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Comparison of rabies control methods in Colombo Municipality Area (CMA) with methods followed in Sri Lanka during the period from 1990 to 2006

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General Objective: - To critically evaluate the rabies control methods in CMA and Sri Lanka.

Methodology: - An audit was carried out during a period of one month using the past records available at relevant authorities after obtaining permission for data collection.

Results and Conclusion: - Vaccination of dogs against rabies, elimination of stray dogs, post-exposure treatment for humans and dog population control by sterilization and hormonal treatment are the main rabies control methods adopted by Colombo Municipality Council (CMC). Public health education and community awareness programmes, enforcement of rabies control legislation and registration of stray dogs are also carried out by CMC. The control methods that are adopted at national level are similar to those done at CMC. From year 2002 to 2005 there has not been a significant change in the incidence of human rabies in Sri Lanka. The males predominated, with the age group of 20-59 being the most vulnerable (47% of total cases), and >60 years of age, was emerging as a new risk group. In Sri Lanka rabid stray dogs were responsible for 48% of the bites in 2006.

Both at CMC and national level, there was a sudden rise in the number of dog vaccinations during 2006, making it the highest number of dog vaccinations achieved for the past 16 years, but proper dog vaccination practices were not followed. The post-exposure prevention with anti-rabies vaccines and serum was not cost-effective. Sterilization and hormonal treatment were done on house-hold pets, with a highly unpractical target, and not being cost-effective as well. In CMA, the number of dog registrations showed a sudden increase in 2006. Island wide, dog elimination was reduced by 46% from 2002 to 2005, but the number of confirmed dog rabies cases, which was identified as a better indicator of assessing the effectiveness of rabies control programmes, was constantly at a higher level.

Public awareness programmes on prevention of rabies conducted by CMC at school level is a good tool to reach the community, although it is expensive and time consuming. This practice should be expanded to include the risk group in the age of 20 – 59 years.

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