Rabies Frequently Asked Questions

1. What is rabies and how is it transmitted?

Rabies is a preventable viral disease. The rabies virus infects the central nervous system and causes disease in the brain. There is no effective treatment and once symptoms start, death is inevitable. The rabies virus is transmitted from infected animals to humans through scratches, bites, or licks on mucous membranes of the lips or eyes. The virus cannot be transmitted through intact skin, so touching, petting or being close to the animals is not a risk. In addition to dogs, many other animals can transmit rabies. In South Africa, these most importantly include: cats, cattle, bats and mongoose.

2. Can rabies be prevented?

Yes! By following a few easy steps:

- Vaccinate your pets: You should ensure that your dogs and cats are regularly vaccinated against rabies it is a legal requirement. Dogs and cats should be given vaccine at 3 months of age, a booster within the following 9 months, and every 3 years thereafter. In high risk areas, yearly vaccinations are recommended. If you are not sure if your pet has been vaccinated, when your pet last received a vaccine, or if overdue for a vaccine then visit your local veterinarian immediately.
- Avoid being bitten: Not every bite poses a risk of rabies, but a bite or scratch from a stray animal, sick animal, an animal that is behaving strangely, or an unprovoked attack would suggest a rabies risk. Never handle stray animals or animals that appear sick.
- If exposed to a suspected rabid animal:
 - Wash the wound: Washing of the wound very well for at least 10 minutes with water or soap and water to wash out the virus.
 - Seek treatment early if exposed: Rabies can be prevented in almost 100% of human cases if correct preventative treatment is given timeously after being exposed to suspected rabid animals. Visit your doctor as soon as possible. The doctor will asses your risks and, if required, will give a course of rabies vaccinations. In certain instances, you may also require rabies immunoglobulin to be injected into the wounds.

3. What are the symptoms and signs of rabies disease?

In humans: The first symptoms of rabies are flu-like, including fever, headache and fatigue, which then progresses to involve the respiratory, gastrointestinal and/or central nervous systems. There may be signs of hyperactivity ('furious' rabies) or paralysis ('dumb' rabies). In both furious and dumb rabies, there is progressive paralysis, followed by coma. Death occurs during the first seven days of illness.

In animals: Rabid animals behave abnormally. They may show a lack of fear, be aggressive, seem disoriented, paralyzed or partially paralyzed (particularly in the hind quarters), and salivate excessively, or they may show none of these symptoms. An infectious rabid animal may be healthy in appearance and behaviour for a period of time prior to the onset of clinical rabies.

4. How is rabies diagnosed?

In animals, rabies is diagnosed using a test which looks for the presence of rabies virus in brain tissue. In humans, several tests are available to confirm rabies disease once a person becomes ill; however, there are no tests which can detect if rabies has been transmitted from exposure to a rabid animal before a person becomes ill.

5. Who is most at risk?

People most at risk of rabies live in rural areas of Africa and Asia, where access to healthcare and animal health facilities is limited, stray dogs are more common, and fewer pets are regularly vaccinated against rabies. Children are at the highest risk of dog rabies; about 30% to 60% of the victims of dog bites are children less than 15 years of age, and children often play with animals and are less likely to report bites or scratches.

In areas known for rabies, persons with frequent exposure to animals (e.g. veterinarians or animal health workers, wildlife specialists or researchers) are also at high risk.

6. Is there immunization against rabies?

Yes, there is an effective, safe vaccine against rabies. Certain groups of people at higher risk of being exposed to rabid animals should consider vaccination to protect themselves: Those who work with animals (including veterinarians, animal health workers, conservationists, zoologists etc).

Travellers who are planning to visit remote areas where there is a risk of rabies, and medical care is difficult to obtain or may be delayed (for example, hiking through remote villages

where dogs are common). Although vaccination does not eliminate the need for additional therapy after a rabies exposure, it simplifies management by eliminating the need for antirabies immune globulin and decreasing the number of doses of vaccine needed.