THE UNIVERSITY OF QUEENSLAND AUSTRALIA

OH&S Occupational Health & Safety Unit

Hazard Alert

Lyssavirus

The following information is being mailed to: Executive Deans, Heads of Departments/ Sections of the following Faculties - Biological and Chemical Sciences, Health Sciences, Natural Resources, Agriculture & Veterinary Science with copies also being sent to Workplace Health and Safety Officers, Workplace Health and Safety Representatives and Safety Co-ordinators of these faculties:

Background

The ABC News has released the news that the bat-borne lyssavirus has been implicated in the death of another person. A woman died this week in the Mackay Base Hospital after being bitten by an infected bat two years ago. Recently she became ill and started to show symptoms of the virus. A Rockhampton wildlife carer also died after being bitten by a bat just over two years ago.

Lyssavirus is closely related to the rabies virus. Testing of bats in Australia has shown that the virus is widely distributed in Australia. It should be assumed that all Australian bats have the potential to carry lyssavirus. The usual means of transmission of lyssavirus to humans is through bites or scratches from infected animals.

Recommendations:

Pre-exposure vaccinations

Pre-exposure vaccination should be recommended to those who are occupationally exposed to bats where there is a risk of being bitten or scratched. For example:

- Bat carers, bat handlers, researchers and students;

- Veterinarians and veterinary assistants;
- Veterinary laboratory staff;
- Wildlife officers;
- Managers of display or research colonies of bats.

Pre-exposure vaccination consists of three doses of rabies vaccine given on days 0, 7 and 28. Booster doses are recommended every 2 years. The incidence of side effects (not life threatening) does increase with booster doses.

Post-Exposure Treatment

The wound should be washed thoroughly as soon as possible with soap and water. Proper cleansing of the wound is the single most effective measure for reducing the transmission of classic rabies virus. Where possible, without placing other persons at risk of exposure, the bat should be kept for investigation by the State veterinary laboratory.

The person sustaining the bite or scratch should contact either their medical practitioner or the University Health Service who will make a decision on the appropriate treatment.
Pre-exposure vaccination will be needed if the person has on-going contact with bats. Post-exposure vaccination consists of 5 doses of rabies vaccine. Rabies immunoglobulin should be given as a single dose at the same time as the first dose of the post-exposure vaccination course. It should not be given at the same site as the vaccine. If a rabies vaccination has commenced more that seven days prior to injury, rabies immunoglobulin is not necessary.

If the bat has been kept, arrangements should be made immediately with the State veterinary laboratory to have it tested where post exposure vaccination is indicated.

Implications for the University of Queensland

Reasonable precautions including the use of personal protective equipment to avoid bites or scratches from bats are vital. Handling bats should be avoided where possible.
The University department concerned usually funds pre-exposure vaccination. Initial

post-exposure vaccination may be made available through arrangement with public health authorities. Further treatment will be dependent on the results of the injured worker's blood tests and the results of serological testing of the bat.

For further information please contact the University Health Service on 56210 or Occupational Health and Safety on 52365. Medical information on lyssavirus is available at http:// www.health.gov.au:80/pubhlth/strateg/communic/lyshlth.htm.

Issued on 15 December, 1998 by:

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