University Hospital NHS Trust

TREATMENT OF ANIMAL AND HUMAN BITES IN ADULTS IN THE EMERGENCY DEPARTMENT

ANTIBIOTICS

1st line Co-amoxiclav 375mg TDS and Amoxicillin 250mg TDS

2nd line Adults who are penicillin allergic

Doxycycline 200mg on day 1 then 100mg daily. Not to be used in pregnant women

plus Metronidazole 400mg TDS

3rd line Pregnant women who are penicillin allergic. (Patients who have had a rash or a possible allergy).

Cephradine 500mg QDS

plus Metronidazole 400mg TDS

Patients who have had an anaphylatic reaction to penicillin and cannot have doxycycline and metronidazole should be discussed with the on-call microbiologist.

Usual course length is 5 days, although this will depend on response.

Any patients not responding to antibiotic treatment should be discussed with the on-call microbiologist.

TETANUS PROPHYLAXIS

Immunization status should be checked, and vaccination given if appropriate. (See tetanus and diphtheria vaccination information sheet.)

HEPATITIS B

Specific hepatitis B immunoglobulin (HBIG) is available for passive protection and is normally used in combination with hepatitis B vaccine.

Hepatitis B prophylaxis for reported exposure incidents

This table for hepatitis B prophylaxis applies to possible exposure from any source including needle stick injuries

Hepatitis B status of	Significant exposure [†]			Non-significant exposure [↑]	
person exposed	Hepatitis B positive source	Unknown source	Hepatitis B negative source	Continued risk	No further risk
≤ 1 dose of HB vaccine pre-exposure	HBIG x 1 Accelerated course of HB vaccine *	Accelerated course of HB vaccine *	Initiate course of HB vaccine	Initiate course of HB vaccine	No HBV prophylaxis Reassure
≥ 2 doses HB vaccine pre-exposure (anti-HBs unknown)	One dose of HB vaccine followed by second dose one month later	One dose of HB vaccine	Finish course of HB vaccine	Finish course of HB vaccine	No HBV prophylaxis Reassure
Known responder to HB vaccine (anti-HBs > 10miU/mI)	Consider booster dose of HB vaccine	Consider booster dose of HB vaccine	Consider booster dose of HB vaccine	Consider booster dose of HB vaccine	No HBV prophylaxis Reassure
Known non- responder to HB vaccine (anti-HBs <10miU/mI 2-4 months post immunisation)	HBIG x 1 Consider booster dose of HB vaccine	HBIG x 1 Consider booster dose of HB vaccine	No HBIG Consider booster dose of HB vaccine	No HBIG Consider booster dose of HB vaccine	No HBV prophylaxis Reassure

^{*} Significant exposure: is percutaneous exposure (needle stick/bite), mucocutaneous exposure to blood (contamination of non-intact skin, conjunctiva or mucous membrane), sexual exposure

Non-significant exposure is if skin is intact, exposure to vomit or faeces

HB vaccine = hepatitis B vaccine HBV = Hepatitis B virus

Anti HBs = specific antibodies to the hepatitis B surface antigen. Measure of response to vaccine

REFERENCES

D Salisbury and N Begg (Eds) 1996 Immunisation against infectious disease. HMSO. Anon. 2004 Managing bites from humans and other mammals. *DTB* **42 (9)** 67 - 70

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^{*}An accelerated course of vaccine consists of doses spaced at 0,1 and 2 months. A booster dose may be given to those at continuing risk of exposure to hepatitis B.