

## Notes &amp; News

**Two years of IDRV in Kerala (2009 - 2011)****Prof. (Dr.) Thomas Mathew**

Prof. of Community Medicine, Govt. Medical Collegem, Thiruvananthapuram

**Background**

Rabies, a deadly viral infection that is mainly spread by infected animals. In the 21<sup>st</sup> century, Rabies remains incurable. Legislation and implementation regarding dog's population control through sterilization are not practiced adequately. In this situation, human pre and post exposure prophylaxis together with vaccination of domestic animals and wide life animals are currently the most efficient interventions. In Kerala, like any other part of the country, the high cost of cell culture vaccines administered intramuscularly was the major limiting factor in the fight against the disease. Though the use of intra dermal route for tissue culture anti rabies vaccine was approved by Government of India in 2006, it's implementation in yet to gain momentum.

**Implementation process**

IDRV has become a reality in Kerala due to the synergistic support from the department of Health, Government of Kerala by providing administrative support and academic inputs from dedicated members of APCRI which showed the commitment of the association towards the achievements of its organizational goals. The success of this programme in Kerala can be attributed to the broad base ownership built for IDRV in Government Medical Colleges and also in the district health services<sup>1</sup>. The Kerala experience shows that in order to translate policy to practice requires the back up of technical, administrative, political and scientific advocacy. Some of the weakness that were identified were the non involvement of the private sector, lack of IDRV facility at the PHC level and also the inability to provide IDRV round the clock at all the centres.

IDRV provides a foundation to develop enormous opportunities to provide vaccine free of cost to all patients and also achieve greater acceptance among the public.

**Unique features of IDRV implementation in Kerala.**

- **Implementation through the Government system - facilitated by**

- ◆ Strong Political will
- ◆ Administrative and logistic support from DHS, NRHM and KMSCL
- ◆ Artistic innovations by SDCMC & HLPPT
- ◆ Academic inputs From Community Medicine departments of five government medical colleges through SPEID Cells & RPEID Cells

- **Systematic implementation**

- ◆ National workshop for developing Guidelines (20th -21st September-2008)
- ◆ ToT at IPM, Hyderabad (15th -18th December 2008)
- ◆ CME and hands on training since Feb. 2009
- ◆ Inauguration of 1st model IDRV clinic on 27th Feb 2009
- ◆ Visit by Dr. FX Meslin, Team leader, WHO, Geneva (18th-21th Nov 2009)

- **IDRV free of cost for all (APL/BPL)**

as per the GO (Rt) No. 3357/2009/ H&FWD, dt. 18.11.2009

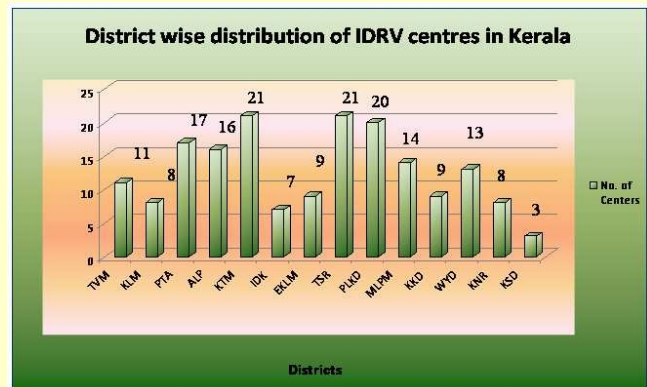
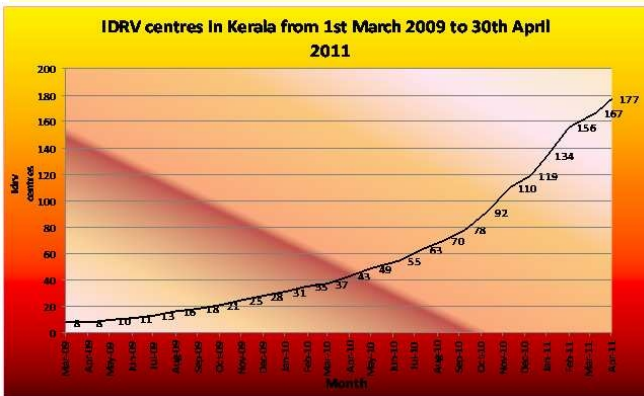
**Status of IDRV in Kerala from March 2009 to April 2011**

Realizing the significance of implementing Intra Dermal Rabies Vaccination (IDRV) in the state, the Government has decided to provide IDRV free of cost to all, irrespective of their APL and BPL status. As on today,

there are 177 centers providing this service in this state and the government is planning to scale it up to all hospitals in the state which caters to more than 5 bite

victims per day. From March 2009 to April 2011, 73797 patients have received IDRV

Total IDRV Given	Sex wise distribution		Category of Animals			Category of Bites	
	Male (%)	Female (%)	DOG (%)	CAT (%)	OTHERS (%)	Category II (%)	Category III (%)
73797	53 %	47 %	73 %	21 %	6 %	67 %	33 %



“I am really happy to note that Kerala have been able to make the political decision to implement Intra Dermal Rabies Vaccination in the State.”

**Dr. F. X. Meslin,**

Team Leader,  
Neglected Zoonotic Diseases, WHO, Geneva

## Announcement

The APCRI Journal is published twice a year. Once in January and again in July. The APCRI Journal invites Contributions from the Scientific Community, on All aspects of Rabies and Related Matter, in the form of Original Articles and Review Articles, Brief Reports, Case Reports, Personal Viewpoint, Letters to the Editor, Notes and News, Your Questions and Book Review.

Please Contact:

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