# Prevention and Elimination of Rabies in Latin America: Meeting of National Program Directors

#### BACKGROUND

The commitment to eliminate urban rabies from 414 principal cities in 20 countries of the Region was made in 1983, and strategies and a plan of action to accomplish that task were approved at the I Meeting of Directors of National Rabies Control Programs, held in Guayaquil, Ecuador, later that year. Two other meetings of program directors were held in Brasília (1987) and Porto Alegre (1989) to evaluate the progress of the regional program to eliminate urban rabies and to make any necessary adjustments in its activities.

At the close of the 1980s, PAHO, together with the countries, evaluated the progress attained by the regional program. The evaluation revealed that by 1989, thanks to an intensive dog vaccination campaign and improved case surveillance, 364 of the originally targeted cities were free of the disease. On the basis of the findings, it was recommended that the control program be expanded to city peripheries and small towns in order to completely eliminate dog-transmitted rabies.

The IV Meeting of Directors of National Rabies Control Programs in Mexico City in October 1992 approved broadening the regional program's original goal to include rabies elimination in smaller

towns and rural areas by the year 2000. The participants also emphasized the need for epidemiologic surveillance of wild rabies.

To follow up this process and to keep track of the achievements of the regional program, PAHO convened the V Meeting of Directors of National Programs for the Prevention and Elimination of Rabies in Latin America in Santo Domingo, Dominican Republic, on 13–15 February 1995.

The meeting—which was attended by rabies control program directors from 21 Latin American countries, a PAHO adviser representing the English-speaking Caribbean countries, and observers from national agriculture authorities and biological production laboratories—had several objectives:

- To evaluate the progress made toward the elimination of dog-transmitted rabies.
- To review and adjust the Plan of Action for Consolidation of the Final Phase for Elimination of Dog-transmitted Rabies, 1995–1996.
- To consider the recommendations of a group of experts regarding the technical bases for recognizing areas free of rabies and requirements for animal quarantine.
- To define strategies for surveillance, prevention, and control of rabies transmitted by wild animals.

# Source: Informe final—V Reunión de Directores de Programas Nacionales para la Prevención de la Rabia en América Latina (Santo Domingo, República Dominicana, 13–15 de febrero de 1995). Washington, DC: Organización Panamericana de la Salud, Programa de Salud Pública Veterinaria; 1995. (Doc-

### CONTENT OF THE MEETING

The first presentation gave an overview of the Regional Program for Rabies Elimination: its objectives, goals, stra-

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tegic components, and current status. A chronological review from 1983, when the Plan of Action was formulated, showed that the program had resulted in a reduction of both canine and human rabies cases. In addition, more was now known about the problem of wild rabies—an increasing concern, particularly with regard to cases transmitted by vampire bats.

Another important achievement was consolidation of an infrastructure that could serve to support the control of other zoonoses, owing to the training received by personnel and the strengthening of facilities. It was also recognized that the governments' policy with regard to rabies elimination enjoyed broad support within the population, and the support had contributed to the sustainability of the program.

Perhaps the most important challenge for the program in the next few years is the risk that as elimination of the disease draws closer, the resources allocated to the effort will be substantially reduced. One way to counteract that scenario is to form a Permanent Commission for the Elimination of Rabies in Latin America and the Caribbean, for which the Pan American Institute for Food Protection and Zoonoses (INPPAZ) would act as Secretary ex officio. This proposal will be submitted to the Governing Bodies of PAHO for their final approval.

The next report dealt with the results of the Expert Consultation on the Technical Bases for the Recognition of Rabiesfree Areas and Animal Rabies Quarantine Requirements. In view of the advances made by the rabies elimination program, the need was evident to establish internationally consistent rules to permit identification of areas of the Region that are free of rabies, since transport of companion animals from one area to another is increasing for a variety of reasons.

The presence of rabies in wildlife is a complicating factor in discussion of ani-

mal transport and definition of rabies-free or rabies-endemic areas. Tackling this issue will require redefining some concepts, carrying forward research on the characterization of rabies virus variants and their distribution in different areas, developing rapid diagnostic tests that avoid prolonged quarantine periods, and preparing contingency plans for timely control of reinfection of areas previously considered rabies-free.

The need for work on characterizing virus variants by means of monoclonal antibody techniques was highlighted, as was the support required for subregional reference laboratories. It was also recommended that studies of wild species (foxes, coyotes, bats, mongooses, and others) focus on their ecology and behavior, on the incubation period of rabies in these species, and on the length of time virus is excreted in their saliva. In addition, it was proposed that research be done on the possible contribution of human behavior to the propagation of the disease from one area to another.

The rabies situation in the Region was reviewed by means of presentations by the country representatives. Their reports followed a data-collection format developed by PAHO's Veterinary Public Health Program, which facilitated the presentation of uniform and precise information.

The country reports stressed the importance of carrying out joint activities along border areas and maintaining the continuity of massive vaccination efforts in high-risk zones. The reports emphasized programmed interventions for disease-free areas, the training of health personnel in treatment of affected persons, and quality control of laboratory diagnosis of rabies, especially in areas and countries that are free of the disease.

PAHO was asked to continue promoting political support for sustaining the programs and, in particular, for maintaining or increasing financial resources.

The country representatives expressed their concern about wild rabies, particularly rabies transmitted by vampire bats, which is claiming an increasing number of human victims. It was felt that the status of the groups at highest risk—for example, indigenous people, miners, and military personnel—should be thoroughly analyzed in order to provide them with adequate means of protection, since current pre-exposure treatment regimens are hard to follow to completion.

The receptivity and participation of the community was signaled as vital to rabies elimination programs. Thus, the community must be kept informed not only about control activities but also about results, so that it becomes a participant in the program's success. It was suggested that PAHO prepare a methodological guide to update education and social communication programs for the prevention of rabies.

Emphasis was placed on the need for the governments to maintain responsibility for the rabies elimination effort and to avoid letting that responsibility shift to the technical cooperation agencies.

In a presentation on the rabies situation and the epidemiologic surveillance system for rabies, it was pointed out that countries categorized at rabies-free did not have adequate epidemiologic surveillance. Likewise, in some countries where rabies had been eliminated in the cities, reinfection had occurred because of failures in epidemiologic surveillance. It was also affirmed that the regional information system for rabies surveillance suffered from long delays, and that greater effort was needed to put weekly information to use in the campaign to control and eliminate rabies.

The last presentation dealt with technical cooperation, especially the potential for support among countries.

The final phase of the meeting consisted of an activity programming exer-

cise for the years 1995–1996. The need for technical cooperation with PAHO was noted.

#### RECOMMENDATIONS

The meeting participants agreed on the following set of recommendations:

- 1. Bearing in mind that regional production of rabies vaccines for human and veterinary use is sufficient to supply the needs of the countries, closer collaboration among countries is recommended, facilitated by PAHO/WHO, so that countries which have had difficulties obtaining the vaccines may have them available for their control programs.
- 2. PAHO/WHO should join in the countries' efforts to develop rabies prevention and control strategies to be applied jointly in high-risk border areas.
- 3. Training of the health services' human resources in providing improved care to persons exposed to the risk of rabies should continue, and this type of training should be incorporated into schools for medical and paramedical personnel.
- 4. The countries considered free of dogtransmitted rabies should strengthen their epidemiologic surveillance systems, maintaining laboratory testing of samples from animals that die of unknown causes, nervous signs, or symptoms suggesting rabies. Studies should be conducted to evaluate the risk of reintroduction of rabies by imported carnivores or through the propagation of wild rabies. These studies should also include a socioeconomic evaluation of the effect of reintroduction of the infection.
- 5. The countries should give special attention to the development of educational strategies aimed at the community and at health personnel to gain their participation in the definition, planning, direction, execution, and evaluation of the activities of local programs and to ensure

people's commitment to the goal of eliminating rabies in the Region.

- 6. Each country should review and strengthen its epidemiologic surveillance and information systems in order to ensure prompt follow-up of data and facilitate decision-making on control of foci and prevention of human and animal rabies.
- 7. Technical cooperation from PAHO/WHO is needed in the preparation and distribution of a methodological guide that will help the countries develop and evaluate the education component of the rabies program. The guide will be aimed primarily at the school population and risk groups, according to the epidemiologic situation of the countries.
- 8. National authorities should be asked to facilitate the timely issuance of health permits for the import and/or export of samples and supplies used in the rabies elimination program.
- 9. In view of problems experienced by some countries with regard to the scarcity and high cost of rabies vaccines, countries should estimate their supply needs during the planning phase in order to assure vaccine availability and avoid

losses. Surpluses should be put at the disposal of PAHO/WHO for the creation of a vaccine bank.

- 10. The health authorities of countries that still do not have laboratories where the fluorescent antibodies technique is available should take steps to incorporate this diagnostic instrument into epidemiologic surveillance of the disease as soon as possible.
- 11. A Regional Commission for the Elimination of Rabies in the Americas, consisting of Directors of National Rabies Control Programs, should be established, with INPPAZ acting as the Secretary ex officio.
- 12. In view of the endemicity of rabies in mongooses in five countries of the Caribbean area and the development of oral rabies vaccines for wild species, PAHO/WHO should offer its cooperation in studies designed to adapt an oral vaccine to control rabies in mongooses.
- 13. The cooperation of PAHO/WHO was requested to ensure that the ongoing privatization movement in the agricultural and health sectors in the Region does not affect the objectives of the rabies elimination program.

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## Humanitarian Assistance in Haiti

As its name implies, PAHO's Emergency Preparedness and Disaster Relief Coordination Program has two important mandates: disaster preparedness and co-

Source: Pan American Health Organization. Emergency Preparedness and Disaster Relief Coordination Program (PED), with emphasis on PAHO's experience in humanitarian assistance. Washington, DC: PAHO; 21 November 1994. (Document SPP23/6).

ordination of assistance in the wake of disaster. Over the years, the focus has expanded to encompass technological disasters and complex emergencies such as those resulting from civil conflict, in addition to natural disasters such as earthquakes, hurricanes, and volcanic eruptions. Disaster response has also evolved from the coordination of international aid to a direct operational role in complex disasters. The most notable