



- Please bring to the attention of all doctors -

Date: 16 February 2023

Contact telephone number: 1300 232 272 (24 hours/7 days)

Australian bat lyssavirus and rabies – reminder on key principles

A recent detection of Australian bat lyssavirus (ABLV) in a bat in the Adelaide metropolitan area and increasing numbers of returned travellers requiring rabies post-exposure prophylaxis, have highlighted the importance of medical practitioners knowing the principles of ABLV and rabies prevention & management.

Rabies virus & ABLV are both lyssaviruses, and are usually fatal. Both are transmitted through bites or scratches, or exposure of saliva onto mucous membranes or broken skin from an infected mammal. The [World Health Organization](https://bit.ly/3ldDfFi) estimates that more than 55,000 people die from rabies worldwide each year (<https://bit.ly/3ldDfFi>). [Rabies-endemic locations](https://bit.ly/2Rqg4ig) include Indonesia (including Bali), much of Asia, Africa & the Middle East; much of North, South & Central America; and much of Europe (<https://bit.ly/2Rqg4ig>).

Rabies has not been detected in terrestrial mammals in Australia, however ABLV occurs in flying foxes/fruit bats & insect-eating microbats. The overall prevalence of ABLV in bats is estimated to be <1% in healthy bats, but around 5-10% in sick, injured, or orphaned bats. Three cases of human infection with ABLV have been recorded in Australia (all in Queensland) since 1996, and all three cases died from their ABLV infection after being bitten or scratched by bats. The behaviour or appearance of a bat is not an accurate guide as to whether it has been infected. Exposure to bat faeces or urine does not carry a risk of ABLV. **Any bat in Australia should be assumed to potentially carry ABLV.**

Medical practitioners are advised to:

- **Be aware** that any bites, nibbles, or scratches, or exposure of saliva onto mucous membranes or broken skin from bats from anywhere in the world or any mammals in [rabies-endemic countries](https://bit.ly/2Rqg4ig) are potential lyssavirus exposures (<https://bit.ly/2Rqg4ig>).
- **Advise** patients not to touch or handle a bat, and not to attempt to rescue distressed bats unless appropriately trained and vaccinated.
- **Advise** members of the public to call the Fauna Rescue's 24-hour Helpline on 8486 1139 or Bat Rescue SA on 0475 132 093 to arrange for removal of a dead, sick, or injured bat.
- **Advise** patients to educate their children to not touch living, injured or dead bats, and to tell an adult immediately if they have been bitten or scratched by a bat.
- **Consider** rabies vaccine for travellers to countries where rabies is common & persons are likely to be exposed to bats or other mammals. See the [Australian Immunisation Handbook](https://bit.ly/3lffmNE) (<https://bit.ly/3lffmNE>).
- **Counsel** patients that when travelling overseas to rabies-endemic countries, to avoid contact with **all** wild or domestic mammals (including bats, dogs, cats, and monkeys).
- **Counsel** patients travelling to rabies endemic countries to immediately seek healthcare overseas if a potential lyssavirus exposure occurs (explain what these are). Ensure documentation of treatment given so rabies vaccine post exposure can continue and is not duplicated upon return to Australia.
- **Notify** the Communicable Disease Control Branch (CDCB) of any case of ABLV or rabies on 1300 232 272.
- **See** www.sahealth.sa.gov.au/youvegotwhat for patient information on ABLV, rabies & overseas travel.

Medical practitioners are advised, in relation to post-exposure management, to:

- **Undertake** urgent assessment of all potential lyssavirus exposures.
- **Ensure** appropriate wound care. Thoroughly wash the wound for at least 15 minutes with soap and water, then apply an antiseptic solution such as povidone-iodine or ethanol. If mammal saliva gets in the eyes, nose, or mouth, flush the area thoroughly with water for several minutes.
- **Contact** CDCB on 1300 232 272 to discuss post exposure prophylaxis (PEP), including rabies immunoglobulin (HRIG) and post-exposure rabies vaccinations. CDCB will organise logistics of HRIG/vaccine transportation. The [Australian Immunisation Handbook](https://bit.ly/3lffmNE) outlines the recommendations for PEP (<https://bit.ly/3lffmNE>).
- **Be aware** that rabies vaccine & immunoglobulin is free for persons with potential lyssavirus exposures.
- **See** www.sahealth.sa.gov.au/infectiousdiseasecontrol for information on rabies PEP.