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Experts urge immediate action as rabies remains global public health threat

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Supreme Courtâ??s order to remove stray dogs from Delhi-NCR has renewed focus on humane population control

Rabies, a preventable yet fatal viral disease, continues to pose a significant public health risk worldwide. According to the World Health Organization (WHO), dogs are responsible for nearly 96% of human rabies cases, with the remaining 4%

caused by bites from cats, monkeys, mongooses, wild cats, and cattle.

The Supreme Court’s order to remove stray dogs from Delhi-NCR has renewed focus on humane population control. Countries worldwide rely on sterilisation, vaccination, and strict pet laws to tackle this issue. Rabies, mostly spread through dog bites, is fatal but entirely preventable. Experts stress that awareness and timely treatment are key. Eliminating rabies through vaccination and education must be an urgent public health priority.

Health experts emphasise that any animal bite or scratch, whether from a pet or a stray, requires prompt medical attention. At a recent health forum at IHW, leading medical professionals warned of the ongoing rabies threat and shared prevention strategies with innovation & advancement.
Here is what experts across government, defence, and private hospitals had to say regarding best practices and critical guidelines for managing animal bites:

India leads the world in advanced rabies prophylaxis by manufacturing Rabies Monoclonal Antibodies (RmAbs), including WHO-collaborated Cocktail RmAbs. These innovations are listed on the WHO Essential Medicines List and recommended in their Position Papers, cementing India's role as a pioneer.

They shared Cocktail RmAbs is a breakthrough alternative tol Rabies Immunoglobulin (RIG) and equivalent to HRIG because they offer reliable production, low volume High potency, and equal efficacy, effectively solving RIG's limitations of supply issues. Even a recent Real World study on 1500 victims, Doctor & Patient rated good to excellent approx 92% tolerability.

Dr Ksh. Manglem Singh, President of the Indian Medical Association, South East Manipur (IMASEM), addressing doctors and healthcare providers, said "Stay updated on guidelines, ensure complete prophylaxis, and conduct regular training for your teams. Rabies is entirely preventable, yet delayed or incomplete treatment can be fatal. Every healthcare worker must treat each exposure as an urgent case and educate patients about the risks."

Dr Ravish HS, Professor of Community Medicine Kempegowda Institute of Medical Sciences (KIMS), Bangalore APCRI, emphasised strengthening health infrastructure and technology: "Geo-tagging Anti-Rabies Clinics will help patients find care quickly. Mapping high-risk areas and ensuring vaccine availability is crucial. Smart use of technology and robust public health systems can significantly reduce rabies deaths."

Dr Yogesh Gautam Chief Medical Officer, ARC Clinic Head, In-Charge, Safdarjung Hospital, New Delhi, shared important guidelines on what to do after an animal bite, “Poor awareness about bite categorisation and prophylaxis remains a challenge. Any bite with visible bleeding, whether from stray, wild, or pet animals, is Category III and requires complete post-exposure prophylaxis (PEP), which includes thorough wound washing for 15 minutes with soap and water, passive immunisation through Rabies Immunoglobulin or Cocktail Rabies Monoclonal Antibodies injected at the bite site (mandatory for Category III bites), and administration of the Anti-Rabies Vaccine for Category II and III bites. It is noteworthy that India is leading the way in passive immunisation against rabies, being the only country in the world producing Cocktail Rabies Monoclonal Antibodies.”