

Summary and Action Items:

- Until further notice, use RabAvert vaccine for rabies vaccination for either pre or post-exposure administration. RabAvert can be purchased directly from the manufacturer on an as-needed basis.
- For rabies immune globulin (RIG), Kedrab and HyperRab are available. Imogam is only available directly from the manufacturer at this time.
- As always, please ensure that persons who are receiving rabies post-exposure prophylaxis (PEP) are recommended for rabies PEP per guidance in the “Human Rabies Prevention-United States, 2008, Recommendations of the ACIP” (link under additional resources).
- Correctly administer rabies vaccine to avoid the need to re-do a rabies vaccination.
- Review information on the CDC website (link under additional resources).

Background:

Imovax (produced by Sanofi Pasteur) is experiencing a temporary supply shortage and is not available at this time. RabAvert vaccine (produced by GlaxoSmithKline) is experiencing a temporary limited supply but is still available for both pre-exposure prophylaxis and PEP. If vaccine is not available from the distributor, order directly from the manufacturer on an as-needed basis. Healthcare providers who are unable to obtain Imovax should use RabAvert during this time, even if Imovax was used to start a pre-exposure or PEP schedule that is in progress.

Both Kedrab (produced by Kedrion Biopharma) and HyperRab (produced by Grifols) are available with no restrictions for rabies immune globulin. Imogam (produced by Sanofi Pasteur) is currently experiencing a temporary shortage. Providers can obtain Imogam directly from the manufacturer.

CDC continues to work with partners to monitor the status of rabies biologic supplies. The current situation is not expected to impact overall availability of PEP nationally. Healthcare providers should continue to administer PEP when indicated.

Potential Exposures:

- **Rabies PEP is needed for the following situations unless the animal tests negative**
 - Waking up to a bat in the room, or someone unable to tell if they were bitten by a bat that was in the room with them (small child, person who is mentally impaired).
 - Bare skinned physical contact with a bat where a bite cannot be ruled out.
 - Bite from high-risk untested animals, including but not limited to, bat, fox, coyote, raccoon, skunk and groundhog.
 - Bites from animals with signs of rabies including neurologic animals and animals that are highly aggressive.
 - Consultation should be obtained on bites occurring overseas.
- **Rabies PEP is not needed for the following types of exposures**
 - Bites from healthy dogs, cats, or ferrets that have bitten due to typical situations (like trying to pet an unfamiliar animal, go onto property where a dog lives, separating two fighting animals, running/biking past a dog). Please call your local health

department (LHD) before administering rabies PEP for a dog/cat/ferret bite that occurred in the U.S.

- Bites from healthy small rodents or rabbits.
- Competent adults who are awake and a bat is in the area and there is no physical contact with the bat.

What can local health departments and providers do?:

- Administer rabies PEP correctly and only when needed
- Enhance communication between providers treating an exposed person and LHDs.

Prevention:

- Increase general rabies awareness and prevention messages
 - Vaccinate pets and valuable livestock
 - High risk animals that have exposed a person should be tested for rabies
 - Providers should consult with LHDs about the use of rabies PEP in any situations that do not meet the criteria for rabies PEP under the potential exposures area of this memo.

Rabies PEP administration for those with healthy immune systems and not previously vaccinated.

- 4 doses of rabies vaccine on days 0, 3, 7, and 14 in the deltoid (thigh can be used for very small children) plus rabies immune globulin on day 0 (around the site of the bite and in an area away from where vaccine was administered and not in gluteus due to possible injury to sciatic nerve). If there is not a bite, administer RIG in deltoid not used for vaccine or in other IM location that does not risk sciatic nerve damage.
- For those who are immunosuppressed, add an additional vaccine dose at Day 28.

Rabies PEP administration for those previously vaccinated or given previous rabies PEP

- Two doses of vaccine in deltoid (small children can be administered IM in thigh) day 0 and 3. No RIG should be given.

IDPH and LHD Response:

- IDPH will share updated information.
- LHDs will alert IDPH if they receive calls from providers having difficulty obtaining RabAvert.

Contact:

Providers should contact their LHDs for consultations about rabies PEP.

Additional Resources:

CDC rabies product link: <https://www.cdc.gov/rabies/resources/availability.html>

CDC ACIP link: <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5703a1.htm>

Target Audience:

Local Health Departments, Infectious Disease Physicians, Hospital Emergency Departments, Infection Control Preventionists, Health Care Providers, and Hospital Pharmacists

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