

Rabies

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This guidance is for England, Scotland and Wales

Rabies is a disease fatal to all mammals, including humans, if no treatment is received.

Whilst the UK has been rabies-free (classical rabies) since 1922 it must be remembered that the disease is present in many other countries throughout the world; consequently the strict legal controls on bringing animals into the UK must be adhered to in order to prevent rabies being brought into the country.

Possibly the largest risk for rabies entering the UK would be through an infected animal imported into the country illegally.

The symptoms of rabies can vary greatly but typical clinical signs would include sudden behavioural changes and progressive paralysis, leading to death. There are many different strains of rabies but all are notifiable. Rabies cannot be conclusively diagnosed through these clinical signs alone and would need laboratory tests to be confirmed.

What is the possible impact of the disease?

The disease has the potential to have a serious economic and social effect due to the amount of control and containment resources required in an outbreak situation and the potential effects upon animal and public health. Humans are potentially susceptible to all strains of rabies and consequently when considering a response to a rabies outbreak, the strain of rabies found will have a significant bearing on determining what form of response is undertaken.

Broadly speaking, there are two principal types of incident to be considered:

- rabies is detected and the incident is deemed to be contained - for example, in quarantine facilities
- rabies is detected and the index case cannot be established

In both instances the UK Government and its operational partners will, amongst other things:

- aim to eradicate the disease
- protect public health
- minimise the number of animals that have to be destroyed, whether for control purposes or to safeguard animal welfare
- minimise the impact on the economy, the public and the environment

Clinical signs

Rabies virus infection can cause acute encephalitis in mammals, including humans. The virus is usually spread by saliva from the bite of an infected animal. Clinical signs include paralysis and behavioural abnormalities, leading to a painful death. Once clinical signs of the disease develop it is invariably fatal. In some cases, however, an animal may die rapidly without demonstrating significant clinical signs.

There are many different strains of rabies. These include classical rabies, European bat strain, Baltic strain, Arctic strain and wildlife strain, with each strain having different levels of cross-species transferability.

What happens when a suspect animal is found?

Rabies is a notifiable disease and therefore anyone who suspects rabies in an animal on whatever premises must by law report it to the Animal and Plant Health Agency (APHA).

An investigation would then be instigated by an official veterinarian (OV), who may rule out suspicion of rabies when they visit the premise and, if so, the investigation would be ended at this point. If the OV cannot rule out rabies at this stage then the animal will become a suspect animal (see below). If the OV deems it very likely that the animal has contracted rabies then they may declare the premises as an infected place and impose movement restrictions.

Any decision to destroy the suspect animal will be discussed between the OV and the owner. If the country of origin has a disease-free rabies status then destruction may not be compulsory. However, the OV may order destruction if the animal is suffering or distressed. If there is any chance of human infection - for example, a human having been bitten by the suspect animal - the OV would order destruction of the animal in order to confirm or rule out a laboratory diagnosis of rabies.

The tracing of possible disease spread, contact animals and any public health risk would also be assessed at this time.

What happens if the disease is confirmed?

The rabies virus cannot live for long outside the body of its host. Consequently, premises need only be considered infected until the infected animal has been removed (for example, to quarantine for observation, or destroyed), the property has been disinfected and any contact animals have also been dealt with in the same way as the infected one. Animals must not be moved on to or off an infected premises unless specifically licensed.

If the suspect animal is already dead, or the veterinarian and/or owner decides on the humane destruction of the animal, or if the animal dies while under observation, the carcass must be transported immediately

to the relevant laboratory for appropriate diagnostic testing. When results are negative for a suspect case, all contact animals will continue to remain in isolation until further results of more sensitive tests are available, usually within two to three days.

If an initial laboratory result is positive a central disease control centre (CDCC) would be established by APHA and headed by the APHA Outbreak Director to coordinate the management of the outbreak and activities taking place at the forward operating base(s) (FOB).

The FOB implements the disease control operation, ensuring that local operational partners and stakeholders are appropriately engaged. The FOB follows tactical direction and policy guidance set out in the relevant disease control strategies, contingency plans and operational instructions. The FOB also reports on the progress of the disease control operation to the outbreak coordination group within the CDCC.

There is a large range of possible scenarios that the CDCC may have to coordinate for a rabies outbreak or incident, from a contained case of an individual pet animal, to the highly unlikely worst-case scenario of a nationwide outbreak involving both wildlife and domestic animals.

The most likely scenario for a rabies incident will be an individual infected pet. This is likely to be identified quickly with its source of infection / exposure history capable of being rapidly ascertained. In this scenario, the control and containment measures required would be very restricted and localised, likely to be limited to the infected animal and any other contact animals.

If disease were to spread to other domestic animals, either within the same locality or more widely across the country, then a wider range of controls would be required - for example, leashing / muzzling or vaccination of pets at risk. In the unlikely circumstance that the disease spreads to wildlife, a broader range of wildlife controls - for example, vaccination of foxes - would be instigated alongside tighter restrictions on movements of domestic pets, and requirements for vaccination, muzzling and leashes.

Government guidance on rabies can be found on the GOV.UK website and in the *Rabies Control Strategy for Great Britain*.

Can people catch the disease?

Yes. Humans can contract the disease.

The World Health Organisation states that every year more than 15 million people worldwide receive a post-exposure vaccination to prevent the disease. This is estimated to prevent hundreds of thousands of rabies deaths annually.

Humans are likely to be infected following a deep bite or scratch by an infected animal. Dogs are the main host and transmitter of rabies. However, transmission can also occur when infectious material - usually saliva - comes into direct contact with human mucosa or fresh skin wounds.

Could it affect the food I eat?

Ingestion of meat or other tissues from animals infected with rabies has never been confirmed as a source of human infection.

What can be done to reduce the risks?

The island status of the UK means that it is unlikely that rabies will be introduced through wildlife. In addition there are very strict legal controls in place that regulate the entry of animals into the UK. Pet dogs, cats and ferrets entering the UK are subject to rules relating to the movement of pets, of which more detail can be found on the GOV.UK and Scottish Government websites.

Whilst rabies in humans in the UK is not prevalent, this can also be controlled by ensuring adequate animal vaccination and movement controls, educating those at risk, and enhancing access to appropriate medical care for those bitten.

It is in everybody's interest to adhere to current controls regulating the entry of animals into the UK.

More information on rabies prevention in humans can be found on the NHS website.

Legislation applicable to rabies

The Rabies (Importation of Dogs, Cats and Other Mammals) Order 1974 prohibits entry of rabies-susceptible animals into Great Britain unless issued with an import licence by APHA.

The Department for Environment, Food and Rural Affairs (Defra) has produced guidance on these controls for rabies-susceptible animals, which is available on the GOV.UK website.

The Non-Commercial Movement of Pet Animals Order 2011 allows that pet dogs, cats and ferrets are not subject to the requirements of the Rabies (Importation of Dogs, Cats and Other Mammals) Order 1974, providing that certain rules are adhered to; for more information see the above link for movement of pets.

There is a statutory fee associated with obtaining a pet passport.

Penalties

Failure to comply with trading standards law can lead to enforcement action and to sanctions, which may include a fine and/or imprisonment. For more information please see 'Trading standards: powers, enforcement and penalties'.

Key legislation

Rabies (Importation of Dogs, Cats and Other Mammals) Order 1974

Animal Health Act 1981

Non-Commercial Movement of Pet Animals Order 2011

EU Regulation (EU) No 576/2013 *on the non-commercial movement of pet animals*

Animal By-Products and Pet Passport Fees (England) Regulations 2018

Animal By-Products and Pet Passport Fees (Scotland) Regulations 2018

Animal By-Products and Pet Passport (Fees) (Wales) Regulations 2018

Last reviewed / updated: March 2020

In this update

Information added about the central disease control centre and forward operating bases; also added link to the *Rabies Control Strategy for Great Britain*

Please note

This information is intended for guidance; only the courts can give an authoritative interpretation of the law.

The guide's 'Key legislation' links may only show the original version of the legislation, although some amending legislation is linked to separately where it is directly related to the content of a guide. Information on amendments to legislation can be found on each link's 'More Resources' tab.

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