THE NEW WHO POSITION ON RABIES VACCINES

Driving progress towards rabies elimination
& 2nd international PARACON
Johannesburg, South Africa 12-14 September 2018

L. Knopf
Neglected Zoonotic Diseases
Department of the Control of Neglected Tropical Diseases
WHO Headquarters, Geneva, Switzerland
First rabies working group under SAGE, established in June 2016.

1. Assess **evidence** and **country practices** in the use of **human rabies vaccine** and **RIG**

2. Emphasize **evidence of implementation** of ID use of rabies vaccines;

3. Reduced **duration /nb of doses for PEP & PrEP schedules**;

4. **PrEP recommendations** and the **cost-effectiveness of the interventions**;

5. **Revisit the WHO position for RIG and monoclonal antibody use to improve access to care /public health impact**;

6. **Consider economic burden of rabies and cost-effectiveness of vaccination including modelling**

7. Potential of **new vaccines** to improve delivery.
SAGE – Rabies WG Membership

SAGE Members
• Kate O’Brien, (Chair of Working Group), USA.
• Terry Nolan, Australia.

Experts
• Ahmed Be-Nazir, Bangladesh
• Lucille Blumberg, South Africa
• Deborah Briggs, USA
• Mathurin Tejiokem, Cameroon
• Luzia Queiroz, Brazil
• Naseem Salahuddin, Pakistan
• Gade Sampath, India
• Arnaud Tarantola, Cambodia / New Caledonia
• Mary Warrell, UK
• Henry Wilde, Thailand

WHO secretariat
Review & update rabies immunization policy to best evidence and practice

- In depth analysis of new evidence (July 2016-July 2017):
  - i. Systematic scientific literature reviews
  - ii. Information from reports and programmes
  - iii. Data supporting a change in practice / underpin established new practice

- Report to SAGE (October 2017)

- Publication of the WHO position paper on rabies vaccines considering feasible and safe recommendations and cost-effective practices (April 2018).
New WHO position on rabies immunization:

*Safety - programmatic savings - feasibility*

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<thead>
<tr>
<th>Topic</th>
<th>2010</th>
<th>2018</th>
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<tbody>
<tr>
<td><strong>PEP regimen duration</strong></td>
<td>3-4 weeks 4-5 visits</td>
<td>1-2 weeks 3-4 visits</td>
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<tr>
<td><strong>Vaccine savings PEP</strong></td>
<td>ID: 0.8 ml IM: 5 ml</td>
<td>ID: -20% (0.6 ml) IM: -20% (4 ml)</td>
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<tr>
<td><strong>RIG infiltration mode</strong></td>
<td>Wound + distant IM</td>
<td>Wound only</td>
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<tr>
<td></td>
<td></td>
<td>- 40% RIG vials</td>
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<tr>
<td></td>
<td></td>
<td>- 80% RIG volume/ person</td>
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<tr>
<td><strong>RIG allocation</strong></td>
<td>All category III exposures</td>
<td>High risk cat. III exposures</td>
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<tr>
<td></td>
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<td>- 60 to 90% need RIG</td>
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the 2018 WHO position on rabies immunization

WHO announces new rabies recommendations

15 January 2018 | Geneva — The new WHO recommendations for rabies immunization supersede the 2010 WHO position on pre-exposure prophylaxis (PEP) and post-exposure prophylaxis (PEP) for rabies. These updated recommendations are based on new evidence and directed by public health needs that are cool, dose- and time-sparring, while assuring safety and clinical effectiveness. In addition, new guidance on prudent use of rabies immunoglobulin (RIG) is provided.

The following sections summarize the main points of the updated WHO position as endorsed by the Strategic Advisory Group of Experts on Immunization (SAGE) at its meeting in October 2017. The full version of the WHO position on rabies vaccines and immunoglobulins will be published in the Weekly Epidemiological Record in April 2018.

http://www.who.int/rabies/resources/who_wer9316/en/
More: www.who.int/rabies/en