

## Time for India to Move towards Rabies Elimination by 2030!

Rabies is one of the ancient diseases known to humanity. Dog-transmitted rabies accounts for about 99% of human rabies cases in rabies-endemic regions.<sup>[1]</sup> It is estimated that 59,000 people die from rabies every year.<sup>[2]</sup> Economic impact of rabies in livestock production is considered high, but surveillance data are missing. Elimination of human rabies is feasible and sustainable if rabies is controlled at the source, i.e., dog.

Rabies elimination is a global public good as thousands of people are still dying due to this vaccine-preventable disease mostly in Africa and Asia! It is unacceptable to see premature deaths of young children due to rabies when proof of concept, technical knowledge, and tools are at our disposal. Unfortunately, rabies remains a neglected disease affecting poor-marginalized population in rabies-endemic countries of Asia and Africa due to competing priorities and lack of political will. Rabies elimination has a social, technical, organizational, and political dimension and demands multidisciplinary and multisectoral approaches. Considering that rabies control and subsequent elimination is a model for operationalization of One Health, the WHO in partnership with Food and Agriculture Organization of the United Nations, World Organization for Animal Health, and Global Alliance for Rabies Control came up with a vision of encouraging rabies-endemic countries to achieve zero human deaths from dog-mediated rabies by 2030 worldwide in line with the Sustainable Development Goals' target date of 2030. The rationale for the global strategy is to build on lessons learned, to align country and regional successes into a global strategy with a common goal of eliminating dog-mediated human rabies by 2030.

India is a country of more than one billion population, and it has the highest burden of rabies in the world. Remarkable progress has been done in the last 12 years in phasing out of nerve-tissue rabies vaccine by both introducing cost-effective intradermal rabies vaccination and making accessible and available vaccine and rabies immunoglobulin for postexposure prophylaxis in public hospitals. A pan India survey was supported by the WHO to capture the programmatic experiences of rabies

prevention and control with emphasis on human rabies, which provided a clear ground reality of accessibility, availability, and affordability of human rabies vaccine and rabies immunoglobulin in India with some recommendations for the improvement of surveillance, reporting, and policy advocacy. A multicenter study on burden of rabies was carried out with the WHO support in 2003, and it is appreciable that the National Centers for Disease Control and Indian Council of Medical Research have taken initiative to re-assess burden of human rabies in India which may show the impact of rabies control activities in human rabies incidence. All these assessments should lead to policy advocacy for operationalizing pan India rabies elimination campaign with goal of zero human rabies by 2030. Success stories have been generated for model dog rabies vaccination and animal birth control program in selected urban areas of India, but much needs to be done for surveillance and control of dog rabies under government leadership and ownership. The veterinary sector in India has a greater social responsibility in controlling dog rabies so that public fear of dog as a source of rabies is changed and livestock and people are no more victim of dog-mediated rabies. Investing in rabies control and elimination strengthens health systems, improves equity and access to healthcare, and contributes to sustainable development. There is a need for strong political commitment matched with equally robust activities, and India will have to play a proactive role to move South Asia Rabies Elimination campaign as it shares long border with rabies-endemic countries in South Asia.

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