Handling Dog Bite Wounds

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Editorial

Dog bites represented 1% of all injuries reported by the Canadian Hospitals Injury Reporting and Prevention Program (CHIRPP) in 1996. Of all dog bite injuries, 57.9% were sustained by males, occurring most frequently at the victim’s own home, in victims between the age of 5 to 9 years and in the summer [1].

Most dog bite wounds are treated in the emergency department. Wound management as per Oehler et al. [2] includes anaesthetizing the wound and then careful and effective examination. Removal of all devitalized tissue and clots because any foreign bodies can act as a source of infection. This is known as debridement and provides for surgically clean wounds that are faster to heal.

Wound irrigation via isotonic sodium chloride solution is effective and safe for cleaning large dirty wounds. Irrigation using soap and warm tap water is also an equivalent means of wound cleaning [3].

Most wounds are best treated by delayed primary closure to avoid super infection [4]. Wounds on the face can be closed because of the excellent blood supply in the face. However, risk of super infections should be discussed with the patient. Dog bite wounds in the lower extremities and hands should be left open.

Tetanus and rabies (if the offending dog has uncertain vaccination history) immunizations are recommended as prophylaxis for all wounds. All dogs in North America are expected to be vaccinated against rabies. Vaccination against tetanus and septic syndromes caused by cats and dogs. Lancet Infect Dis 9: 439-447.

References

1. CHIRPP database (1996) Injuries associated with... DOG BITES AND DOG ATTACKS.