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Rabies Immune Globulin–Sparing Guidelines for Ontario:

For cases where rabies post-exposure prophylaxis has been recommended

Due to a recent human case of rabies in Canada resulting from a bat exposure, there has been a significant increase in the use of rabies immune globulin (Rablg) both in Ontario and across Canada. As a result, the available supply of Rablg is currently limited.

The World Health Organization (WHO) no longer recommends injecting the remainder of the calculated Rablg (WHO uses the term RIG in their guidelines) dose IM at a site distant from the site of exposure.¹ Based on this newer WHO position and the current limited supply of Rablg, please follow the Rablg-sparing steps below when administering rabies post-exposure prophylaxis.

Rablg-Sparing Protocol

This protocol relates to the use of Rablg. Treatment of any wounds (thorough cleaning, flushing, antibiotics, analgesics, tetanus vaccination etc.) and the administration of rabies vaccines should follow normal protocols.²

1. Calculate the dose of Rablg (20 IU/kg body weight) and the number of vials required for this dose.
2. Draw up one vial at a time in order to save any unopened vials that you don't use.
3. Infiltrate as much of the calculated dose as possible around the wound(s) or site of exposure (if a bite or scratch is not evident).

Note: Infiltration of wounds with Rablg in some anatomical sites (finger tips) must be carried out with care in order to avoid increased pressure in the tissue compartment. When more than one wound exists, each wound should be locally infiltrated with a portion of the Rablg using a separate needle and syringe. In such instances, Rablg can be diluted twofold to threefold in a solution of 0.9% sodium chloride in order to provide the full amount of Rablg required for thorough infiltration of all wounds.²

4. If the entire calculated dose of Rablg cannot anatomically be infiltrated around the wound(s) or site of exposure, **do NOT give the remainder of the dose IM**. Save any unopened vials for use in another case.
5. For situations that are not clear, the attending healthcare provider makes the final decision regarding the administration of Rablg, along with input from the Medical Officer of Health.

¹Weekly Epidemiological Record, 20 April 2018, vol. 93, 16 (pp. 201–220) Rabies vaccines: WHO position paper – April 2018. WHO Strategic Advisory Group of Experts (SAGE) on immunization. Available from: <https://www.who.int/wer/2018/wer9316/en/>.

²Ontario Public Health Standards: Protocols and Guidelines. *Management of Potential Rabies Exposures Guidelines, 2019*. Available at: http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/protocolsguidelines.aspx.