

Rabies

A total of seven human rabies cases has been confirmed in South Africa this year to date. These cases were reported from Free State (n=2), KwaZulu-Natal (n=1), Mpumalanga (n=1) and Limpopo (n=3) provinces.

Two of the three cases from Limpopo Province were confirmed in the past month. The first patient, a 38-year-old male from Elim (Makhado) was bitten on the leg by his own dog in April 2013. He apparently did not seek medical treatment after the incident and therefore did not receive any rabies post-exposure prophylaxis. Approximately three months later he presented to Elim Hospital where he was admitted on 26 July 2013 with a history of an acute illness of two days duration. Clinical features included fever, altered behaviour, anxiety, hydrophobia and hypersalivation. Seizures, muscle spasms, clenching of teeth and insomnia were subsequently also reported. The patient died on the same day of admission. Rabies virus infection was confirmed by a direct fluorescence antibody assay detecting the viral antigen in a post-mortem brain specimen.

The second case is that of a 38-year-old male from Mopani District who was bitten by a dog two

months before the onset of his illness. Information about whether the patient sought or received post-exposure treatment after the incident is still being verified. The patient presented to a local hospital on 27 July 2013, with a 3-day history of headache. He refused hospital admission on that day, but returned on 31 July 2013 presenting with restlessness, confusion with lucid intervals, and hydrophobia. The patient died three days later. Rabies virus infection was confirmed through detection of rabies virus antigen in a post-mortem brain specimen.

Even when a history of animal bites is missing or unreliable, rabies should be suspected in patients (particularly children) with unexplained encephalitis, paralysis or other rabies-like symptoms (including localised pain at wound site, anxiety, hydrophobia, hypersalivation). Although rabies is endemic in South Africa, rural areas are at particularly high risk; these include areas in north-eastern Eastern Cape Province, eastern and south-eastern Mpumalanga Province, northern Limpopo Province and rural areas throughout KwaZulu-Natal Province.

Source: Centre for Emerging and Zoonotic Diseases and Division of Public Health Surveillance and Response, NICD-NHLS