



Rabies, still a neglected disease



Kills 1 person every 9 minutes
59,000 deaths per year worldwide¹



Transmitted by *the bite or scratch* of a rabid animal, **99% by dogs** but also by other wild and domestic animals¹



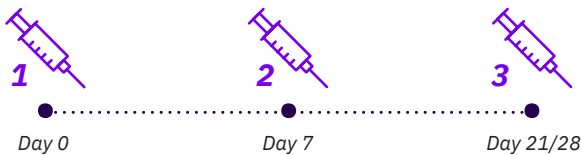
Causes *acute brain inflammation* and can have furious or paralytic forms¹



Fatal once symptoms appear¹

But is preventable *by vaccination*¹

As a preventive measure

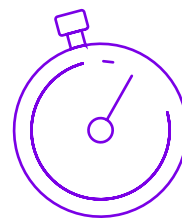


2-dose PrEP schedule

3-dose PrEP schedule

Pre-Exposure prophylaxis (PrEP) = **2 or 3 dose of vaccine*** over a 1- to 3-week period

After rabies exposure



PROMPT post-exposure intervention prevents the disease



Previously immunized against rabies or not, **ANY** potential rabies exposure requires *immediate post-exposure prophylaxis (PEP)* :



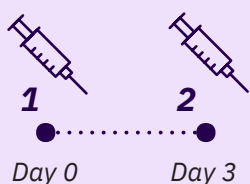
1 Extensive wound washing



15 min minimum

2 Vaccination

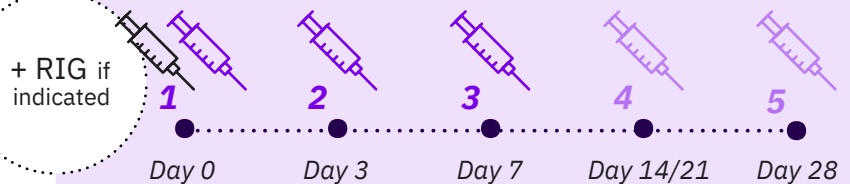
Schedule for **fully immunized** people against rabies (**PEP= 2 doses only**)



NO RIG needed

1 injection per dose whatever the administration route

Schedules for **non-fully immunized** people against rabies (**PEP= 3, 4 or 5 doses***)



+ RIG if indicated

1 injection per dose using intramuscular route 2 injections per dose using intradermal route

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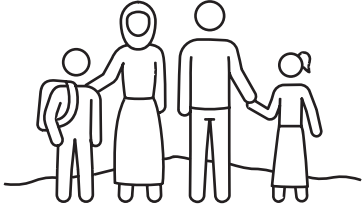
STRICTLY FOR HEALTHCARE PROFESSIONALS ONLY

RIG: rabies immunoglobulins
*: Schedules may vary depending on countries

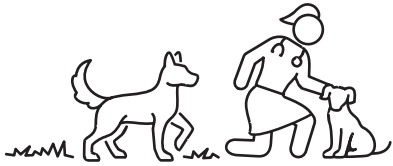
PrEP is recommended for populations at high risk of rabies exposure

Populations in highly endemic settings

with limited access to timely & adequate PEP¹



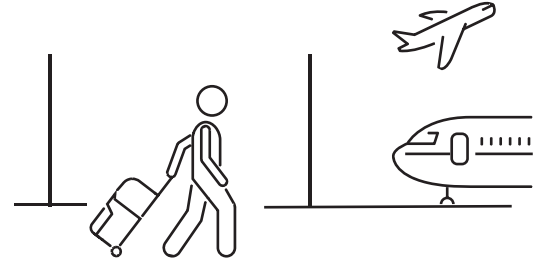
Travelers who may be at risk of exposure¹



Individuals exposed to potentially infected animals (lab workers, vets...)¹

Risk of rabies associated with travel

Incidence of animal bites in travelers = **0.4%/month of stay**²



Among travelers undertaking at risk activities only **2-11%** perceived very high or high risk of rabies exposure & only **8%** received PrEP vaccination³



Prevention against rabies (PrEP) should be considered before travelling to at-risk areas for rabies:

1

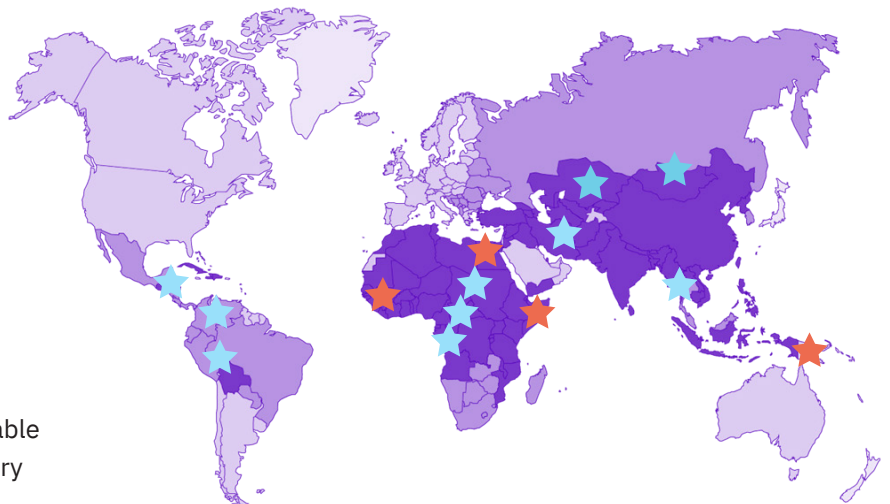
Because *rabies PrEP is highly recommended to international travelers* to high-risk areas for rabies by health bodies (WHO, US-ACIP)^{1,4}, especially if engaged in *remote outdoor activities*^{1,5}

2

Because *timely access to care and products (vaccine and RIG) are not guaranteed everywhere in the world*⁶, which could delay care and would result in premature end of trip

RABIES RISK LEVELS for humans*

- No risk
- Low risk
- Moderate risk
- High risk
- ★ RIG not readily available within 48h throughout the country
- ★ RIG+ vaccines not readily available within 48h throughout the country



* From WHO International Travel and Health. Distribution of risk levels for humans contracting rabies, worldwide, 2018

References

1. World Health Organization- WHO Position paper on rabies vaccines Apr 2018. 93 (16): 201–20. 2. Gautret P, et al. Rabies vaccination for international travelers. *Vaccine*, 2012. *Vaccine* 30: 126–133. 3. Marano C, et al. Perceptions of rabies risk: a survey of travellers and travel clinics from Canada, Germany, Sweden and the UK. *J Trav Med*. 2019. 26 (Suppl 1): S3–S9. 4. US Centers for Disease Control and Prevention. Advisory Committee on Immunization Practices (ACIP) recommendations. *MMWR* May 06, 2022. 71 (18):619-27. 5. World Health Organization. (2018). WHO expert consultation on rabies: third report. World Health Organization. <https://apps.who.int/iris/handle/10665/272364>. 6. Henry RE, et al. A country classification system to inform rabies prevention guidelines and regulations. *J Travel Med*, 2022. 1-9. 7. Atmassan SA, et al. A Case of Fatal Rabies in a Donkey in Dawakin Tofa, Kano State, Nigeria. *J. Anim.* 2020. *Health Prod.* 8(1): 40-4.