

## Human and Animal Bites

### General points

- Cleaning, irrigation, and debridement are most important.
- Check tetanus status and consider tetanus prophylaxis.
- Consider risk for blood-borne viruses, HBV, HCV, and HIV with human bites.
- Consider rabies risk if animal bite <https://www.hpsc.ie/a-z/zoonotic/rabies/guidance/File,12993,en.pdf>

### Antibiotics (Empiric therapy)

#### First Line:

**Co-amoxiclav** 625mg TDS PO or 1.2g TDS IV depending on severity.

#### Penicillin allergy:

**Doxycycline** 100mg BD PO + **Metronidazole** 400mg TDS PO.

#### Severe infection:

Non-IgE mediated allergy: **Ceftriaxone** 2g once daily IV + **Metronidazole** 500mg TDS IV

IgE mediated penicillin allergy:\* **Ciprofloxacin** 400mg BD IV + **Metronidazole** 500mg TDS IV

Discuss severe infection with microbiology as additional agents may be required.

Ciprofloxacin and Metronidazole have excellent oral bioavailability. Early change to oral administration is recommended.

- Please read the [HPRA Drug Safety Alert](#) issued in 2018 and the [HPRA Drug Safety Newsletter](#) issued in 2023 highlighting restrictions on use of fluoroquinolones (eg. ciprofloxacin, levofloxacin) due to the risk of disabling, long-lasting and potentially irreversible side effects (including tendon damage, QT prolongation, neuropathies and neuro psychiatric disorder). Use of fluoroquinolones in older patients, those with renal impairment, solid organ transplantation or on systemic corticosteroids increases the risk of tendon damage.

### Comments

- Tailor antimicrobial therapy to culture results.
- **Duration for prophylaxis:** 3-5 days with follow up.
- **Duration for treatment:** 5 days, may extend therapy to 7-10 days if lack symptom resolution at 5 days depending on severity and clinical response.
- Note: Flucloxacillin, cefalexin, and macrolides (clarithromycin) do not have activity against *Pasteurella* spp and are therefore not recommended for the prophylaxis or treatment of infection due to animal bites.

### References

WSES/GAIS/WSIS/SIS-E/AAST global clinical pathways for patients with skin and soft tissue infections. World journal of emergency surgery 2022.