

Commentary

Implications for Rabies Prevention and Control

Victor Magalhaes*

Department of Veterinary Medicine, University of Abuja, Abuja, Nigeria

DESCRIPTION

Rabies is a vaccine-preventable, zoonotic, viral disease. Once clinical symptoms appear, rabies is virtually 100% fatal. In up to 99% of cases, domestic dogs are responsible for rabies virus transmission to humans. Yet, rabies can affect both domestic and wild animals. It is spread to people and animals through bites or scratches, usually *via* saliva.

It is an RNA virus from the rhabdovirus family and can affect the body in two ways. It can go directly to the peripheral nervous system and move to the brain. It can also replicate from the host's immune system to safe muscle tissue. From here, it enters the nervous system *via* neuromuscular connections.

Once in the nervous system, the virus causes acute inflammation of the brain. Coma and death are immediate.

Rabies is widespread on all continents except the Antarctic continent, with more than 95% of human deaths occurring in regions of Asia and Africa. Rabies is a Neglected Tropical Disease (NTD) that affects poor and vulnerable people, primarily in remote rural areas. About 80% of human cases occur in rural areas. There are effective human vaccines and immunoglobulins for rabies, but they are not readily available and not available to those in need. Worldwide, rabies deaths are rarely reported, and children between the ages of 5 and 14 are frequently sacrificed. Addressing rabies exposure, which currently has an average cost of Post-Exposure Prophylaxis (PEP) of 108 million, can be a devastating financial burden for affected families.

Each year, more than 29 million people worldwide are vaccinated after being bitten. It is estimated that this will prevent thousands of deaths from rabies each year. Globally, the financial burden of dog rabies is estimated at US 8.6 billion annually.

Animals most likely to transmit rabies in the United States

include bats, coyotes, foxes, raccoons, and skunks. In developing countries, stray dogs are most likely to infect humans with rabies.

When a person begins to show signs or symptoms of rabies, the disease is almost always fatal. For this reason, people at risk of rabies should be vaccinated to protect themselves from rabies.

Seek medical attention immediately if a person are bitten or exposed to an animal suspected of having rabies. Based on the circumstances in which her injury and exposure occurred, she he and her his doctor can decide whether you should receive treatment to prevent rabies.

There are two types of rabies. The first type of raging rabies or encephalitis rabies occurs in humans in 80% of cases, and those who have it are more likely to develop hyperactivity and hydrophobic disorders. The second type, called paralytic or "dam" rabies, causes paralysis as the main symptom.

Rabies is usually transmitted through deep bites or scratches from infected animals. In the United States, rabies occurs primarily in wildlife such as coyotes, raccoons, skunks, bats, and foxes. Most people infected with the virus were infected with the virus by contact with bats.

It is not immediately possible to determine if a wild animal has rabies. If a person is bitten by an animal or exposed to a potentially ill animal, the doctor will treat it immediately without waiting for a diagnosis. We can check for infection with a clinical test, but if it's too late to treat, you'll get results later in the disease.

Captive chewing animals can be tested to confirm that the virus is in the brain, but must first be euthanized. For healthy pets such as dogs, cats and ferrets, experts recommend observing the animals for 10 days to see if they are sick. For rabbits, rodents, or other small animals that normally do not spread rabies, doctor can consult with the local health department to decide what to do.

Correspondence to: Victor Magalhaes, Department of Veterinary Medicine, University of Abuja, Abuja, Nigeria, E-mail: magalhaesvi_ctor@odu.ng

Received: 16-May-2022, Manuscript No. JBP-22-17477; Editor assigned: 19-May-2022, PreQC No. JBP-22-17477 (PQ); Reviewed: 02-June-2022, QC No. JBP-22-17477; Revised: 09-June-2022, Manuscript No. JBP-22-17477 (R); Published: 16-June-2022, DOI: 10.35248/2155-9597.22.S16.012.

Citation: Magalhaes V (2022) Implications for Rabies Prevention and Control. J Bacteriol Parasitol. S16:012.

Copyright: © 2022 Magalhaes V. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.