Frequently Asked Questions (FAQ) About Rabies

What is the incubation period of rabies in animals?

The incubation period is the time between exposure and onset of clinical signs of disease. The incubation period may vary depending on the species from a few days to several years, but typically lasts 1 to 3 months for domestic animals. Wildlife, such as bats and raccoons, may have incubation periods much longer, up to 6-12 months. This period is quite long because the rabies virus spreads slowly through the nerves to the spinal cord and brain. There are no signs of illness during the incubation period; rabies virus is not transmissible during this time. When the virus reaches the brain, it multiplies rapidly and passes to the salivary glands. At the point clinical symptoms of rabies become present and the rabies virus can be transmitted via saliva. For information on specific incubation times for different species, please see the appropriate chapter earlier in this manual.

How can I protect my pet from rabies?

First, take your pet to the veterinarian on a regular basis and keep rabies vaccinations up-to-date for all dogs, cats, and ferrets. This is a legal requirement in the State of Alabama. Second, keeping your pets under direct supervision will help prevent unknown exposures to the wild rabies-carrying wildlife population. Third, spay or neuter your pets to help reduce the number of unwanted pets that may not be properly cared for or vaccinated regularly.

Why does my pet need the rabies vaccine?

Your pets and other domestic animals can be infected when they are bitten by rabid wild animals. Animals represent a common link between humans and the rabies reservoirs. When rabies occurs in domestic animals, the risk to humans is increased. Therefore, pets are vaccinated to prevent them from acquiring the disease from wildlife, and possibly transmitting it to humans.

What happens if a neighborhood dog or cat bites me?

First, you should seek medical evaluation for any animal bite. In Alabama, potential exposures must be confirmed by a licensed physician before ADPH can issue quarantine orders. The county health department should be notified by you or your physician or in some cases by the local law enforcement agency that is involved. ADPH will then investigate the exposure and determine what actions need to be taken for you and the animal by written and verbal communication.

If the animal is owned, it can be quarantined for 10 days under the supervision of a licensed veterinarian. Research on the disease stages of rabies in dogs, cats, and ferrets has proven that if the animal is still alive at the end of 10 days and free from clinical signs of rabies, then the animal was not shedding the virus at the time of the exposure, thus eliminating the chance of exposure to rabies virus. If a dog, cat, or ferret appeared ill at the time it bit you or
becomes ill during the 10 day quarantine, it should be evaluated by a veterinarian for signs of rabies and you should seek medical advice about the need for rabies prophylaxis.

For more information on recommendations about biting incidences, quarantine, and post-exposure prophylaxis see: Compendium of Animal Rabies Control, 2008 (CDC) and Rabies Prevention – United States, 2008 Recommendations of the Immunization Practices Advisory Committee (ACIP).

Can I get rabies in any way other than an animal bite?

Yes. Scratches, abrasions, open wounds, or mucous membranes contaminated with saliva or other potentially infectious material (such as brain tissue) from a rabid animal are considered potential exposures to rabies. If the touching of a suspected rabid animal results in contact with potentially infectious (wet) saliva or CNS tissue, consult with a physician to assess any potential exposure. It is very important that any possible exposures with a rabid animal be reported to the local or county health department by you, your physician, or the law enforcement agency that is involved. This is the first step in assessing the seriousness of an exposure and how to handle the situation. If the animal is owned, it can be quarantined for 10 days under the supervision of a licensed veterinarian. Research on the disease stages of rabies in dogs, cats, and ferrets has proven that if the animal is still alive at the end of 10 days and free from clinical signs of rabies, then the animal was not shedding the virus at the time of the exposure, thus, eliminating a chance of exposure to the rabies virus.

Inhalation of aerosolized rabies virus is also a potential non-bite route of exposure, but other than laboratory workers and spelunkers, most people are unlikely to encounter an aerosol of rabies virus. Other contact, such as petting a rabid animal or contact with the blood, urine, or feces (i.e., guano) of a rabid animal, does not constitute an exposure and is not an indication for prophylaxis. Contracting rabies from a non-bite exposure is dependent upon the virus living in an environment with ultraviolet light, outside of cells, and enduring at least some drying time. There are just too many variables to determine how long it could survive since it would be dependent on all of the environmental conditions in addition to the viral load. Non-bite exposures to rabies are very rare.

What medical attention do I need if I am exposed to rabies?

One of the most effective methods to decrease the chances for infection involves thorough washing of the wound with soap and water. Specific medical attention for someone exposed to rabies is called post-exposure prophylaxis or PEP. Post-exposure prophylaxis consists of a regimen of one dose of rabies immune globulin and five doses of rabies vaccine over a 28-day period. Rabies immunoglobulin and the first dose of rabies vaccine should be given by your health care provider concurrently when it has been determined to be indicated by a physician. Additional doses of rabies vaccine should be given on days 3, 7, 14, and 28 after the first vaccination. Current vaccines are relatively painless and are given in your arm, like a flu or
tetanus vaccine. For more information, please see Rabies Post-Exposure Vaccination for Humans section of the Manual on page 25.

**How long do I have until I start the rabies post-exposure prophylaxis?**

**Rabies is considered a medical urgency, not a medical emergency.** Always follow the guidance of your physician. Initiation of the shots depends on the animal that has exposed you possibly to rabies. Rabies vaccinations may be delayed depending on the species of animal and subsequent quarantine recommendations.

**Where can I go to obtain the Rabies Vaccine?**

The Alabama Department of Public Health (ADPH) does not routinely administer the rabies vaccine nor do they stockpile it. You should consult your physician or visit the local emergency room. ADPH will be available for consultation with your physician about the need to receive the vaccine, obtaining the vaccine, or its administration.

**What should I do if I come in contact with a bat?**

If you are bitten by a bat – or if infectious material (such as saliva) from a bat gets into your eyes, nose, mouth, or a wound – wash the affected area thoroughly and get medical attention immediately. Whenever possible, the bat should be captured and sent to a laboratory for rabies testing.

People usually know when they have been bitten by a bat. However, because bats have small teeth which may leave marks that are not easily seen, there are situations in which you should seek medical advice even in the absence of an obvious bite wound. For example, if you awaken and find a bat in your bedroom, see a bat in the room of an unattended child, or see a bat near a mentally impaired or intoxicated person seek medical advice and have the bat tested. People cannot get rabies just from seeing a bat in an attic, in a cave, or at a distance. In addition, people cannot get rabies from having contact with bat guano (feces), blood, urine, or from touching a bat on its fur (even though bats should never be handled).

**What should I do if I find a bat in my home?**

If you see a bat in your home and you are sure no human or pet exposure has occurred, confine the bat to a room by closing all doors and windows leading out of the room except those to the outside. The bat will probably leave soon. If not, it can be caught, as described below, and released outdoors away from people and pets.

However, if there is any question of exposure, leave the bat alone and call animal control or a wildlife conservation agency for assistance. If professional assistance is unavailable, use precautions to capture the bat safely, as described below.

**What you will need:**

Leather work gloves (put them on)

Small box or coffee can
Piece of cardboard

Tape

When the bat lands, approach it slowly and place a box or coffee can over it. Slide the cardboard under the container to trap the bat inside. Tape the cardboard to the container securely. First, contact your local veterinarian for euthanizing the bat. When correctly done, there will be no damage to the specimen needed for proper testing. Then contact your health department or animal control authority to make arrangements for rabies testing.

**Should I be concerned about rabies when I travel outside the United States?**

Yes. Rabies and rabies-like viruses can occur in animals anywhere in the world. In most countries, the risk of rabies in an encounter with an animal and the precautions necessary to prevent rabies are the same as they are in the United States. When traveling, it is always prudent to avoid approaching any wild or domestic animal.

The developing countries in Africa, Asia, and Latin America have additional problems in that dog rabies is common there and preventive treatment for human rabies may be difficult to obtain. The importance of rabid dogs in these countries, where tens of thousands of people die of the disease each year, cannot be overstated. Unlike programs in developed countries, dog rabies vaccination programs in developing countries have not always been successful. Before traveling abroad, consult a health care provider, travel clinic, or health department about your risk of exposure to rabies and how to handle an exposure should it occur.