

# Rabies Post-Exposure Prophylaxis (rPEP) Quick Reference Guide

January 2020

| Rabies Immune Globulin (RabIg) - HyperRAB® / IMOGRAM®  |  |             |         |
|--|--|-------------|---------|
| <ul style="list-style-type: none"> <li>All RabIg is ideally administered on Day 0.</li> <li>Dose of 20 IU/kg by body weight for all age groups.</li> </ul> | TOTAL BODY WEIGHT  |             | # VIALS |
|  | <b>For 2 mL vials:</b> Total dose in mL = $\frac{20 \text{ IU/kg} \times (\text{patient weight in kg})}{150 \text{ IU/mL}}$<br><b>For 1 mL vials:</b> Total dose in mL = $\frac{20 \text{ IU/kg} \times (\text{patient weight in kg})}{300 \text{ IU/mL}}$ | ≤ 33 lbs    | ≤ 15 Kg |
| >33–66lbs  |  | >15–30 Kg   | 2       |
| >66–99lbs  |  | >30–45 Kg   | 3       |
| >99–132lbs   |  | >45–60 Kg   | 4       |
| >132–165lbs  |  | >60–75 Kg   | 5       |
| >165–198lbs  |  | >75–90 Kg   | 6       |
| >198–231lbs  |  | >90–105 Kg  | 7       |
| >231–264lbs  |  | >105–120 Kg | 8       |
| >264–297lbs  |  | >120–135 Kg | 9       |
| >297–330lbs  |  | >135–150 Kg | 10      |

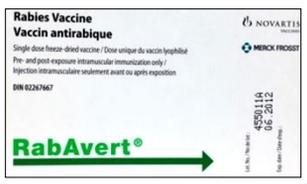
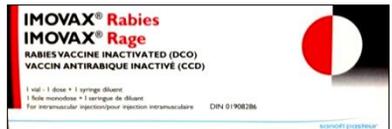
- Infiltrate each wound/exposure site with portion of RabIg using a separate needle and syringe.
- Do not administer more than the maximum dosage of RabIg per body weight.
- DO NOT administer RabIg in the same anatomical location as rabies vaccine.
- Dilute RabIg (if required) per product monograph.
- Give RabIg to individuals who have not previously received appropriate rabies immunization.\*
- Draw up 1 vial at a time.
- If entire calculated RabIg dose cannot anatomically be infiltrated around wound(s)/exposure site(s), inject any remaining RabIg volume IM at site(s) distant from the site of vaccine administration.



## Rabies Vaccine - IMOVAX® (HDCV) / RabAvert® (PCECV)

- Administer rabies vaccine dose (1.0 mL) intramuscularly (IM) in the deltoid (children & adults) or anterolateral thigh (infants & small children).
- Administer at different anatomical site than RabIg using a separate needle and syringe.
- NEVER administer rabies vaccine in the gluteal region.
- Ensure ALL doses are administered at appropriate intervals. DO NOT administer doses early.
- If a dose is delayed, it should be given ASAP and the schedule resumed with the appropriate intervals from the most recent dose.

| Patient Profile   | Day 0 | Day 3 | Day 7 | Day 14 | Day 28 |
|---|-------|-------|-------|--------|--------|
| Patient previously immunized with rabies vaccine (total 2 doses)* | ●     | ●     |       |        |        |
| Immunocompetent patient (Total 4 doses)                           | ●     | ●     | ●     | ●      |        |
| Immunocompromised patient (Total 5 doses)**                       | ●     | ●     | ●     | ●      | ●      |



\* Completed course of pre- or post-exposure prophylaxis with either HDCV or PCECV -OR- Completed immunization with other types of rabies vaccine (or with HDCV or PCECV according to unapproved schedules) with an acceptable antibody response to be a titre of at least 0.5 IU/mL by rapid fluorescent-focus inhibition test.  
 \*\* Includes those taking corticosteroids or other immunosuppressive agents, those who have immunosuppressive illnesses, and those taking chloroquine & other anti-malarials



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## COMMON ADVERSE REACTIONS\*

\*Serious or severe adverse effects are rare and are not listed here. Please consult the product monograph for details.

### Rabies Immune Globulin (RabIg) - HyperRAB® / IMOGAM®

- Local: pain, erythema, induration
- Systemic: headache, low-grade fever

### Rabies Vaccine - IMOVAX® (HDCV)

- Local: pain, erythema, swelling, pruritus, induration – (60% to 90%)
- Systemic: headache, nausea, abdominal pain, muscle aches, dizziness – (6% to 55%)

### Rabies Vaccine - RabAvert® (PCECV)

- Local: pain, tenderness, swelling, erythema, induration – (10% to 60%)
- Systemic: malaise, myalgia, arthralgia, headache, fever – (1% to 10%)

## CONTRAINDICATIONS & PRECAUTIONS

- There are no contraindications to the use of rabies vaccine or RabIg after significant exposure to a proven rabid animal. Post-exposure vaccination should never be postponed.
- Pregnancy is not a contraindication to post-exposure prophylaxis with rabies vaccine or RabIg.
- Consultation should be sought regarding administration for patients with a proven history of hypersensitivity to product components or packaging.

| Product   | Potential Allergens  |
|-----------|--|
| IMOGAM®   | latex in vial stopper  |
| IMOVAX®   | neomycin, phenol red   |
| RabAvert® | amphotericin B, chick protein, chlortetracycline, neomycin, polygeline (gelatin) |

## DRUG INTERACTIONS

| Product        | Interactions  | Effect   |
|----------------|---|--|
| Rabies Vaccine | radiation therapy, chloroquine, corticosteroids, immunosuppressive agents | diminished efficacy of rabies vaccine  |
| RabIg          | MMR, MMRV, monovalent varicella vaccines                                  | diminished response to live vaccines; delay vaccination with these vaccines for 4 months after RabIg |

## VACCINE INTERCHANGEABILITY

Wherever possible, an immunization series should be completed with the same vaccine product. However, if it is not feasible to do so, PCECV and HDCV are considered interchangeable.

### REFERENCES:

[Management of Potential Rabies Exposures Guideline, 2019](#) – Ministry of Health  
[Canadian Immunization Guide, Part 4](#) – Government of Canada

### York Region Public Health

If you have questions regarding a potential animal exposure, rabies risk assessment, or would like to request PEP, call Health Connection at 1-800-361-5653 (weekdays between 8:30 and 4:30pm) or 1-888-335-0111 (after hours, weekends or holidays).

