



Proposed Amendments to  
105 CMR 335.000:  
TREATMENT OF PERSONS EXPOSED TO  
RABIES

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Public Health Council  
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# Background

- Rabies virus is a preventable disease of mammals transmitted through the bite of a rabid animal.
- Virus infects the central nervous system, causing disease in the brain and death.
- Rabies is a reportable disease at the state and the federal level.
- The Centers for Disease Control and Prevention (CDC) indicate that the majority of rabies case reports received each year occur in wild animals like raccoons, skunks, bats, and foxes.
- Human rabies cases in the United States are rare, with only 1 to 3 cases reported annually.
- Since 2003, thirty-four cases of human rabies have been diagnosed in the United States, in which 10 cases were found to have contracted infection outside of the United States and its territories.
- In Massachusetts, the last reported case of rabies in a human (and subsequent death) occurred in 2012 (individual had been bitten by a brown bat).
- Prior to this case, no human case had been reported in Massachusetts since 1935.

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[-http://www.cdc.gov/rabies/index.html](http://www.cdc.gov/rabies/index.html)

[-http://www.cdc.gov/rabies/location/usa/surveillance/human\\_rabies.html](http://www.cdc.gov/rabies/location/usa/surveillance/human_rabies.html)

[-http://www.reuters.com/article/us-rabies-massachusetts-idUSTRE8oT1W220120130](http://www.reuters.com/article/us-rabies-massachusetts-idUSTRE8oT1W220120130)

# Rabies Post-Exposure Prophylaxis

- Rabies Post-Exposure Prophylaxis (RPEP) is preventive medical treatment given to a human immediately after exposure to the rabies virus.
- Treatment recommendations and updates are provided by the Advisory Committee on Immunization Practices (ACIP). The latest recommendations were released in 2008.
- The number of RPEP treatments to prevent human rabies provided in the United States each year is unknown; however, it is estimated to be about 40,000 to 50,000.
- Cost of treatment varies but typically exceeds \$3,000.00.
- While human cases are rare, treatment after exposure does occur and is expensive.

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-CDC. Human rabies prevention--United States, 2008: recommendations of the Advisory Committee on Immunization Practices. MMWR 2008;57[No. RR-3]. [http://www.cdc.gov/rabies/resources/acip\\_recommendations.html](http://www.cdc.gov/rabies/resources/acip_recommendations.html)  
<http://www.cdc.gov/rabies/location/usa/cost.html>

# Reasons to Amend

- The preservation of this regulation with proposed amendments is important to those residents of the Commonwealth who do not have health insurance coverage.
- 105 CMR 335 sets forth the standards for the provision of rabies post-exposure prophylaxis treatment by local boards of health to individuals with no insurance coverage.
- This regulation has not been updated in over 20 years.
- Terminology and references to the federal organization governing treatment recommendations have evolved.
- The proposed amendments to 105 CMR 335.000 reflect those changes.

# Proposed Amendments

- 105 CMR 335.001: Purpose, 105 CMR 335.002: Authority, 105 CMR 335.003: Citation

Sections are proposed for deletion to conform to formatting policy from the Office of the Secretary of State.

- 105 CMR 335.000: Definitions:

A proposed Definitions Sections has been added, to include the following:

- Advisory Committee on Immunization Practices (ACIP)
- Domestic Animal
- Post-Exposure Prophylaxis
- Rabies
- Uninsured

- 105 CMR 335.100: Cases Requiring Rabies Post-Exposure Prophylaxis Treatment

- Addition of language concerning exposure to rabies by a bat.
- Treatment for exposure to rabies by a bat has always been covered through this regulation, but as exposure by a bat is defined more broadly than other mammals, a separate section has been included; the proposed regulatory text refers to exposure to rabies by a bat as “... *defined by the most current guidelines from the Advisory Committee on Immunization Practice and the Department of Public Health.*”

## Proposed Amendments cont.

- Proposed amendments to sections 105 CMR 335.010 through 335.500 represent mainly practical language changes and the addition of the federal advisory committee (ACIP) which was not included in previous language.
- The proposed amendments concerning scope, cases requiring treatment, certification, non-residents, treatment charges and patient statement do not fundamentally alter the responsibilities of the local board of health.

## Recommendation/Next Steps

- Bureau of Infectious Disease and Laboratory Sciences has conducted a comprehensive review of 105 CMR 335.000: Treatment Of Persons Exposed To Rabies and recommends these proposed amendments.
- Following this presentation to the Public Health Council, a public hearing and comment period will be held.
- A summary of public comments and any changes to the proposed amendments will be presented at a subsequent meeting of the Public Health Council.