Wildlife rabies is a serious public health concern. According to the 2009 Centers for Disease Control and Prevention (CDC) Rabies Surveillance Report, wildlife rabies is responsible for 92 percent of all reported rabies cases in the United States (Blanton, et al. JAVMA, 2010). The use of licensed oral rabies vaccine in oral rabies vaccine (ORV) programs has been effective in controlling rabies in certain terrestrial wildlife reservoir species since the early 1990’s.

The United States Department of Agriculture, Animal and Plant Health Inspection Service, Wildlife Services (WS) ORV program is designed to reduce transmission of wildlife rabies to domestic pets, livestock and humans. It is estimated that there are over 40,000 administrations of Post Exposure Prophylaxis (PEP) against rabies in humans in the United States annually at an average cost of $4,042 per treatment (Meltzer, et al. Vaccine, 2008) resulting in over $160,000,000 per year in associated human health care costs. These costs do not include indirect impacts on the population from anxiety, fear, and trauma associated with rabies threats to people, their pets and livestock. In spite of a public health strategy that is effective in preventing human rabies deaths in the United States, the financial cost of coexistence with wildlife rabies is high, exceeding $300,000,000 annually (Slate, et al. Proceedings 20th Vertebrate Pest Conference, 2002).

ORV campaigns in conjunction with other rabies control measures are effective. Regular distribution of oral rabies vaccines to immunize specific wildlife species increases the percentage of rabies immune animals living within the ORV baiting zones. Creating a sustained reservoir population of individual immune animals results in an overall decrease of wildlife rabies cases.

The level of the ORV program’s success in the United States can be quantified as follows: transmission of the canine strain of rabies in south Texas coyote populations has been eliminated; the westward expansion of raccoon rabies strain has been halted at the Appalachian Mountains; the gray fox strain of rabies has been confined in the Southwest and the epizootic area is being consolidated and reduced; and, strategies have been developed to address wildlife rabies outbreaks in urban environments, especially in the Northeastern United States. Today, federal and state sponsored ORV programs, supported by the CDC, continue to monitor areas cleared of wildlife rabies while addressing new challenges. Due to the level of success achieved to date, the federal government has signed a North American agreement with Navajo Nation, Canada and Mexico called the North American Rabies Plan. A critical component of this plan is to control wildlife rabies.
Because of the economic downturn in the United States economy, all ORV programs (state and federal) are now faced with rapidly declining levels of governmental funding and resources while public support remains high. Ironically, as funding levels for United States ORV programs decline, societal changes have led to increasing numbers of interactions between humans and wild animals in urban habitats. Today and in the future, wildlife rabies prevention is, and will continue to be, a key factor in maintaining the integrity of rabies control in the United States. Funding at this level will have the additional benefit of job maintenance and creation, especially in rural locales. The ORV Program also supports alleviation of additional health care costs and disparities between rural, suburban and urban communities.

RESOLUTION:

The United States Animal Health Association requests that the 112th Congress appropriate funding of at least $28 million in the fiscal year 2012 budget for the United States Department of Agriculture (USDA), Animal and Plant Health Inspection Service, Wildlife Services oral rabies vaccine program, a long standing and successful One Health project. This funding level would allow the USDA to be less dependent on emergency funding, to maintain ongoing logistical support, to provide rabies case surveillance necessary for the program, and to maintain adequate levels of rabies immunity in target wildlife populations.

RESPONSE:

USDA, APHIS, WS

USDA, APHIS, WS recognizes among its many priorities the need for new or improved oral rabies vaccines and baits to more aggressively achieve rabies management goals. WS and cooperators have initiated preparatory steps to facilitate field trials with prospective vaccine-bait candidates. The expectation is that new vaccine-baits would enhance program progress toward rabies management goals based on results of field vaccine comparisons between Raboral V-RG (Merial, Athens, GA) used in the U.S. and ONRAB (Artemis Industries, Guelph, ON, CA), a human adenovirus-rabies recombinant vaccine.