Update on bat lyssavirus

The second meeting of the Lyssavirus Expert Group was held on 3 December 1996. The group reviewed new information on the virus. This included the first identification of lyssavirus in an insectivorous bat. A yellow-bellied sheathtail bat, *Saccolaimus flaviventris*, was found on the ground and unable to fly, near Toowoomba, Queensland. Following euthanasia, the animal was found to have a non-suppurative encephalitis on histopathology and was lyssavirus positive by immunofluorescence.

Research priorities for the bat lyssavirus were discussed by the group. These included both wildlife and human aspects. This research will further inform public health action required for the control of the virus.

The group noted that while current advice to medical practitioners and public health authorities stands[1], there is the possibility of inapparent exposure to lyssavirus. This has been the experience with rabies in the United States of America[2,3]. The group recommended that neurologists and intensive care physicians be alerted to look for lyssavirus infection in cases of unexplained encephalopathy. The recommendations of the National Health and Medical Research Council for post-exposure vaccination of previously vaccinated persons for rabies should be applied to lyssavirus[4].

The group recommended that the National Health and Medical Research Council *Australian Immunisation Procedures Handbook* be updated to include advice on pre- and post-exposure prophylaxis for lyssavirus.

References

1. Lyssavirus Expert Group. Prevention of human lyssavirus infection. *Comm Dis Intell* 1996:20;505-507.
2. Human rabies - Texas, Arkansas and Georgia, 1991. *MMWR Morb Mort Wkly Rep* 1991:40;765-769.
3. Human rabies - New York, 1993. *MMWR Morb Mort Wkly Report* 1993:42;799-806.
4. National Health and Medical Research Council. *The Australian immunisation procedures handbook* 5th edition. Canberra: Australian Government Publishing Service, 1995.