



**- Please bring to the attention of all doctors -**

Date: 09 June 2010

Contact telephone number: 8226-7177 (24 hours/7 days)

## Health Risks associated with Flying Foxes in South Australia

Small colonies of Grey-headed Flying-foxes (*Pteropus poliocephalus*), sometimes referred to as fruit bats, have been sighted in south eastern South Australia since 2007 and in urban areas of Adelaide since early May this year.

A small proportion of flying foxes and other Australian bat species carry the Australian Bat Lyssavirus (ABL), a rabies-like virus which has been responsible for two deaths in Australia, both in Queensland. ABL is usually transmitted to humans via bites or scratches, which provides direct access for virus in saliva to exposed tissue and nerve endings. Less commonly, transmission is via exposure of bat saliva to mucous membranes (eyes, nose or mouth).

Whilst overall the risk of contracting lyssavirus infection is low, the mortality rate approaches 100% if infected. As a result, anyone presenting with bat bites or scratches or mucous membrane exposure to saliva should be given prophylactic treatment with Rabies Immunoglobulin and Rabies Vaccine as outlined in the 9<sup>th</sup> Edition of the *Australian Immunisation Handbook*, pp. 114-117. In addition, the wound should be washed thoroughly (e.g. for approximately 5 minutes) as soon as possible with soap and water. If available, a virucidal antiseptic such as povidone-iodine should be applied after washing. Exposed mucous membranes should be flushed well with water. Finally, consider the need for tetanus prophylaxis and the risk of bacterial wound infection. Please immediately contact the Communicable Diseases Control Branch on 08 8226 7177 (24hr/7day) to discuss the use of and obtain vaccine and rabies immunoglobulin.

The Department of Health funds this vaccine and immunoglobulin for post-exposure prophylaxis. Prophylaxis should be commenced as soon as possible after exposure as the infection travels along nerves to the brain and once the brain is involved the condition is invariably fatal. Pre-exposure rabies vaccination is recommended for people who are at increased risk of lyssavirus infection, particularly bat-handlers and veterinarians (this is not funded by the government).

Fruit bats in Queensland are also known to carry Hendra virus which can lead to a severe respiratory or neurological infection in horses. Similar disease has occurred in a small number of humans in Queensland who had contact with infected horses. It is believed that horses may be infected through contact with urine or birthing products from bats infected with Hendra virus. There is no evidence, however, of direct transmission from fruit bats to humans. No vaccine exists for Hendra virus and there is no specific therapy. Avoidance of contact with bats and thorough washing of wounds inflicted by bats, as described above, are the only preventive measures available. Although there is no evidence that fruit bats in South Australia carry Hendra virus, it is wise to take a precautionary approach.

We advise that the general public do not touch fruit bats or other bats under any circumstances. A fact sheet on Australian Bat Lyssavirus for the public can be downloaded from: <http://www.dh.sa.gov.au/pehs/ygw/rabieslyssavirus-pehs-sahealth-2009.pdf> . Please contact the Communicable Disease Control Branch on 08 8226 7177 (24hours/7days) for any enquiries or advice.

**Dr Ann Koehler – Director, Communicable Disease Control Branch**

*Information contained within this advice should be treated as confidential and is for the intended recipient only.*