to each patient receiving vaccine: <http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-rabies.pdf>
- **Package insert:** As always, refer to the package insert for additional considerations. Although the new Advisory Committee on Immunization Practices (ACIP) recommendations for the four-dose series have been published, vaccine package inserts are not expected to reflect this new guidance in the foreseeable future.

VACCINE AND RIG ORDERING - PEP MEDICATION THROUGH PATIENT'S EXPENSE (OR INSURANCE)

IMOVAX; IMO GAM: Sanofi Pasteur 1-800-822-2463 <http://www.vaccineplace.com/products/>
RABA VERT: Novartis Vaccines and Diagnostics 1-800-244-7668 <http://www.rabavert.com>
HYPERRAB: Talecris Biotherapeutics 1-800-243-4153 <http://www.talecris-pi.info>

PEP FOR INDIGENT PATIENTS

Sanofi Pasteur (administered through the Franklin Group): 800-VACCINE or 866-801-5655
 Novartis (managed through RX for Hope): 800-589-0387 or go to the following website
<https://www.rxhope.com/PAP/info/PAPList.aspx?drugid=319&fieldType=drugid>

RABIES IN WEST VIRGINIA

Rabies information and surveillance data:

<http://www.dhhr.wv.gov/oeps/disease/Zoonosis/Rabies/Pages/Rabies.aspx>

Local Health Department: <http://www.wvochs.org/dlh/localhealthdepartmentwebsitelinks.aspx>

Bureau for Public Health Division of Infectious Disease Epidemiology: (800)-423-1271, option #1