

ABLV BAT STATS



Australian Bat Lyssavirus Report – June 2025

Cases of ABLV infection - January to June 2025

There were 8 cases of Australian bat lyssavirus (ABLV) infection reported in bats in Australia between January and June 2025. This includes 7 from Queensland and one from New South Wales (Table 1).

In July, a tragic case of ABLV infection in a man in northern NSW was reported by NSW Health. Four humans have died from ABLV following the bite or scratch of a bat and this is the first confirmed case of the virus in a human in NSW.

Queensland

The first ABLV positive detection this year was in February in a black flying-fox (BFF). The bat displayed biting behaviour, and died after a seizure. The following month another BFF died suddenly after displaying aggression and hypersalivation, and was also found to be ABLV positive. A third ABLV positive BFF was admitted to a veterinary hospital with weakness and severe hypoglycaemia (low blood sugar). Following treatment, the bat became aggressive and vocal before dying 5 hours later. The remaining black flying-fox had potential contact with a pet dog, was euthanased and tested ABLV positive.

Two little red-flying foxes tested positive for ABLV in the first half of the year. The first little red flying-fox died in care after being found hanging low over a pond. The bat showed general weakness particularly in the lower limbs and biting behaviour. The second died after it was found on the ground in a dingo enclosure at a wildlife park. The bat was staring, displaying unusual head movements and biting, and had abnormal vocalisations and weak limbs.

A yellow-bellied sheath-tail bat (YBST) was found on the ground displaying neurological signs including paresis, abnormal mouth function, unusual vocalisation, aggression and an inability to right itself, and was found to be ABLV positive. ABLV detections in microbats are rare. The last positive detection in a YBST was in 2023 ([Bat Stats December 2023](#)).



Black flying fox
Photo: James Niland via Flickr (CC)

Table 1: ABLV infection in Australian bats[^]

| YEAR | NSW | NT | QLD | VIC | WA | SA | Total |
|--------------|-----|----|-----------------|-----|----|----|-------|
| 1995 - 2000 | 10 | 1 | 83 [#] | 0 | 0 | 0 | 94 |
| 2001 | 0 | 0 | 9 | 1 | 4 | 0 | 14 |
| 2002 | 4 | 0 | 10 | 2 | 1 | 0 | 17 |
| 2003 | 5 | 0 | 3 | 2 | 0 | 0 | 10 |
| 2004 | 5 | 0 | 6 | 1 | 0 | 0 | 12 |
| 2005 | 6 | 0 | 5 | 0 | 0 | 0 | 11 |
| 2006 | 2 | 0 | 4 | 0 | 0 | 0 | 6 |
| 2007 | 6 | 0 | 2 | 0 | 0 | 0 | 8 |
| 2008 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 2009 | 2 | 0 | 8 | 0 | 0 | 0 | 10 |
| 2010 | 0 | 0 | 8 | 0 | 1 | 0 | 9 |
| 2011 | 0 | 0 | 4 | 2 | 0 | 0 | 6 |
| 2012 | 1 | 0 | 3 | 0 | 0 | 1 | 5 |
| 2013 | 3 | 0 | 11 | 0 | 0 | 0 | 14 |
| 2014 | 5 | 1 | 14 | 1 | 11 | 0 | 32 |
| 2015 | 10 | 1 | 11 | 0 | 0 | 0 | 22 |
| 2016 | 5 | 1 | 8 | 1 | 0 | 0 | 15 |
| 2017 | 4 | 0 | 19 | 3 | 2 | 0 | 28 |
| 2018 | 5 | 0 | 5 | 1 | 0 | 0 | 11 |
| 2019 | 6 | 0 | 1 | 0 | 0 | 0 | 7 |
| 2020 | 5 | 0 | 9 | 4 | 0 | 0 | 18 |
| 2021 | 10 | 1 | 17 | 5 | 0 | 2 | 35 |
| 2022 | 1 | 1 | 8 | 1 | 0 | 1 | 12 |
| 2023 | 1 | 1 | 11 | 1 | 0 | 5 | 19 |
| 2024 | 2 | 0 | 3 | 0 | 0 | 3 | 8 |
| 2025 to June | 1 | 0 | 7 | 0 | 0 | 0 | 8 |
| Total | 99 | 7 | 269 | 25 | 19 | 12 | 431 |

[^] Infection confirmed by FAT, PCR, IHC and/or virus isolation. ACT and TAS have not recorded any cases of ABLV infection that satisfy this case definition.

[#] A BFF from QLD was diagnosed retrospectively in 1996, when ABLV was first recognised.

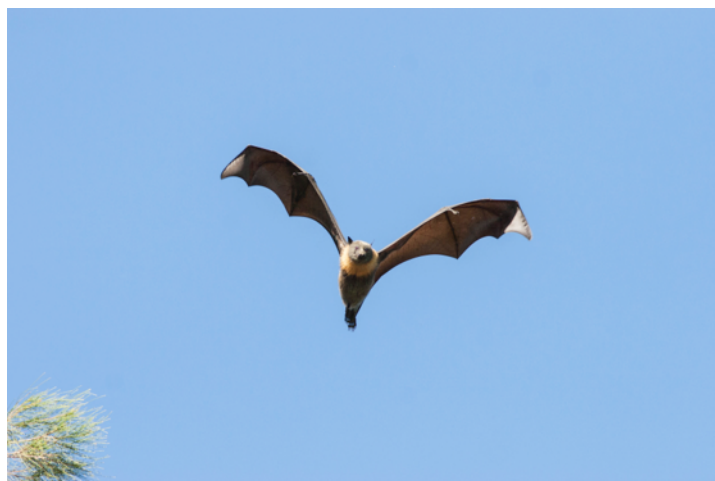
⁺ Higher numbers of ABLV infected bats were associated with peak years of testing in 1997-1998.

New South Wales

A grey-headed flying-fox was found on the ground, moribund and displaying severe respiratory signs and aggressive behaviour. It was euthanased and tested positive for ABLV. No human or domestic animal exposure was identified in this case.

Human contact

Potentially infectious contact with humans was reported for two of the ABLV infected bats. Clinical advice was provided by an experienced public health official for both cases.



Grey headed flying-fox
Photo: Akos Lumnitzner

Why are bats submitted for ABLV testing?

Bats are submitted for ABLV testing for a variety of reasons. A common reason is contact between the bat and a person with the potential for ABLV transmission (e.g. a bite or scratch). Bats are also regularly submitted following contact with a pet dog or cat (Figure 1). Bats displaying unusual or aggressive behaviour or other neurological signs may be tested; these signs can occur with ABLV infection but can also be due to a number of other diseases. Bats that show other clinical signs e.g. respiratory signs, bats that die or are euthanased due to trauma, and bats that are found dead may also be submitted for testing.

Figure 1: ABLV tested bats – Contact with people and pets

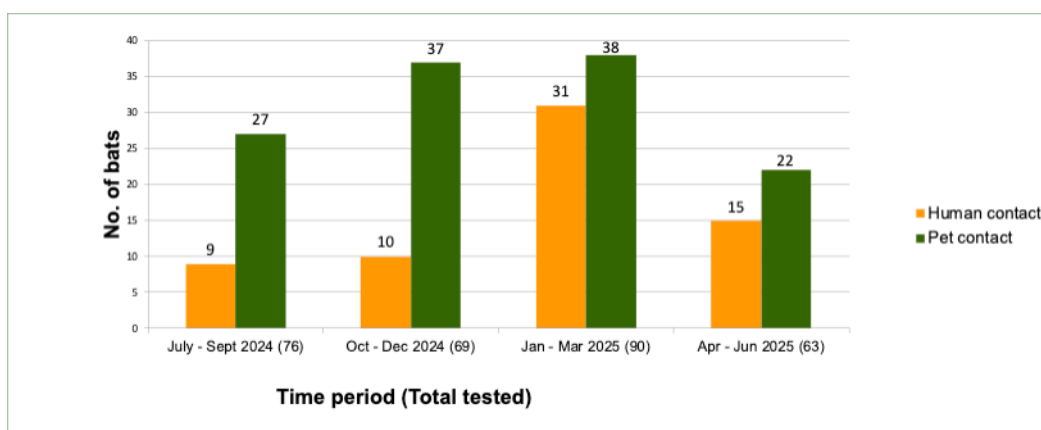


Figure 1 presents reported human-bat contacts which, based on Young & McCall 2010,¹ is an underestimate of the true contact frequency. Not all bat contact is reported, and for the majority of reports the bat is not available for testing.

If bats had both human and pet contact, they are only reported as human contact in the figure.

ABLV prevalence in bats and public health significance

There are no recent surveys on the prevalence of ABLV infection in wild bats. Surveys of wild-caught bats in the early 2000s indicated an ABLV prevalence in the wild bat population of less than 1%.² ABLV infection is more common in sick, injured and orphaned bats, especially those with neurological signs.³ People are more likely to have contact with bats that are unwell or debilitated, as these bats may be found on or near the ground.⁴



Eastern bent-wing bat
Photo: © Lindy Lumsden

ABLV infection causes a range of clinical signs in bats, which can include abnormal behaviour such as uncharacteristic aggression, paralysis or paresis, and seizures. The behavioural changes may increase the likelihood of a person or pet being bitten or scratched when coming in contact with the bat. The likelihood of a person developing ABLV disease from contact with a bat is influenced by a number of factors including whether the bat was ABLV-infected, the type of contact e.g. bite or scratch, the vaccination status of the person, and whether the person sought medical attention.

ABLV prevalence in bats submitted for testing

Some of the bats that come into contact with people or pets are tested for ABLV. The percentage of ABLV infection in bats submitted for testing is of interest as an indicator of public exposure, however it is also heavily influenced by factors affecting which bats are submitted for testing. Each state and territory in Australia determines independently what bats are submitted for ABLV testing and this process may vary between jurisdictions.

A total of 153 bats were tested for ABLV in Australia between January and June 2025 (Table 2). This is a decrease in the number of bats tested compared to the same period in 2024 (268 bats) and is the lowest number of bats tested between January and June since 2016. There were 8 cases of ABLV infection reported in bats (5.2% of the bats submitted for testing) (Table 3). 7 detections were in flying-foxes (6.3% of flying-foxes tested), and 1 was in a microbat (2.4% of microbats tested). As described above, testing of unwell bats is not representative of the whole bat population; consequently these results over-estimate the level of ABLV infection in the wider bat population.

Table 2: ABLV testing by bat species (Jan - Jun 2025)

| Species | No. tested | No. ABLV infected |
|---|------------|-------------------|
| Flying-foxes, blossom & tube-nosed bats | | |
| <i>Pteropus poliocephalus</i> /Grey-headed Flying-fox | 64 | 1 |
| <i>Pteropus alecto</i> /Black Flying-fox | 35 | 4 |
| <i>Pteropus scapulatus</i> /Little Red Flying-fox | 9 | 2 |
| <i>Pteropus</i> spp. | 3 | 0 |
| <i>Pteropus conspicillatus</i> /Spectacled Flying-fox | 1 | 0 |
| Insectivorous bats (microbats) | | |
| <i>Chalinolobus gouldii</i> /Gould's Wattled Bat | 5 | 0 |
| <i>Vespertilionidae</i> spp. | 4 | 0 |
| <i>Chalinolobus morio</i> /Chocolate Wattled Bat | 2 | 0 |
| <i>Saccolaimus flaviventris</i> /Yellow-bellied sheath-tail bat | 2 | 1 |
| <i>Vespadelus vulturnus</i> /Little Forest Bat | 2 | 0 |
| <i>Nyctophilus</i> spp. | 2 | 0 |
| <i>Nyctophilus geoffroyi</i> /Lesser Long-eared Bat | 2 | 0 |
| <i>Nyctophilus gouldii</i> /Gould's Long-Eared Bat | 2 | 0 |
| <i>Nyctophilus arnhemensis</i> /Arnhem Long-eared Bat | 1 | 0 |
| <i>Molossidae</i> spp. | 1 | 0 |
| Microbat; species not identified | 19 | 0 |
| TOTAL | 153 | 8 |

*ABLV Bat Stats is published twice a year. The June issue presents data from the 6 month period of January to June. The December issue presents 12 months of data for the calendar year.



Little red flying-foxes
Photo: Paisley Hadley via Flickr (CC)



Little forest bat
Photo: Chris Lindorff via iNaturalist (CC)

Table 3: ABLV infection (%) in bats submitted for testing (Jan - Jun 2025)

| | No. tested | No. infected | % infected* |
|--------------|------------|--------------|-------------|
| Flying-foxes | 111 | 7 | 6.3% |
| Microbats | 42 | 1 | 2.4% |
| TOTAL | 153 | 8 | 5.2% |

* This figure represents the percentage of ABLV infection in the bats tested. The level of ABLV infection in the wider bat population is estimated to be significantly lower.

Bat facts

- * **ABLV is a virus** that infects Australian flying-foxes and insectivorous bats.
- * **ABLV is closely related to**, but distinct from rabies virus.
- * **ABLV can infect people and other mammals with a fatal outcome.** ABLV infection has led to the deaths of three people, two horses and many bats in Australia.
- * **Community members should not handle bats.** If you find an injured or sick bat, contact a wildlife rehabilitation organisation or your local veterinarian.
- * People trained in the care of bats **should be vaccinated and always use appropriate protection** when interacting with bats.
- * **ABLV is transmitted** by the saliva of an infected animal introduced via a bite or scratch, or by contamination of mucous membranes or broken skin. In the event of a bat bite, scratch or other significant contact, **seek medical attention URGENTLY.** **Bite or scratch wounds** should immediately be washed thoroughly with soap and copious water for approximately 15 minutes and a virucidal antiseptic such as an iodine based antiseptic applied.* Bat saliva in the eyes or mouth should be rinsed out immediately and thoroughly with water.
- * **For more information** contact your local Public Health agency for advice.
- * **ABLV can also be transmitted to other mammals.** Prevent pets and other animals from coming into contact with bats. If an animal might have been bitten or scratched by a bat, **seek urgent veterinary advice.**
- * ABLV is a nationally notifiable disease in Australia. **If you suspect a bat is infected with ABLV** contact your department of agriculture or primary industries, or call the Emergency Animal Disease Hotline on 1800 675 888.
- * **Where to find more information:** See page 5 & 6.

* Department of Health. Rabies Virus and Other Lyssavirus (including Australian Bat Lyssavirus) Exposures and Infections. CDNA National Guidelines for Public Health Units. Canberra. 2022. Available from <https://www.health.gov.au/resources/publications/rabies-and-other-lyssavirus-cdna-national-guidelines-for-public-health-units>

Clinical signs of ABLV

An ABLV infected bat may display any of these clinical signs:

- Abnormal behaviour such as excitation / agitation / aggression
- Paralysis or paresis
- Unprovoked attacks
- Unusual vocalisation
- Inability to fly
- Convulsions / seizures / tremors

Apparently healthy bats with normal behaviours may still be infected with ABLV

DO NOT ATTEMPT TO HANDLE an injured, unwell or aggressive bat

REPORT it to your local wildlife rehabilitation group or vet.



Yellow-bellied sheath-tail bat
Photo: © Australian Museum

Recent news and publications

What is Australian bat lyssavirus, can I catch it from bat poo? What if bats roost near me?

April: "Volunteer wildlife carers respond to thousands of calls from the public every year after encountering sick, injured and orphaned bats. And testing them all routinely for the virus is not warranted or feasible. Here's what you need to know about the risk of catching Australian bat lyssavirus and how it can be treated..." [The Conversation](#)

Rabies post-exposure treatment in metropolitan Sydney residents, 2013-2023: a retrospective case-series analysis

"...Local exposures were mostly due to megabat injuries. Bat testing occurred following 25% of local exposures, with a 20% ABLV positivity rate. Inadequate wound management was reported in 45% of exposures. PET was markedly delayed (commenced greater than 14 days after exposure or a mid-schedule delay) in 26% of overseas and 7% of local exposures and incomplete in 15% of overseas and 4% of local exposures..."

Self et al (2025). Rabies post-exposure treatment in metropolitan Sydney residents, 2013-2023: a retrospective case-series analysis. *Travel Medicine and Infectious Disease*, 102856. <https://doi.org/10.1016/j.tmaid.2025.102856>

Update: WHA's ABLV Fact Sheet

July: Wildlife Health Australia's fact sheet on Australian bat lyssavirus has been updated. To view more than 120 fact sheets on a range of wildlife diseases, including a number that are relevant to bats, visit WHA's [Fact Sheet page](#).

Human ABLV case

July: NSW Health reported a tragic case of ABLV infection in a man in northern NSW. The man had been bitten by a bat several months prior and had received treatment. See: [NSW Health: Community urged not to touch bats after rare case of Australian bat lyssavirus](#) and [WHA Incident Information](#)
The incident was also reported widely in the media.



Chocolate wattled bat
Photo: Patrick Kavanagh (CC)

Are you interested in bat health?



Grey-headed flying-foxes
Photo: Clément Falize via Unsplash(CC)

Wildlife Health Australia collates recent media articles and publications relating to bat health into a monthly '**Bat News**' email. If you would like to receive the monthly email, please contact WHA: admin@wildlifehealthaustralia.com.au

Where to find information

Wildlife Health Australia (WHA)

www.wildlifehealthaustralia.com.au

- [Wildlife disease fact sheets](#), including [Australian Bat Lyssavirus](#) and [Zoonoses in Australian Bats](#)
- [Links: WHA Bat Health Page](#) - <https://wildlifehealthaustralia.com.au/Resource-Centre/Bat-Health>

State/Territory departments of agriculture, health and environment

For links to agency websites see:

[State/ Territory Australian Bat Lyssavirus Resources](#)

Commonwealth Department of Health and Aged Care

- Healthdirect ABLV information and resources: <https://www.healthdirect.gov.au/australian-bat-lyssavirus-infection>
- For current information for medical professionals, see the Series of National Guidelines on Rabies & ABLV: <https://www.health.gov.au/resources/publications/rabies-and-other-lyssavirus-cdna-national-guidelines-for-public-health-units>
- For vaccination information contact your local or regional Public Health Unit, or see the immunisation handbook: <https://immunisationhandbook.health.gov.au/contents/vaccine-preventable-diseases/rabies-and-other-lyssaviruse>

AUSVETPLAN

For current policy on surveillance and management see AUSVETPLAN - Lyssaviruses:

<https://animalhealthaustralia.com.au/wp-content/uploads/>

ABLV BAT STATS



WHA Bat Health Focus Group

This document has been approved by the Wildlife Health Australia (WHA) Bat Health Focus Group. Using a collaborative One Health approach, the Bat Health Focus Group considers bat health issues in relation to the broader context of biosecurity, public health, livestock health and environmental impacts in Australia. Members come from organisations including Australian and State Government departments of agriculture, public health and environment; CSIRO Australian Centre for Disease Preparedness, universities, the Australasian Bat Society and the Australian Speleological Federation. Members include veterinarians, biologists, ecologists, virologists, epidemiologists and wildlife/bat carers.

Information sources

This report presents the latest information on ABLV testing across Australia. Information has been made available by CSIRO Australian Centre for Disease Preparedness, Janine Barrett PhD thesis 2004 (with permission), QLD Health, zoo & wildlife veterinarians, universities, Wildlife Health Australia members, and State/Territory WHA Coordinators (representatives of Chief Veterinary Officers), and is collated by Wildlife Health Australia. More detailed information is available in the electronic Wildlife Health Information System ([eWHIS](#)).

References

- ¹ Young MK & McCall BJ (2010). Potential exposure to Australian bat lyssavirus in South East Queensland: What has changed in 12 years? *Comm Dis Intell*, 34(3), 334-8 www1.health.gov.au/internet/main/publishing.nsf/Content/cda-cdi3403l.htm
- ² Field HE (2005). The Ecology of Hendra virus and Australian bat lyssavirus, PhD thesis, The University of Queensland <https://espace.library.uq.edu.au/view/UQ:13859>
- ³ Barrett J (2004). Australian Bat Lyssavirus, PhD thesis, The University of Queensland <https://espace.library.uq.edu.au/view/UQ:9486>
- ⁴ McCall B, Field HE, Smith GA, Storie GJ, Harrower BJ (2005). Defining the risk of human exposure to Australian bat lyssavirus through potential non-bat animal infection. *Comm Dis Intell*, 29(2), 200-203 www1.health.gov.au/internet/main/publishing.nsf/Content/cda-cdi2902k.htm

State/Territory WHA Coordinators

Contact your state/territory department of primary industries/agriculture or WHA Coordinator for more information on ABLV testing, or to report a suspected ABLV infected bat.

Click the below link to find your state or territory WHA Coordinator contact details:
<https://wildlifehealthaustralia.com.au/Incidents/WHA-Coordinator-Contacts>



Little red flying-foxes
Photo: Shellac via Flickr (CC)