



# The “Baccoon” isn’t real, but rabies is.

Protect your family and pets.

Stay away from raccoons, skunks, foxes and bats.

## Rabies Post-Exposure Prophylaxis Fact Sheet

### Vaccine Information

Two rabies vaccines are marketed for active immunization of humans in Canada.

**Imovax® Rabies, Sanofi Pasteur Ltd.**

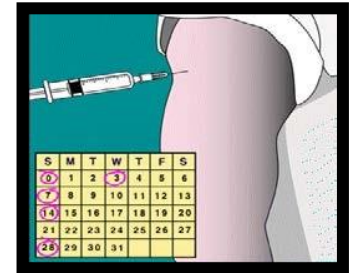
- human diploid cell culture (HDCV)

**RabAvert®, Merck Frosst (distributor)**

- purified chick embryo cell vaccine (PCECV)

Sterile diluent is supplied for reconstitution into a single 1.0 mL dose. Neutralizing antibodies develop 7 days after the initial rabies vaccine dose.

Dose Number	When to Administer	Vaccine Dose	Administration Site
#1	Day 0	1.0 mL	Deltoid
#2	Day 3	1.0 mL	Deltoid
#3	Day 7	1.0 mL	Deltoid
#4	Day 14	1.0 mL	Deltoid
Additional 5 <sup>th</sup> dose only for those that meet the Immunocompromised Persons Criteria			
#5	Day 28	1.0 mL	Deltoid



### Storage and Handling Rabies Vaccine Administration Site

Protect Vaccine from light and store in a monitored refrigerator with temperatures between + 2 °C to + 8 °C. Administer the rabies vaccine **intramuscularly**. For adults and children administer in the deltoid area. In infants and small children, the anterolateral aspect of the thigh is also acceptable and for infants <1 yr. old in the vastus lateralis. The gluteal area should never be used for vaccines because injections in this area result in lower neutralizing antibody titres.

### Immunocompromised Persons

Immunocompromised persons, including those on corticosteroids, immunosuppressive drugs, chloroquine, and those with immunosuppressive illnesses will require the 5<sup>th</sup> dose on day 28. The ordering physician should determine if the patient is considered immunocompromised and requires a 5<sup>th</sup> dose.

### Missed Doses

The recommended vaccination schedule should be followed, and the vaccine should never be given earlier than prescribed. If the schedule is delayed, the vaccination schedule can be resumed as though the patient were on schedule. For example, if a patient missed the Day 7 dose and presents for vaccination on Day 10, the Day 7 dose should be administered that day and the schedule should be resumed as if it were on schedule by giving the next dose seven days later as the Day 14 dose. It is important to maintain the same interval between doses.

### Previously Vaccinated Persons

Rablg, Rabies Immune Globulin, is not indicated and should not be given to someone who has been previously appropriately immunized. Previously immunized individuals who require post-exposure prophylaxis will require two doses of HDCV or PCECV, one administered immediately and the other 3 days later. Appropriate previous rabies immunization consists of documentation of a complete course of pre-exposure or post-exposure prophylaxis with HDCV or PCECV, OR documentation of complete immunization with other types of rabies vaccine, with the demonstration of an acceptable concentration of neutralizing rabies antibody in serum after completion of the series. A complete course of HDCV or PCECV with Rablg, is recommended if the above criteria is not met.

### Contraindications & Rabies Vaccine Interchangeability

There are no contraindications to the use of rabies vaccine or Rablg after a suspected rabies exposure. RabAvert® and Imovax® are interchangeable in terms of indications for use, immunogenicity, efficacy and safety.



# The “Skox” isn’t real, but rabies is.

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## Rabies Post Exposure Prophylaxis Fact Sheet

### Rabies Immune Globulin (Rablg)

#### Storage and Handling

Protect Vaccine from light and store in a monitored refrigerator with temperatures between + 2 °C to + 8 °C.

#### Administration

Rablg should be administered as soon as possible after exposure. This generally occurs on the same day that the person receives their first dose of rabies vaccine. Since vaccine-induced antibodies begin to appear within 1 week, there is no value in administering Rablg more than 7 days after initiating an approved vaccine course.

Preferably, the full dose of Rablg should be thoroughly infiltrated into the wound and surrounding area. If not anatomically feasible, any remaining volume should be injected intramuscularly at a site distant from the vaccine administration site. If the site of the wound is unknown, the entire dose should be administered intramuscularly. Due to interference with active antibody production, the recommended RIG dose should not be exceeded.

Rablg should be injected directly into the edges surrounding the wound. When more than one wound exists, each area should be locally infiltrated with a portion of the Rablg using a separate needle and syringe, if possible. In these instances, the Rablg may be diluted 2 to 3 fold in order to provide the full amount of human Rablg required for good infiltration of sites at risk of rabies. For instructions on dilution please refer to Product Monograph.

**DO NOT** mix the rabies vaccine in the same syringe as the Rablg.

**DO NOT** administer the rabies vaccine in the same anatomical site as the Rablg.

The recommended dose of Rablg is 20 IU/kg of body weight. Rablg is supplied in either 2 mL vials containing 150 IU/ml or 1 mL containing 300 IU/ml. Use the applicable following formula, depending on 2 mL or 1 mL vial to calculate the dose.

#### 2 ml Vial

$$\frac{20 \text{ IU/kg} \times (\text{client weight in kg})}{150 \text{ IU/mL}} = \text{dose in mL}$$

#### 1 mL Vial

$$\frac{20 \text{ IU/kg} \times (\text{client weight in kg})}{300 \text{ IU/mL}} = \text{dose in mL}$$

#### Drug Interactions

After receiving Rablg, measles or varicella-containing vaccine administration should be deferred for 4 months. Rablg can interfere with vaccine effectiveness when given within 14 days after receiving the univalent varicella, MMRV, or MMR or any of the individual components of the MMR vaccine. Under these circumstances, immunization should be repeated 4 months after receiving Rablg. If Rablg is administered more than 14 days after vaccination with the above-named vaccines, immunization does not have to be repeated. Studies have found no evidence that Rablg interferes with the response to inactivated vaccines, toxoids or the live vaccines for yellow fever or polio.

#### Video (YouTube) – Rabies Post Exposure Prophylaxis Administration Tutorial

<https://www.youtube.com/watch?v=yCuTF3hVt-o&feature=youtu.be>

Refer to the Canadian Immunization Guidelines – Rabies – Part IV for further details regarding exposure criteria and vaccine and Rablg information. See link below. <http://healthycanadians.gc.ca/publications/healthy-living-vie-saine/4-canadian-immunization-guide-canadien-immunisation/index-eng.php?page=18>