

RABIES VACCINE

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ISSUE:

Rabies vaccine supply is expected to be limited around the world until early 2006 due to a shortage of Imovax® Rabies vaccine, the only human rabies vaccine currently approved for use in Canada.

To mitigate this problem, the Public Health Agency of Canada has now secured two alternate products which are not yet approved in Canada: **Verorab** from Aventis-Pasteur (available in February) and **Rabavert** from Chiron (available at the end of March). These products will allow us to meet urgent needs for patients requiring pre-exposure and post-exposure vaccination, but it will be necessary to go through Health Canada's Special Access Program (SAP).

During the anticipated period of limited supply, it is critical for us to ensure that rabies vaccine is used appropriately and that vaccine is provided only to persons for whom it is recommended.

Post-exposure prophylaxis remains the highest priority given the need for urgent management of exposed persons. At the national level, public health supplies of approved vaccines are being reserved and distributed for this purpose.

If possible, pre-exposure vaccination should be deferred until supply issues are resolved. However, this would depend on the situation and an individual risk assessment would need to be completed prior to making such a decision.

Until further notice, I am therefore directing that:

1. All decisions regarding the use of human rabies vaccines, for both pre-exposure and post-exposure purposes, must be confirmed by the Chief Medical Health Officer or a delegate:
 - a. Dr. André Corriveau, CMHO(867)-920-8646 or 669-1756 (cell)
 - b. Dr. Kami Kandola, Deputy CHMO.....765-8172 (cell)
 - c. Wanda White, CDC Consultant.....(867)-920-8646

2. Any remaining supplies of rabies vaccine will be kept in central depots at Yellowknife and Inuvik hospital pharmacies until the CMHO or delegate has approved further distribution.
3. Pre-exposure vaccination should be done as follows:
 - a. Using **0.1 ml** of reconstituted freeze-dried Human Diploid Cell Vaccine, inject **intradermally** (ID) in the deltoid area of either arm.
 - b. Three doses are to be given, at 0, 7 and 21 days.
 - c. All attempts should be made to schedule people requiring pre-exposure immunization in groups, to minimize wastage.
 - d. People in high-risk occupations (wildlife officers, hunters & trappers and veterinarians) should have their titers checked annually and receive a 0.1 ml booster dose ID if the titer falls below 0.5 IU/ml.
4. Post-exposure immunization will continue using the existing protocol outlined in the NWT Communicable Disease Manual and on page 193 of the Canadian Immunization Guide (2002).
5. Environmental Health Officers will step-up efforts to promote and implement dog vaccination programs in high-risk communities to decrease opportunities of human exposure to rabies.

André Corriveau, MD, FRCPC
Chief Medical Health Officer

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