I thought it was weird and coincidental enough when, last week, just after chatting with our new Animal Inspector about the topic of rabies, a case of a possibly rabid animal was called in while I was out of the office.

The message on the machine described the caller's concern about the family cat having been near a dead crow and, then, a couple days later, the cat died. I was preparing mentally to talk about West Nile virus and explaining that her cat did not catch WNv from a dead crow. When I called her, though, and asked if the cat had displayed any symptoms of illness, the woman told me the cat was sort of old but had been healthy and, oh, yeah, it had come into the house with a puncture wound the week before.

(Whoa... a puncture wound?) I asked what had been done in response to the wound. She explained they treated the wound with hydrogen peroxide and then didn't think too much about it.

"Do you know what a vet and the Animal Inspector officer call that kind of wound?" I asked. "They call it a wound of "unknown origin" and the cat has to be quarantined by the animal inspector for ten days and the vet gives it a rabies booster shot. If the cat had not been vaccinated, it is given a rabies shot and is quarantined for six months."

I needed to interview a bit more by asking if the family had consulted with their vet or family physician about this. Negative to both. I explained I was more concerned about the puncture wound of unknown origin than I was about the cat's contact with a dead bird. Not only was the cat possibly bitten by a rabid animal, also of concern was when the person handled the cat to treat it. At that point they may have come into contact with saliva from a rabid animal.

Saliva on the skin does not in and of itself put you at risk for rabies but if it gets into a cut or, if you then reach up and touch your eyes or mouth, allowing that saliva to enter, then, yes, you have just put yourself at risk of contracting rabies. Outside of a rabid animal, sunlight and air will render the saliva harmless within a few hours.

I advised the woman to get to the family physician. They needed to decide if anyone in the family should be treated with the preventive series of shots. The cat was no longer available for testing, as the family already had it cremated.

The coincidences were to continue.

When I arrived home that night, there was a message from my daughter in Connecticut. The television news people were parked right in front of her house that day talking about rabies. (But she did not know that, and they did not tell her.) They zoomed in for a close-up of her street sign. She was about to leave with her two children and had no idea why they were there. She later found out their big story was that the local Animal Control officer had confirmed or suspected ten cases of rabid animals in the Stonington area but, in particular, on her street! What my daughter wanted to know in her answering machine message to me was, "Ten cases on one street? Isn't that kind of unusual?"

What?! My grandchildren, Colin and Taryn, are surrounded by ten cases of rabid animals? Of course, that is unusual and is a very serious concern!

I wanted to know what was being done to inform and educate the neighborhood about the situation. My daughter was not aware of anything other than the news story that appeared on TV that night. The story was also described in the local paper. The paper simply repeated what the Police Department had issued. You see, the Animal Control Officer works for the Police Department, as is often the case. They had not even informed the local health department. Later, some residents (not my daughter's house) received a group email but most residents in my daughter's area are elderly and don't own a computer.

Grammy Drinan left a comment for the paper.

When there is suspicion of a rabies outbreak and/or when there is concern of a rabid animal on the loose, it is of life saving importance that the local public be informed, and every possible means of informing the public needs to be used. That includes "reverse 911" calls specific to the area involved, interviews on local radio, Town website alerts, social media (now the fastest method!) and volunteers can even help with notices at libraries and storefronts.

I feel fortunate to have a good working relationship with the police dispatchers, Police Department, (officers are sometimes needed to shoot a rabid animal.), the Animal Control Officer, our Animal Inspector, local cable, local radio (WATD), local newspaper (Plympton-Halifax Express).

Informing the public by all means possible is not a coincidence. It is a necessity.

Cathleen Drinan is the health agent for Halifax, MA. Help her to stay informed by letting her know what is happening at 781 293 6768 or cdrinan@town.halifax.ma.us