Email: ImmunisationPolicy@gov.scot



Dear Colleague

RABIES PRE AND POST-EXPOSURE PATIENT PATHWAYS

 This letter provides updated information on arrangements for rabies assessment, testing, vaccination and treatment in Scotland.

Background

- 2. Rabies is an acute viral encephalitis which is almost always fatal. The disease may be caused by rabies virus genotype 1 (classical rabies) or less commonly by rabies-related lyssaviruses from bats e.g. European Bat lyssavirus (EBLV). In most cases, the rabies infection is acquired by humans as a result of a bite or scratch from a rabid animal.
- 3. Human rabies is extremely rare in the UK. However a fatal human rabies case caused by EBLV2 from a bat occurred in Scotland in 2002. Cases occurring since then have all been acquired abroad, usually through dog or, less frequently, cat bites.
- **4.** The combination of pre and post-exposure vaccination is highly effective in preventing serious illness or fatality if administered appropriately and in a timely manner.

Vaccine and eligibility

5. Please refer to the Green Book chapter 27¹ for current information on the licensed vaccine/s in use for rabies in the United Kingdom and eligibility.

Pre-exposure assessment and immunisation with rabies vaccine

6. The need for pre-exposure immunisation is determined by an individual risk assessment, considering the likelihood of exposure to rabies and rabies-related

From the Chief Medical Officer for Scotland Professor Sir Gregor Smith

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Addresses

For action **NHS Boards** NHS Board Immunisation Coordinators Scottish Immunisation Programme Group **Practice Nurses** Primary Care Leads, **NHS Board Medical Directors** Nurse Directors, Directors of Public Health Infectious Disease Consultants NHS Board Travel Health Teams Secondary Care Clinicians Out of Hours Departments Occupational health

For information

NHS Board Chief Executives
Directors of Pharmacy
Consultant Physicians
General Practitioners
Scottish General Practitioners
Committee
Public Health Scotland
Chief Executive, NHS Health
Scotland
NHS 24
Scottish Health Protection Network
Scottish Microbiology and Virology
Network
Association of NHS Occupational
Physicians

Further Enquiries to:

Policy Issues
Vaccination Policy Team
ImmunisationPolicy@gov.scot







¹ GreenBook_chapter_27_rabies.pdf (publishing.service.gov.uk)

viruses.

7. Pre-exposure vaccination is recommended for individuals who are undertaking certain activities which carry a risk. This may include one or a combination of: carrying out their occupation; voluntary activities; travel to high risk areas. The Green Book chapter 27 on rabies provides further details of those covered.

- 8. Travellers should be advised to consider if they may need the rabies vaccine using the Fit for Travel website². Following this, the individual should seek further assessment and administration of the vaccination, if required. Travellers are expected to pay for pre-exposure rabies vaccination and any antibody testing required.
- 9. For individuals seeking pre-exposure assessment, including any antibody testing, and vaccination as a result of their occupation for example, travel for work, or other potential occupational exposure to the rabies virus it is the employer's responsibility to seek assessment and pay for the private provision of these services.
- **10.** Students who may require rabies assessment, testing and vaccination should follow their university or college quidance on the matter.
- 11. Volunteer bat handlers, where no formal employer can be identified, should follow the pathway set out by their local Health Board to receive their primary course vaccination. For volunteer bat handlers with a likely frequency of ongoing exposures, antibody testing should be available through a local Health Board pathway. Where test results indicate insufficient protection there should be onward referral for booster vaccination from the local Health Board. These services should be provided for free by the local Health Board.
- 12. In Scotland each Health Board must have in place a clear pathway, or pathways, for all patients to access pre-exposure assessment, primary vaccination course and any subsequent boosters, where required.
- 13. In addition, each Health Board should have a clear pathway to access antibody testing to determine protection, where noted in the Green Book chapter 27 as required, or where it might be sought as part of an assessment for booster doses.
- **14.** The details of these pathways must be communicated to those across the workforce to support referrals and

Peggy Winford Peggy.winford@gov.scot

Medical Issues
Dr Lorna Willocks
St Andrews House
Lorna.willocks@gov.scot

Pharmaceutical and Vaccine Supply William Malcolm NHS National Services Scotland william.malcolm@nhs.scot







² https://www.fitfortravel.nhs.uk/advice/disease-prevention-advice/rabies

signposting. Local public communications which advise how to access pre-exposure assessment and immunisation are also required to provide information for patients. This information should be available online and through a non-digital route.

15. As a result of the now concluded Vaccination
Transformation Programme (VTP), GP practices are no longer delivering vaccinations in most areas. However some local Health Board pathways may involve GP practices for patient assessment, referral and aftercare for the rabies vaccine. General practice colleagues are reminded of their ongoing duty to promote vaccination and to signpost patients for preventive care.

Post-exposure assessment and immunisation with rabies vaccine

- 16. All scratches or bites from a potentially rabid animal require urgent wound care and post-exposure risk assessment to determine if vaccination and/or immunoglobulin is required, as well as after-care treatment.
- **17.** Detailed information on post-exposure management, wound treatment and risk assessment is in Green Book chapter 27.
- 18. Individuals entering Scotland after potential rabies exposure should be provided with a full and urgent assessment for risk by their local Health Board, vaccination and other treatment and aftercare, as required.
- 19. In Scotland each Health Board must have in place a clear pathway, or pathways, for individuals to access full post-exposure assessment, vaccination and postexposure care; as well as testing, as required. For urgent and emergency situations, an out of hours option needs to be available.
- 20. In particular, health professionals, including GPs and pharmacists, who may be approached by individuals should understand the need for urgent assessment, the role of wound care and where subsequent treatment can be accessed.
- 21. The details of these pathways must be communicated to those across the workforce to support referrals and signposting. Local public communications which advise how to access post-exposure risk assessment, care and immunisation are also required to provide information for







patients. This information should be available online and through a non-digital route.

Yours sincerely

Gregor Smith

Professor Sir Gregor Smith
Chief Medical Officer for Scotland





