



**RABIES VACCINE
FACT SHEET FOR
HEALTH CARE
WORKERS IN
BOTSWANA**



FS 739935



Promoting access to safe medicines

1. Indication

The rabies vaccine is used for active immunisation against rabies, a fatal viral infection transmitted through bites, scratches, or licks on broken skin or mucous membranes by rabid animals such as dogs, bats, and monkeys.

It is indicated for:

Pre-exposure prophylaxis (PrEP):

For individuals at high risk of exposure (e.g., veterinarians, animal handlers, laboratory workers, travellers to high-risk areas).

Post-exposure prophylaxis (PEP):

For anyone bitten, scratched, or exposed to potentially rabid animals.

To be used in combination with thorough wound cleaning and, when indicated, rabies immunoglobulin (RIG).

2. Administration

Pre-exposure prophylaxis (PrEP):

Age	Dose
All ages	Day 0, 7, 21 or 28

-A booster may be required every 3–5 years for continued risk exposure.

Post-exposure prophylaxis (PEP):

- Immediate wound washing with soap and water for at least 15 minutes.

Vaccination schedule:

Exposure Category	Regimen	Dosing schedule
Category I (touching or feeding animals, animal licks on intact skin, exposure to animal blood, urine or faeces)	No prophylaxis is needed if contact history is reliable	N/A
Category II (minor scratches/abrasions without bleeding)	Vaccine only	Day 0, 3, 7, 14, 28
Category III (single/multiple transdermal bites, scratches, or mucous membrane exposure to saliva)	Vaccine + Rabies Immunoglobulin (RIG)	Day 0, 3, 7, 14, 28

Route of administration:

- Intramuscular injection (IM): deltoid muscle in older children/adults; anterolateral thigh in infants.
- Intradermal injection (ID): may be used in some programs (dose-sparing).
- Do not inject into the gluteal muscle.

Important: Always consult the vaccine information leaflet included with the product for detailed preparation and administration instructions.

3. Warnings and Precautions

- Do not delay PEP, start vaccination as soon as possible after suspected rabies exposure.
- Rabies immunoglobulin (RIG) must be infiltrated into and around the wound for Category III exposures, with the remainder given intramuscularly at a site distant from the vaccine.
- For pregnant or lactating women, rabies vaccine is safe and should not be withheld if indicated
- Immunocompromised individuals may require closer follow-up and additional doses.
- Monitor for 15 minutes after vaccination for allergic reactions.

4. Contraindications

- Pre-exposure use: Contraindicated in individuals with known severe allergic reaction to a previous dose or vaccine component.
- Post-exposure use: No contraindications. Rabies vaccination must be given regardless of pregnancy, lactation, or underlying illness, as rabies is almost always fatal once symptoms appear.

5. Adverse Reactions and Reporting

Common side effects:

- Pain, redness, or swelling at injection site
- Headache
- Low-grade fever
- Fatigue, muscle aches

Less common side effects:

- Nausea, abdominal pain
- Rash

Serious but rare adverse events:

- Severe allergic reactions (anaphylaxis)
- Neurological events (extremely rare)

6. Adverse Event Reporting in Botswana:

Health care workers are encouraged to report any suspected adverse events following immunisation (AEFI) to BoMRA. Reporting helps monitor vaccine safety and protect public health. Even if you are uncertain whether the vaccine caused the reaction, reporting ensures potential concerns are identified early.

Steps to report an AEFI:

1. Scan the QR code provided
2. Accept the terms and conditions
3. Complete the reporting form with all available information
4. Submit the form



Or contact:

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