



Indiana State Department of Health

Epidemiology Resource Center

Questions and answers about rabies and bats and camping

Do I need to be concerned about rabies while camping?

More than 11 million persons enjoy camping each year in the USA. Few individuals will ever be exposed to a rabies-suspect animal or need medical intervention due a potential exposure while camping. To date, no human rabies cases due to bats in the USA have implicated camping as a risk factor for an unrecognized exposure.

Why is there a concern about bats and rabies?

Rabies in humans is rare in the USA. There are usually 1-2 cases per year. The most common source of rabies in the USA is from bats. For example, among the 19 naturally acquired cases of rabies in the USA from 1997-2006, 17 were associated with bats. Among these, 14 patients had known encounters with bats. Four people awoke because a bat landed on them and one person awoke because a bat bit him (these events occurred within their primary residences). One person was reportedly bitten by a bat outdoors while he was exiting from his residence. Six persons had a history of handling a bat while removing it from their primary residences. One person was bitten by a bat while releasing it outdoors after finding it on the floor inside a building. One person picked up and tried to care for a sick bat found on the ground outdoors. Three males ages 20, 29 and 64 had no reported encounters with bats but died of bat-associated rabies viruses.

What is rabies and how do people get it?

Rabies is an infectious viral disease that affects the nervous system of humans and other mammals. People get rabies from the bite of an animal with rabies (a rabid animal). Any wild mammal, like a raccoon, skunk, fox, or bat, can have rabies and transmit it to people. It is also possible, but quite rare, that people may get rabies if infectious material from a rabid animal, such as saliva, gets directly into their eyes, nose, mouth, or a wound.

Because rabies is a fatal disease, the goal of public health is, first, to prevent human exposure to rabies by education and, second, to prevent the disease by anti-rabies vaccination if exposure occurs. Tens of thousands of people are successfully vaccinated each year after being bitten by an animal that may have rabies. A few people die of rabies each year in the United States, usually because they do not recognize the risk of rabies from the bite of a wild animal and do not seek medical advice.

Why should I learn about bats and rabies?

Most of the recent human rabies cases in the United States have been caused by rabies viruses from bats. Awareness of the facts about bats and rabies can help people protect themselves, their families, and their pets. This information may also help clear up misunderstandings about bats.

When people think about bats, they often imagine things that are not true. Bats are not blind. They are neither rodents nor birds. They will not suck your blood -- and most bats do not have rabies. Bats play key roles in ecosystems around the globe, from rain forests to deserts, especially by eating insects, including agricultural pests. The best protection we can offer these unique mammals is to learn more about their habits and recognize the value of living safely with them.

How can I tell if a bat has rabies?

Rabies can be confirmed only in a laboratory. However, any bat that is active by day, is found in a place where bats are not usually seen (for example, in a room in your home or on the lawn), or is unable to fly, is far more likely than others to be rabid. Such bats are often the most easily approached. Therefore, it is best never to handle any bat.

My child was at a camp this summer. Sometimes he saw bats inside the structure where he slept. Is he at risk for an exposure to rabies?

Most bats are not rabid. Sometimes, bats are infected with rabies and may pose a risk for exposure to humans. In camp situations where bats are observed, post-exposure vaccination should be considered when a person is bitten by a bat and the animal tests positive (or is not available for testing), or when contact between a human and a bat has occurred or was likely and uncertainty exists as to whether a bite may have occurred (e.g., in situations involving people awakening due to the presence of a bat on them, infants and young children, and persons with reduced mental function due to medication, alcohol, illness, age, etc.). In many camp situations, the mere presence or sighting of bats is common and normal. Precautions (such as avoiding intentional contact with a bat, using screens or mosquito nettings) may be needed to prevent potential exposures to rabies and to assess the risk of exposure when bats may have been present.

What should I do if I come in contact with a bat?

If you are bitten by a bat -- or if infectious material (such as saliva or brain material if it is killed) from a bat gets into your eyes, nose, mouth, or a wound -- wash the affected area thoroughly and get medical advice immediately. Whenever possible, the bat should be captured and sent to a laboratory for rabies testing.

People usually know when they have been bitten by a bat. However, some types of bats have small teeth which may leave marks that disappear quickly. There are situations in which you should seek medical advice even in the absence of an obvious bite wound. For example, if you awakened because a bat landed on you while you were sleeping, if you awakened and found a bat in your room, if you see a bat in a room with an unattended child, or see a bat near a mentally impaired or intoxicated person, try to safely capture the bat and have the bat tested, and seek medical advice.

People cannot get rabies just from seeing a bat in an attic, in a cave, at summer camp, or from a distance while it is flying. In addition, people cannot get rabies from having contact with bat guano (feces), blood, or urine.

How does a rabid bat act?

Many factors affect the probability of detection of an incident where a bat may have acted abnormally, created a disturbance, and where someone may have been exposed to rabies. For example, rabid bats may be found on the ground unable to fly. Rabid bats may also be found dead on the floor. If a bat appears abnormal (i.e., cannot fly or has died) and persons have awakened to find it on them or close to them or within their immediate vicinity, then the animal should be tested for rabies. Under these conditions, the probability of it being rabid is about 5%. If the animal is not tested for rabies, one will have to assume that it may have been rabid. Each individual (or their parent) will have to decide if they think they would have been aware or awakened by contact with a bat or a bite from a bat.

If vaccination is effective, why do people still die of rabies in the USA?

In some cases, persons who died of rabies knew they were bitten by a bat. However, they may not have been aware that bats can have rabies and transmit it through a bite, and so did not seek medical attention. In other cases, it appears possible that young children may not fully awaken due to the presence of a bat (or its bite) or may not report a bite to their parents. For example, one 4-year-old patient, who died of rabies, was still sleeping when her caregivers checked on her because they heard strange noises that were from a bat that was found on the floor of her bedroom. She was most likely bitten and did not fully awaken. This patient developed parasthesia (an abnormal sensation which may occur at the site of a rabies exposure) on her neck as she became sick with rabies a few weeks later. In another case, a 10-year-old child removed a bat from his bedroom without adult supervision and several months later developed parasthesia on his arm and one side of his head as he became sick with rabies.

If bats were present when campers were sleeping, a careful assessment by local or state public health professionals of the potential for rabies exposure on a case-by-case basis needs to occur. Campers who may have been bitten by a bat or had direct contact with a bat need to be identified for appropriate evaluation, and, if needed, vaccinated to prevent rabies.

How will I know if my child was potentially exposed to rabies by bats while camping?

You will need to find out from your child if he or she was bitten by a bat or had direct physical contact with a bat or awakened or fell asleep in close proximity to bats. If this has occurred, a careful evaluation will be made in consultation with knowledgeable public health professionals. There are many complex factors to consider but some things will help in these evaluations. For example, if your child slept under mosquito netting or in an enclosure where bats were excluded by screening, this would reduce considerably any possibility of your child being bitten by a bat without your child's awareness of the incident.

How will my health department help me if bats occurred at my summer camp and I have questions?

In a risk assessment where campers have seen bats, public health professionals will consider how many people saw bats, where and when the bats were seen, whether or not supervisory adults were present or made bed checks and how often, the age of the campers, the number of persons present in a sleeping area, the mental function of persons in this situation, the type, size, age and history of the structure in which the bats were found, the time of year, and, if it can be determined, the species of the bat.

My child says he was bitten by a bat. What should I do?

If the bat was captured, tested, and is negative for rabies, your child will not need human rabies post-exposure prophylaxis. If it tests positive or is not available for testing then it would have to be assumed that the bat may have had rabies and post-exposure prophylaxis should be initiated without delay. Children should be encouraged to wash any wounds, especially animal bites, thoroughly with soap and water, as soon as possible, and to report encounters with bats, and any bite from an animal, to an adult.

What is the post-exposure prophylaxis for rabies?

Rabies post-exposure prophylaxis (or PEP), consists of a dose of human rabies immune globulin and 4 doses of rabies vaccine given on days 0, 3, 7, and 14. The vaccine is given in a muscle, usually in the upper arm. The PEP is highly effective at preventing rabies if given as soon as possible following an exposure. If a person has previously received rabies PEP or was pre-exposure vaccinated against rabies, only 2 doses of vaccine (on days 0 and 3) will be needed. Your healthcare provider and local health department will be able to tell you where to obtain PEP.

(<http://www.cdc.gov/mmwr/preview/mmwrhtml/00041987.htm>)

I am receiving rabies PEP due to exposure to a rabid animal – can I give rabies to other people?

Persons cannot give rabies to other people unless they themselves are sick with rabies. The prophylaxis you are receiving will protect you from developing rabies, and therefore you cannot expose other people to rabies. You should continue to participate in your normal activities.

I have had contact with a person who is undergoing rabies PEP – could this person give me rabies, and should I receive PEP?

A healthy person undergoing PEP after a potential exposure does not have rabies and cannot transmit it to another person. An exposed person receives rabies PEP to prevent them from developing rabies.

More information about rabies is available online at www.cdc.gov/rabies.

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