

2008 Iowa Rabies Summary

ANIMAL RABIES IN IOWA:

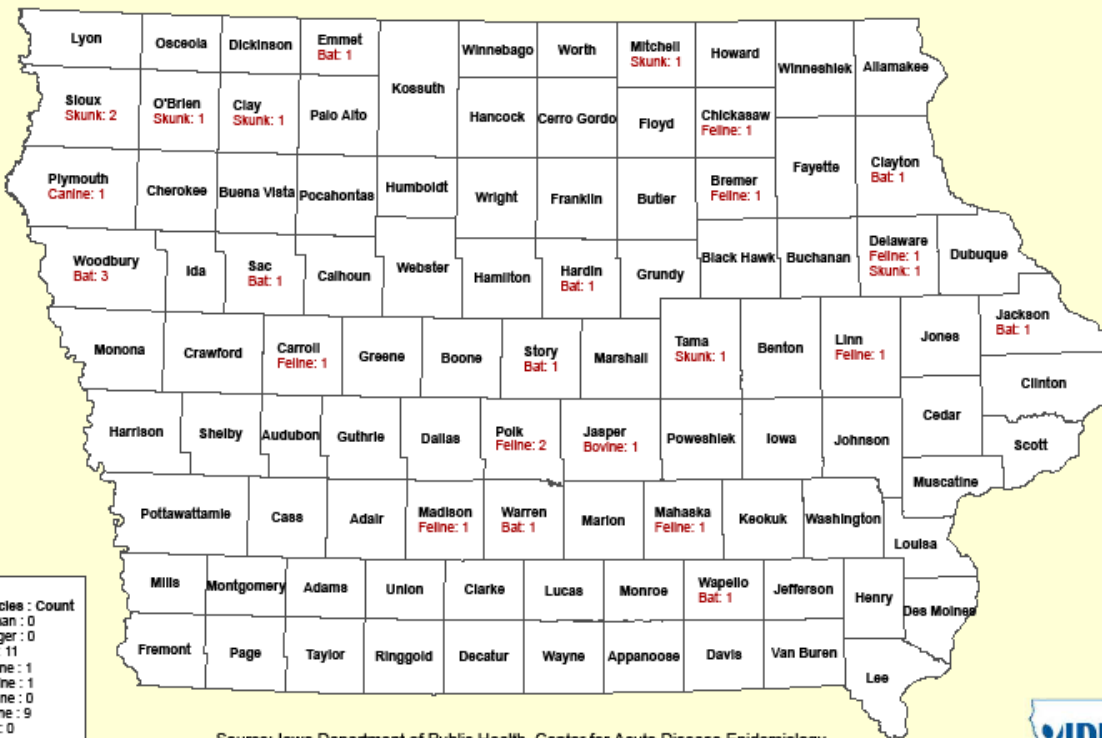
In 2008, 29 cases of animal rabies were reported in Iowa, which is comparable to the number reported last year, but is significantly less than previous years (see the table below: Positive Rabies Cases 2001-2008). Rabies was identified most frequently in wildlife species including 11 bats and 7 skunks. Ten cases were diagnosed in domestic species including 9 cats and 1 dog. One cow tested positive as well.

Positive Rabies Cases by Species 2001 - 2008

Species	2001	2002	2003	2004	2005	2006	2007	2008	Total
Bat	31	27	47	47	60	28	13	11	264
Skunk	28	27	38	28	33	13	5	7	179
Cat	10	7	8	11	5	7	7	9	64
Cow	10	12	3	10	7	4	0	1	47
Dog	2	3	6	3	2	2	5	1	24
Horse	3	2	3	0	1	3	1	0	13
Fox	1	0	0	1	0	0	0	0	2
Badger	0	0	1	0	0	0	0	0	1
Total	85	78	106	100	108	57	31	29	594

As illustrated on the map below, cases were distributed across the state.

Final 2008 Iowa Rabies Map



Source: Iowa Department of Public Health, Center for Acute Disease Epidemiology



Updated: 1/22/2009

During 2008, 1,721 animals in Iowa were tested for rabies and 29 were confirmed positive (1.63%). The percent positive varies greatly by species, see the table below. It is important to note that this data is greatly influenced by the numbers of animals tested. Many animals are tested because they are exhibiting unusual behavior or clinical signs which make them more likely to be infected with rabies. For these reasons, the percentages should not be considered representative of the true distribution of disease within the animal population in Iowa.

Species	Positive	Total Tested	% Positive
Dogs	1	381	0.26%
Cows	1	64	1.56%
Cats	9	523	1.72%
Bat	11	555	1.98%
Skunks	7	13	53.85%

HUMAN RABIES IN THE UNITED STATES:

There were two human rabies cases reported in the United States in 2008. The first patient had recently immigrated to California from Mexico. Although a history of a dog and fox bite in Mexico 110 days prior to onset of symptoms was obtained, the virus has been characterized as a previously unidentified variant. While the variant is most closely related to a known bat variant, there are distinct differences. The variant is considered to be of a new lineage associated with an unknown animal reservoir, most likely an insectivorous bat. The history of dog and fox exposure suggests that those animals could have acted as secondary transmitters, but the possibility of the unknown reservoir being the primary transmitter cannot be ruled out.

The second case occurred in a 55 year old man from Missouri. The patient had been bitten by a bat on the ear approximately 30 days before his symptoms began. Unfortunately the patient did not seek medical care until he began having symptoms. This tragic case emphasizes the importance of seeking medical care if you are exposed to a bat. Bat bites can be visibly undetectable, therefore, if you have any physical contact with a bat during which you may have been bitten, you should wash the exposed area thoroughly with soap and water. If possible, the bat should be captured and tested for rabies. If capture is not possible, you should seek medical attention. Additionally, if a bat is found in a room with an unattended child, a sleeping person, or anyone who cannot reliably communicate what happened, this is considered a potential bat exposure, and medical attention should be sought immediately.

Iowa's most recent human rabies case occurred in 2002 and the virus was identified as a bat strain, and prior to that the last case was in 1951.

HUMAN RABIES VACCINE SHORTAGE:

It is estimated that approximately 20,000 to 40,000 people receive lifesaving rabies post-exposure treatment each year in the United States. For much of 2008, human rabies vaccine was in short supply, and this shortage is predicted to continue throughout most of 2009. Throughout the shortage, vaccine has always and continues to be available for rabies exposure treatment. In addition, vaccine for pre-exposure prophylaxis is available for high risk individuals (such as veterinarians, laboratorians, animal control, and wildlife officials). Pre-exposure vaccination of international travelers is not recommended at this time. Visit the IDPH rabies webpage for the most current information on vaccine availability and recommendations.