

Agriculture

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> Rabies and Australian Bat Lyssavirus

Rabies and Australian Bat Lyssavirus

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Rabies is a viral disease that affects warm-blooded animals including humans. It is characterised by a variable incubation period, nervous signs, paralysis and death. It is a disease for which there is no known cure.

Distribution

Rabies occurs in many countries and on many continents throughout the world. Currently Japan, New Zealand, Great Britain, a number of island nations and Australia are the only countries considered to be free of the virus. Only two cases of human rabies have ever been reported in Australia. The first in 1867 was a poorly documented case that occurred in Tasmania involving the death of a child and a dog. The second occurred when a ten year old boy died in 1987 after being bitten on the finger by a monkey in India sixteen months previously. It is estimated that each year between forty and seventy thousand people worldwide die of Rabies.

Traditionally, in Europe and America, dogs have been associated with rabies because they can act as the carrier of the disease to man. At present however, the main reservoir of infection in these areas is wildlife. Foxes, wolves, mongooses, skunks and vampire bats have all been implicated as carriers of the disease. Many biotypes of the virus, adapted to different host species, exist in different areas of the world. In parts of Africa and Asia, domestic dogs remain a significant risk to locals and tourists. Normally, transmission occurs as a result of a bite from an infected animal.

Clinical Signs

The time interval between the bite from an infected animal and the appearance of clinical signs is extremely variable. It varies from ten days to nine months with an average time course of three to eight weeks.

A sudden change in behaviour is a common early sign of the disease in all species. For example, a normally docile dog may suddenly become bad tempered, and vice versa. Wild animals may lose their fear of man and appear quite tame.

Two different syndromes are seen in infected dogs. Dogs with the "furious" form may wander aimlessly or may run for long distances. They may be excessively aggressive and attack anything that gets in their way. A depraved appetite is common, and stones, sticks and soil may be eaten. As the disease progresses the animal becomes paralysed and dies. The "dumb" form is characterised by early paralysis of the tongue and lower jaw, with profuse salivation.

Death occurs in all species from three to seven days after the onset of the clinical signs and dogs may survive as long as ten days.

Control

In countries where rabies is established, control measures include mass vaccination of dogs and the elimination of animals such as feral/stray dogs and foxes that can spread the disease.

Australian Bat Lyssavirus

Australian bat lyssavirus is a virus from the same group of viruses as rabies and it is present in the Australian bat population. It was first diagnosed in 1996 in a Black Flying Fox from New South Wales. The virus has been detected in both large bats (flying foxes) and very small bats (insect eating bats) however it appears to lack the ability to spread to terrestrial mammals that could establish a reservoir of infection in the way that rabies does. Bats carrying the virus may appear healthy. Contact with bats is less likely however two Australians have died of the human form of this disease after handling sick or injured bats. Although rare, the serious nature of the disease means that all people who handle or may come in contact with bats should be vaccinated for this disease using the Rabies vaccine.

What Should I Do?

If you suspect an animal may have rabies or Australian bat lyssavirus then you should not attempt to capture it. Confining the animal, for example to a room or shed should only be done if doing so poses no risk to you or any other person. In the case of bats, even if you don't suspect Australian bat lyssavirus, you should not attempt to capture or confine a bat.

You need to report your concerns immediately to the relevant authorities via the disease watch hotline – 1800 675 888.

If you or anyone else has, or believes they may have been bitten or scratched then advice must be sought immediately from a medical practitioner.

It is essential that people who are wildlife carers are aware of the risks posed by contact with bats, even apparently healthy bats, and that they discuss the benefits of the available vaccination with their medical practitioner. It is essential that all people, but particularly children, are aware that when bats are sick or injured they can come in contact with people. The safest and most appropriate way to assist a sick or injured bat is not to touch it but to seek immediate assistance from a wildlife carer group, your local council, veterinarian or relevant state authority.

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This Information Note was an original publication by Dr. Pat Simpson-White, which was revised and republished in September 2002 by Dr. Susan Bibby.

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