

**AUSTRALIAN BAT
LYSSAVIRUS (ABLV)
FACT SHEET**



026-027



WHAT IS AUSTRALIAN BAT LYSSAVIRUS?

Australian bat lyssavirus (ABLV) is an infectious zoonotic disease caused by a virus called *Lyssavirus australis*. It can be transmitted from bats to humans.

i ABLV has only been reported from Australia, although it is closely related to the classic rabies lyssavirus (rabies) found in other parts of the world.

Natural hosts

ABLV has been detected in all four of the mainland species of flying-fox and in one species of insectivorous bat (microbats):

- Black flying-fox (*Pteropus alecto*)
- Little red flying-fox (*Pteropus scapulatus*)
- Grey-headed flying-fox (*Pteropus poliocephalus*)
- Spectacled flying-fox (*Pteropus conspicillatus*)
- Yellow-bellied sheath-tail bat (*Saccolaimus flaviventris*).

i However, any bat in Australia could carry ABLV.

How is it spread?

Infection spreads to humans through direct transmission – contact with the saliva or nervous tissue (i.e. brain, spinal cord) of an infected bat (the natural reservoir). Saliva can be introduced through bites and scratches (no matter how small), or by coming into contact with broken skin or mucous membranes (via eyes, nose or mouth).

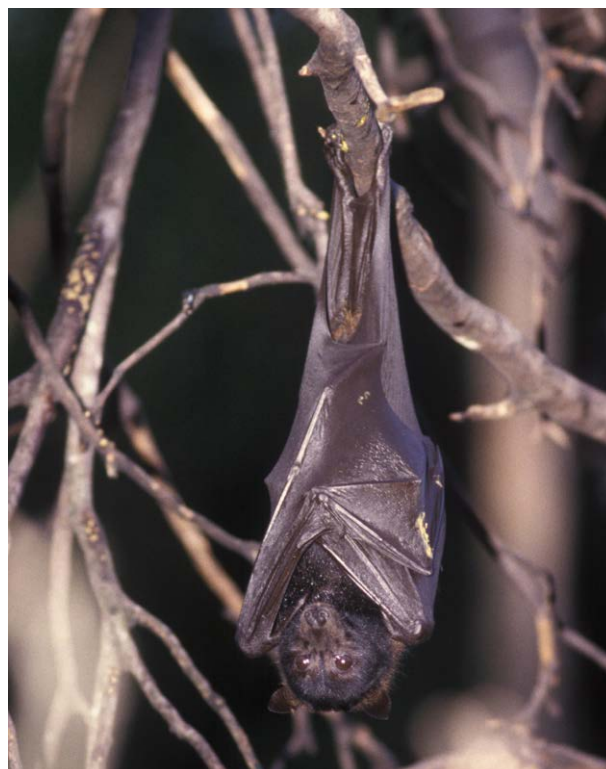
The urine, faeces and blood of infected bats are not known to be infectious. Bats can also transmit the virus to each other, and to other mammals. All mammal species are likely susceptible to ABLV, but risk may vary with species. ABLV has not been detected in dogs and cats.

The risk of indirect transmission of ABLV (for example, via environmental contamination such as aerosols) is low. There have been no reports of human-to-human transmission of ABLV.

i ABLV is primarily spread by direct contact with saliva from an infected bat.

Who is at risk?

- People who handle bats in Australia without wearing appropriate personal protective equipment and who are not vaccinated.
- Vets and vet nurses; wildlife careers and volunteers; wildlife rescue facility workers; and scientists who work with wildlife (particularly bats) and live lyssaviruses.



i As long as bats are not approached or handled, playing or walking near bat roosting areas does not pose a risk of contracting ABLV.

What are the symptoms?

In animals

Bats infected with ABLV do not always show signs of infection, as the virus has a relatively long and variable incubation period. The clinical infection in bats follows the same course as rabies, which progresses to acute and fatal clinical disease manifested as abnormal behaviour and paralysis. ABLV infection in bats is fatal.

Clinical signs in bats include:

- excitation or agitation
- aggression (including unprovoked attacks)
- unusual vocalisation or abnormal mouth function
- paralysis or paresis, and an inability to fly
- seizures or tremors
- respiratory difficulties
- abnormal behaviour (such as being active during the day).

In humans

Human ABLV infections are rare but very serious. ABLV infection varies widely in the time it takes for symptoms to appear following exposure to an infected animal (from several days to several years, but more commonly 2–3 months). Infection first presents as flu-like symptoms. Severe neurological symptoms will develop as the infection progresses.

Initial symptoms may include:

- headache
- fever
- fatigue
- burning, tingling, pain or weakness at the exposure (i.e. wound) site
- loss of appetite
- anxiety.

The illness then progresses to:

- paralysis
- hydrophobia (fear of water)
- delirium (sudden confusion and changes in behaviour)
- seizures
- death.

⚠️ Infection from lyssaviruses is almost always fatal, causing death within 1–2 weeks of onset of symptoms. While a small number of people have survived infections of classic rabies lyssavirus, to date, no human has survived ABLV.

For more information, refer to the [Australian Centre for Disease Control](#), the Australian Government's official channel for public health information.

i There have been no reports of ABLV spreading from person to person.

How can I prevent infection?

- The best prevention is to avoid potential contact with bats wherever possible, particularly those showing neurological signs.
- Contact a wildlife care organisation or your local vet if a sick or injured bat requires help. Do not touch the animal yourself.
- Bats should only be handled by an experienced, trained, vaccinated person using appropriate PPE. Every effort should be made to avoid being bitten or scratched.
- Where possible, prevent contact between bats and other animals. This may include keeping dogs and cats inside at night, particularly if bats are feeding on fruiting or flowering trees on your property.

- Cover fruit trees with wildlife-friendly netting and remove any unnecessary barbed wire from your property. Bats can get stuck in or on these, leading to potential exposures.

i Only people vaccinated against rabies and trained in safe handling should touch bats, and only while wearing personal protective equipment (PPE).



What vaccines and treatments are available?

⚠️ If you are bitten or scratched by a bat (or have any other significant contact), apply immediate first aid and seek urgent medical attention. Wash wounds thoroughly with soap and lots of water for approximately 15 minutes. Apply a virucidal antiseptic (e.g. povidone-iodine or alcohol) after washing.

- Post-exposure prophylaxis (vaccination) is available for anyone who has had direct contact with a bat in Australia if the bat in question could not be confirmed to be ABLV-negative through laboratory testing. Treatment should be sought as soon as possible, preferably within 48 hours of exposure.

- Even if a bite or scratch cannot be seen, it is important to take all exposure to bats seriously. Bat lyssaviruses can infiltrate and reproduce in the upper layers of the skin, so the bat does not need to have drawn blood or left a visible mark in order to transmit infection.

⚠️ If another animal has been bitten or scratched by a bat (or has had other significant contact), wash the wound where possible (as for human exposure, above) and seek urgent veterinary advice.

- Post-exposure prophylaxis (vaccination) may be available for domestic pets with suspected or confirmed exposure to an ABLV-positive bat.

- Rabies vaccination provides excellent cross-protection against ABLV in humans and animals. Individuals in at-risk professions should consult their relevant health authority or occupational health provider for the latest guidance on vaccination.
 - There is no specific treatment for ABLV once symptoms appear. It is important to act immediately following exposure to a potentially infected bat.
- ⚠️ ABLV is a nationally notifiable disease in both animals and humans.** If you think you might have been exposed to ABLV, contact your doctor or public health agency for further advice.
- If a bat is suspected to be infected with ABLV, contact your state or territory biosecurity agency for advice about testing, or call the Emergency Animal Disease Hotline on 1800 675 888.
- i** The rabies vaccine is safe and effective at protecting against ABLV. If you believe that you have potentially been exposed to ABLV, please seek emergency medical care as soon as possible.



Cover: Little Red Flying-fox. QM, Peter Waddington
Page 2: Black Flying-fox. QM, Jeff Wright
Page 3: Grey-headed Flying-fox. QM, Jeff Wright
Page 4: Little Red and Black Flying-foxes. QM, Peter Waddington

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