Voiceover:
Ouagadougou, Burkina Faso, Daniela is gently roused for school.
Nong Khai, northeast Thailand, a loving mother prepares breakfast for Bess and her little sister Madee.
In the collective unconscious, Louis Pasteur discovered vaccination when he saved a young shepherd, who had been bitten by a rabid dog, from certain death.
A grim assessment: 120 years later, rabies still kills.

Dr. Diop:
Rabies is a zoonotic disease, meaning present in humans and animals. In humans, it takes the form of an acute encephalomyelitis. The rabies virus makes it deadly.

First
Rabies follows expose, usually exposure usually from dogs and cats. We can say that dogs are the main reservoir and the main transmitting vectors since as many as 97% of the cases are caused by infected dogs.

Dr. Rigobert:
Rabies symptoms in humans: it is an infectious disease so fever and other general manifestations, like headaches, are present. But the classical sign of rabies is hydrophobia, or fear of water. There are other clinical forms, such as the paralytic form, in which the lower extremities are paralyzed. In its furious form, there are signs of acute mania and the patient may even attack medical personnel.

Second
The evolution of the disease: we can say that it starts first with the incubation period. This period means that the virus does not do anything; it just remains at the site of inoculation. And during this period of time we can prevent the disease. We can give the vaccination and we can give the rabies immunoglobulin to neutralize the virus at the site of the bite and then we can save the patient. So once the disease appears, I mean once there is just a symptom of rabies then we cannot treat the patient at all.

Dr. Diop:
Once rabies has declared itself, it is always deadly.

Third
Rabies actually exists in every continent, across the world, except for Antarctica. In fact there are over fifty-five thousand people that die every year of rabies, and this is probably an underestimate.

Fourth
You see, in Thailand, we use post-exposure in 400 000 cases per year. We have sixty million people in Thailand; that means that XX% of our people receive post exposure every year.

Dr. Rigobert:
Rabies is still a public health issue in our countries, particularly in Burkina Faso because many people are attacked. At our two rabies treatment centers in Ouagadougou and Bobo-Dioulasso combined, we count 4,000 attacks each year. Of these 4,000 attacks, about 2,500 people are treated for rabies. But there are many more attacks in rural areas. Rabies treatment centers are too far away, so people don’t come. The actual number is probably closer to 40,000.

Fifth
In many countries, rabies is not a reportable disease and in fact it is misdiagnosed often because people don’t think about rabies. Or perhaps it’s diagnosed as another encephalitic disease, like cerebral malaria, or something like that, when in fact, the person actually is infected and died of rabies.

Dr. Tordo:
Human rabies treatment is very simple. Vaccination is the only one that is truly effective. There are two types of vaccination: one is preventive and the other is given after exposure to a rabid dog. But the same mechanism works in both cases. Preventive vaccination, like post-exposure vaccination, allows the body to generate antibodies. Their purpose is to neutralize the virus before it infects the nervous system and causes death. Massive preventive vaccination in endemic countries is difficult for two reasons. The populations are large and, with three injections, the protocol is fairly complex. Scientists are working to simplify the system, but are still in the research stage.

Voiceover:
Although they are in daily contact with dogs that may carry the virus, Daniela, like Bess and Madee, has not been vaccinated.

Sixth
Across the world it’s really sad to think about the fact that the population that is most affected by rabies is actually our children. In fact 40-60 percent of the deaths occur in children less than 15 years old, and this is because children are often not aware of the dangers of playing with an infected animal, or if they do get bitten or scratched by a rabid animal, they fail to tell their parents about the fact and eventually they come down with rabies. And once clinical rabies is evident, there is no cure.

Jamal is a young farmer from the outskirts of Ouagadougou. He was bitten by a stray dog two months ago but made do with a band-aid. By the time his family took him to the hospital, it was too late. He died several hours after admission.

Dr. Bazie:
He hadn’t been to school. I think a lack of knowledge can lead to cases like this.

Dr. Diop:
Unfortunately, health-care providers do not know how to treat bites. We see this every day.

Dr. S. Diop:
Treatment depends on the severity of the bite. Local care is very important at every stage. Immediately after a bite, the wound must be washed thoroughly with water,
soap and antiseptics. The second step is to prevent the rabies risk. If the wound is not that serious (stage 1 or 2), this is done through vaccination. For a serious wound, rabies immunoglobulins are also administered.

Voiceover:
A street dog in Bangkok scratched Sumalee’s face. She was aware of the potential risk and went to the health-care center. The medical team took her seemingly benign wound very seriously. She was given the vaccine and the rabies immunoglobulin injection.

Dr. Tordo:
Vaccination enables your body to make immunoglobulins, but this takes time. If you are bitten, you might need the immunoglobulins immediately. First we supply immunoglobulins to neutralize the virus. Then the body starts to make its own immunoglobulins and takes over the process.

Voiceover:
Unlike Daniela, who only knows about rabies from her mother’s warnings, Bess and Madee learned about it at school.

Seventh
In the urban areas people are usually aware of rabies, but we have to be aware that most people in the rural areas sometimes do not catch the message very well, and then even after exposure from suspicious animals, they just go to have the hobo remedies or to the traditional healers and most victims (99 percent) do not seek any proper medication at all.

Dr. Lambert:
People are certainly aware of the danger of rabies. Finances are the only reason they don’t come. If the rabies center is far away, they have to pay for transportation, for a place to stay in Ouagadougou and for the vaccine. Rabies treatment costs at least 40,000 CFA francs. This is very expensive for a farmer who might earn only 10,000 CFAs a year. So nothing is done until the disease or death makes an appearance. That’s often how it goes and is true of other diseases. People would rather die at home than to go to a clinic.

Dr. S. Diop:
Decentralization must go further and regional rabies centers must be established so immediate care can be provided close to home.

Dr. Rigobert:
There are only 2 rabies centers in Burkina Faso. We would like all of our 13 regional health departments to provide rabies treatment. This would make rabies less lethal.

Eighth
Probably the best thing that we could do is to eliminate the source of rabies and how people are actually exposed to this disease. And in looking at where rabies is most prevalent, what we find is that over ninety-five percent of human deaths are actually caused by exposure to rabid dogs. So, if we were going to eliminate the source of the
disease, the best thing is to go out and vaccinate dogs in countries where canine rabies or dog rabies is still prevalent.

Ms.: People are not unaware of rabies. After the state began its rabies vaccination campaigns, they had their dogs vaccinated. But people tend to forget and think one injection is enough. Ideally, dogs should be vaccinated each year.

Ninth
The values, the culture and the religion, an example in Thailand, you know the Thai culture and the Buddhist people they like their dogs and they like to feed their dogs. But they don’t have the responsibility for their dogs so they don’t care about the vaccination of the dogs but they like to feed and take care of their dogs, so in my mind, we have to control stray dogs and stray cats first.

Voiceover: In Bangkok alone, there are an estimated 850,000 dogs. There are no figures for the African countries.

Dr. Rigobert: The health-care authorities are not insensitive to the rabies issue. Unfortunately, we have a lot of epidemic diseases in our countries. Last year, 3 deaths were officially attributed to rabies. This seems low compared with the 3,000 cases of meningitis.

Dr. S. Diop: Rabies is clearly under-reported. We need to do everything we can to obtain reliable data. This would have a major impact on both the people and their politicians. And it would lead to a stronger commitment to combating this scourge.

Tenth
The Alliance for Rabies Control is a group of people who have come together and the alliance has asked for partnerships from various areas throughout the world, including international organizations like the World Health Organization, the World Animal Health Association, WISPA, which is an NGO protecting animals, as well as universities. Even stakeholders including industry have come together because we’re all working towards the elimination and prevention of rabies throughout the world.

Dr. Diop: I am optimistic about the future. The pharmaceutical industries are helping because our countries are poor and have few resources. The entire world must mobilize to fight rabies. We have to talk about it; communication costs very little and will truly help these populations.

Eleventh
World Rabies Day was started in 2007 so the alliance sees this as an annual event that will be held every year on September 28. And its an opportunity for all countries to do something. Whether you’re big or small, everybody can do something to increase awareness on World Rabies Day.
Voiceover:
For Bess, Madee, Daniela and millions of others, rabies should have ceased to be a threat 120 years after Pasteur. We have the weapons and solutions. Awareness of the disease is growing. For endemic countries, this renewed interest provides hope that we will win the battle against rabies.