INTRODUCTION
Rabies is endemic in Iran. Every animal bite could be life threatening in the absence of immediate and appropriate post-exposure prophylaxis (PEP). Annually, a considerable number of exposures to animal bites occur in Iran. The current situation in the country is well-controlled by virtue of a robust surveillance system and efficient PEP treatments, resulting in considerably low death incidences from rabies.

HUMAN RABIES IN 2013-2014
1. N° of animal bites: In 2013, 150244 cases and in 2014 153297 cases.
2. Human rabies deaths: 4 (in 2013) and 4 (in 2014)
   • Clinically diagnosed: 1 case (in 2013) and 2 (in 2014)
   • 5 Laboratory confirmed cases.
3. One reference laboratory for human rabies diagnostic
4. 5 human autopsy samples tested in 2013-2014
5. Human rabies has been a notifiable disease for >80 yrs
6. 658 bite management/rabies prevention centers in all cities of the country.

ANIMAL RABIES IN 2013-2014
1. 446 animal rabies cases tested in 2013, 286 Laboratory confirmed.
2. 450,000 dogs vaccinated.
3. 30% dogs vaccinated.
4. One reference laboratory for animal rabies diagnostic (2 additional laboratories are pending)
5. 468 animals tested in 2014, 319 laboratory confirmed cases.
6. Animal rabies is a notifiable and reportable disease since 1955.

PRE-EXPOSURE PROPHYLAXIS (PEP) in 2013
1. Vaccination schedule: 3 dose IM regimen (D0, D7, D21/28)
2. Vaccine used: Verorab, Rabipur
3. 2674 individuals received PrEP

POST-EXPOSURE PROPHYLAXIS (PEP) in 2013
1. Vaccination schedule (route/n° doses): 5 dose (Essen) IM regimen.
2. Vaccine used: Verorab, Rabipur
3. 153297 of patients who received PEP
4. 31000 patients received RIG
5. Who pays for PEP: Supported by Government (Ministry of Health).

*Ongoing actions/initiatives on rabies control in animals and prevention in humans:
A) Laboratory confirmation of rabies B) Laboratory evaluation of anti-rabies antibody C) Human PEP, D) Dog population control, E) World Rabies Day 2014
* Inter-sectoral (e.g. Ministry of Health and Ministry of Agriculture) coordination:

ACTION PLAN

<table>
<thead>
<tr>
<th>Actions</th>
<th>Objectives</th>
<th>Challenges</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Appropriate involvement of local mass media,</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Adequate administrative and financial coordination</td>
</tr>
<tr>
<td>Adjoin training workshop</td>
<td>Training of health and vet staff, interaction</td>
<td>Difficult to engage ministries in collaboration</td>
</tr>
<tr>
<td></td>
<td>between national and international experts</td>
<td></td>
</tr>
<tr>
<td>Policy goals</td>
<td>Development of the national multi-sectoral</td>
<td>To implement pilot phase in dog rabies control</td>
</tr>
<tr>
<td></td>
<td>rabies control plan</td>
<td>Difficulties to orchestrate between involved sectors</td>
</tr>
<tr>
<td></td>
<td>To update and harmonize medical practices with</td>
<td></td>
</tr>
<tr>
<td></td>
<td>nationally admitted international recommendations</td>
<td></td>
</tr>
</tbody>
</table>

Provided by: Gholami A., Farahtaj F., Shirzadi M.R.