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Overview

Animal bites might be caused by pets — such as cats, dogs, hamsters and turtles. Or bites may be from farm animals or wild animals. The type of care needed depends on how deep the bite is and the type of animal that caused it.

You may need medicine to fight infection. Or you may need a tetanus shot or rabies shots. Wild animals that may carry rabies are coyotes, foxes, raccoons, skunks, bats and others. Outdoor pets may carry rabies if they are sick, unvaccinated, stray and living in areas where rabies occur in pets.

Treatment

To care for a minor animal bite or claw wound, such as one that only breaks the skin, take these steps:

- Wash the wound with soap and water.
- Apply an antibiotic cream or ointment and cover the bite with a clean bandage.

When to call your doctor

Seek prompt medical care if:

- The wound is a deep puncture or you're not sure how serious it is.
- The skin is badly torn, crushed or bleeding severely. First apply pressure with a bandage or clean cloth to stop the bleeding.
- You notice increasing swelling, skin color changes, pain or oozing. These are signs of infection.
- You aren't sure whether the animal that bit you has rabies. Bats often carry rabies and can infect humans without leaving obvious signs of a bite. This is why the Centers for Disease Control and Prevention recommends that people in contact

with bats seek medical advice about rabies shots. This is a good idea even if they don't think they've been bitten.

If you haven't had a tetanus shot in the past five years and the wound is deep or dirty, your healthcare professional may recommend a booster. Get a booster shot within 48 hours of your injury.

If the wound was caused by a cat or a dog, try to confirm that its rabies vaccination is up to date. If it was caused by a wild animal, seek advice from your doctor about which animals are most likely to carry rabies.

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Rabies

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Diagnosis

At the time a potentially rabid animal bites you, there's no way to know whether the animal has transmitted the rabies virus to you. It's common not to find bite marks, too. Your doctor may order many tests to detect the rabies virus, but they may need to be repeated later to confirm whether you're carrying the virus. Your doctor will likely recommend treatment as soon as possible to prevent the rabies virus from infecting your body if there's a chance you may have been exposed to the rabies virus.

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Treatment

Once a rabies infection is established, there's no effective treatment. Though a small number of people have survived rabies, the disease usually causes death. For that reason, if you think you've been exposed to rabies, you must get a series of shots to prevent the infection from taking hold.

Treatment for people bitten by animals with rabies

If you've been bitten by an animal that is known to have rabies, you'll receive a series of shots to prevent the rabies virus from infecting you. If the animal that bit you can't be found, it may be safest to assume that the animal has rabies. But this will depend on several factors, such as the type of animal and the situation in which the bite occurred.

Rabies shots include:

- A fast-acting shot (rabies immune globulin) to prevent the virus from infecting you. This is given if you haven't had the rabies vaccine. This injection is given near the area where the animal bit you if possible, as soon as possible after the bite.
- A series of rabies vaccinations to help your body learn to identify and fight the rabies virus. Rabies vaccinations are given as injections in your arm. If you haven't previously had the rabies vaccines, you'll receive four injections over

Feedback

14 days. If you have had the rabies vaccine, you'll have two injections over the first three days.

Determining whether the animal that bit you has rabies

In some cases, it's possible to determine whether the animal that bit you has rabies before beginning the series of rabies shots. That way, if it's determined the animal is healthy, you won't need the shots.

Procedures for determining whether an animal has rabies vary by situation. For instance:

- **Pets and farm animals.** Cats, dogs and ferrets that bite can be observed for 10 days to see if they show signs and symptoms of rabies. If the animal that bit you remains healthy during the observation period, then it doesn't have rabies and you won't need rabies shots.

Other pets and farm animals are considered on a case-by-case basis. Talk to your doctor and local public health officials to determine whether you should receive rabies shots.

- **Wild animals that can be caught.** Wild animals that can be found and captured, such as a bat that came into your home, can be killed and tested for rabies. Tests on the animal's brain may reveal the rabies virus. If the animal doesn't have rabies, you won't need the shots.
- **Animals that can't be found.** If the animal that bit you can't be found, discuss the situation with your doctor and the local health department. In certain cases, it may be safest to assume that the animal had rabies and proceed with the rabies shots. In other cases, it may be unlikely that the animal that bit you had rabies and it may be determined that rabies shots aren't necessary.

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Preparing for your appointment

If an animal bites you, seek medical attention for the wound. Also tell the doctor about the circumstances of your injury. The doctor will ask:

- What animal bit you?
- Was it a wild animal or a pet?
- If it was a pet, do you know who owns the pet? Was it vaccinated?
- Can you describe the animal's behavior before it bit you? Was the animal provoked?
- Were you able to capture or kill the animal after it bit you?

What you can do in the meantime

Wash your wound gently and thoroughly with soap and generous amounts of water. This may help wash away the virus.

If the animal that bit you can be contained or captured without causing more injury, do so. Do not kill the animal with a blow or a shot to the head, as the resulting injuries may make it difficult to perform laboratory tests to determine whether the animal has rabies.

Tell your doctor that you have captured the animal that bit you. Your doctor may then contact the local health department to determine what to do with the animal.

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By Mayo Clinic Staff

Nov 02, 2021



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Overview

Most insect bites and stings are mild and can be treated at home. They might cause itching, swelling and stinging that go away in a day or two. Some bites or stings can transmit disease-causing bacteria, viruses or parasites. Stings from bees, yellow jackets, wasps, hornets and fire ants might cause a severe allergic reaction (anaphylaxis).

When to seek emergency help

Call 911 or your local medical emergency number if a child is stung by a scorpion or if anyone is having a serious reaction that suggests anaphylaxis, even if it's just one or two of the following symptoms:

- Trouble breathing.
- Swelling of the lips, face, eyelids or throat.
- Dizziness, fainting or unconsciousness.
- A weak and rapid pulse.
- Hives.
- Nausea, vomiting or diarrhea.

Take these actions immediately while waiting for medical help:

- Ask whether the injured person is carrying an epinephrine autoinjector (Auvi-Q, others). Ask whether you should help inject the medicine. This is usually done by pressing the autoinjector against the thigh and holding it in place for several seconds.
- Loosen tight clothing and cover the person with a blanket.
- Don't offer anything to drink.
- If needed, position the person to prevent choking on vomit

Treatment

To treat a mild reaction to an insect bite or sting:

- Move to a safe area to avoid more bites or stings.
- Remove any stingers.
- Gently wash the area with soap and water.
- Apply to the affected skin a cloth dampened with cold water or filled with ice. Keep it on for 10 to 20 minutes. This helps reduce pain and swelling.
- If the injury is on an arm or leg, raise it.
- Apply to the affected skin calamine lotion, baking soda paste, or 0.5% or 1% hydrocortisone cream. Do this several times a day until your symptoms go away.
- Take an anti-itch medicine by mouth to reduce itching. Options include nonprescription cetirizine, fexofenadine (Allegra Allergy, Children's Allegra Allergy), loratadine (Claritin). These types of medicines are also called antihistamines.
- Take a nonprescription pain reliever as needed.

When to call your doctor

See a healthcare professional if the swelling gets worse, the site shows signs of infection or you don't feel well.

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Mosquito bites

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Diagnosis

Your health care provider will likely be able to diagnose mosquito bites simply by looking at them and talking with you about your recent activities.

The inflamed, itchy, painful swelling referred to as skeeter syndrome is sometimes mistaken for a bacterial infection. Skeeter syndrome is the result of an allergic reaction to proteins in mosquito saliva. There's no simple blood test to detect mosquito antibodies in blood. Antibodies are substances the body produces during an allergic reaction.

Mosquito allergy is diagnosed by determining whether the large areas of swelling and itching occurred after mosquito bites.

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Lifestyle and home remedies

Most mosquito bites stop itching and heal on their own in a few days. These self-care tips may make you more comfortable.

- **Applying a lotion, cream or paste.** Avoid scratching itchy bites. It may help to apply calamine lotion or a nonprescription antihistamine cream or corticosteroid cream. Or try dabbing the bite with a paste made of baking soda and water. Reapply the cream or the paste three times a day until the itch is gone.
- **Rubbing with an ice cube.** Try soothing an itchy bite by rubbing it with an ice cube for 30 seconds.
- **Applying pressure.** Another way to soothe an itchy bite is by applying pressure for 10 seconds.
- **Taking an oral antihistamine.** For stronger reactions, try taking a nonprescription antihistamine that doesn't cause sleepiness, such as cetirizine (Children's Zyrtec Allergy, Zyrtec Allergy, others) or loratadine (Alavert, Claritin, others).

Mayo Clinic Minute: Easing the itch of mosquito bites



Preparing for your appointment

You won't need to see your doctor for a mosquito bite unless you develop a fever or other symptoms that sometimes develop after such bites.

Here's some information to help you get ready for your appointment.

What you can do

Before your appointment, make a list of:

- Symptoms you've been having and for how long
- All medicines, vitamins and supplements you take, including the doses
- Questions to ask your doctor

If you're having signs and symptoms you think might be related to a mosquito bite, some basic questions to ask your doctor include:

- What can I do to stop the itch?
- Is the area around my mosquito bite infected?
- Does the medicine you're prescribing have any side effects?
- How will I know if I need more care?

What you can do in the meantime

If itching is a problem, try a nonprescription, nonsedating antihistamine such as cetirizine (Children's Zyrtec Allergy, Zyrtec Allergy, others).

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Spider bites

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Diagnosis

Spider bites can be mistaken for other skin sores that are red, painful or swollen. Many skin sores attributed to spider bites turn out to have been caused by bites from other bugs, such as ants, fleas, mites, mosquitoes and biting flies. Skin infections and other skin conditions, even burns, can be mistaken for spider bites.

Your doctor will likely diagnose a spider bite based on your history and your signs and symptoms. The process might involve determining whether anyone saw a spider bite you, having an expert identify the spider, and ruling out other possible causes of the signs and symptoms.

Black widow identification

Some clues for identifying black widow spiders include:

- Shiny black body with long legs
- Red hourglass shape on the belly



- Length of entire body, including legs, about 1 inch (2.5 cm) across



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Black widow spider

The black widow spider is known for the red hourglass marking on its belly.

Brown recluse identification

Some clues for identifying brown recluse spiders include:

- Golden or dark brown body with long legs
- Dark violin shape on top of the leg attachment segment
- Six eyes — a pair in front and a pair on both sides — rather than the usual spider pattern of eight eyes in two rows of four
- Central body is about 1/2 inch (1.2 cm) across



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Brown recluse spider

The brown recluse spider is known for the violin-shaped marking on its top.

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Treatment

Most spider bites usually heal on their own in about a week. A bite from a recluse spider takes longer to heal and sometimes leaves a scar.

First-aid treatment for spider bites includes the following steps:

- Clean the wound with mild soap and water. Apply an antibiotic ointment three times a day to help prevent infection.
- Apply a cool compress over the bite for 15 minutes each hour. Use a clean cloth dampened with water or filled with ice. This helps reduce pain and swelling.
- If possible, elevate the affected area.
- Take an over-the-counter pain reliever as needed.
- If the affected area is itchy, an antihistamine, such as diphenhydramine (Benadryl) or cetirizine (Zyrtec), might help.
- Observe the bite for signs of worsening or infection. You might need antibiotics if the bite develops into an open wound or becomes infected.

For pain and muscle spasms, your doctor might prescribe pain medicine, muscle relaxants or both. You might also need a tetanus shot.

Black widow antivenom

If a black widow bite is causing severe pain or life-threatening symptoms, your doctor might recommend antivenom, which is usually given through a vein (intravenously). Symptoms usually ease within about 30 minutes of receiving the antivenom. Antivenom can cause serious allergic reactions, so it must be used with caution.

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Preparing for your appointment

If you've been bitten by a spider that you suspect is dangerous, call your primary care doctor or go to an urgent care center. If your doctor has online services, an option may be to email a photo of the spider to your doctor.

What you can do

To help your doctor understand your symptoms and how they might relate to a spider bite:

- Bring the spider or a photo of the spider with you, if you can do so safely
- List any symptoms you're experiencing
- List questions to ask your doctor

Some basic questions you might want to ask include:

- Is this a dangerous spider bite?
- If this isn't a spider bite, what are possible causes for my symptoms?
- Do I need any tests?
- How long will my symptoms last?
- What is the best course of action?

What to expect from your doctor

Your doctor is likely to ask you a number of questions. Being ready to answer them might reserve time to go over any points you want to spend more time on. Your doctor might ask:

- When did you begin experiencing symptoms?
- What were you doing in the hours before your symptoms started?
- Have your symptoms gotten worse?

- Does anything relieve your symptoms or make them worse?

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Jul 30, 2021



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Bee sting

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Diagnosis

If you've had a reaction to bee stings that suggests you might be allergic to bee venom, your doctor may suggest one or both of the following tests:

- **Skin test.** During skin testing, a small amount of allergen extract (in this case, bee venom) is injected into the skin of your arm or upper back. This test is safe and won't cause any serious reactions. If you're allergic to bee stings, you'll develop a raised bump on your skin at the test site.
- **Allergy blood test.** A blood test can measure your immune system's response to bee venom by measuring the amount of allergy-causing antibodies in your bloodstream. A blood sample is sent to a medical laboratory, where it can be tested for evidence of sensitivity to possible allergens.

Allergy skin tests and allergy blood tests are often used together to diagnose insect allergies. Your doctor may also want to test you for allergies to yellow

jackets, hornets and wasps — which can cause allergic reactions similar to those of bee stings.

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Treatment

For ordinary bee stings that do not cause an allergic reaction, home treatment is enough. Multiple stings or an allergic reaction, on the other hand, can be a medical emergency that requires immediate treatment.

Emergency treatment for allergic reactions

During an anaphylactic attack, an emergency medical team may perform cardiopulmonary resuscitation (CPR) if you stop breathing or your heart stops beating. You may be given medications including:

- **Epinephrine (adrenaline)** to reduce your body's allergic response
- **Oxygen**, to help you breathe
- **Intravenous (IV) antihistamines and cortisone** to reduce inflammation of your air passages and improve breathing
- **A beta agonist (such as albuterol)** to relieve breathing symptoms

Epinephrine autoinjector

If you're allergic to bee stings, your doctor is likely to prescribe an emergency epinephrine autoinjector (EpiPen, Auvi-Q, others). You'll need to have it with you at all times. An autoinjector is a combined syringe and concealed needle that injects a single dose of medication when pressed against your thigh. Always be sure to replace epinephrine by its expiration date.

Be sure you know how to use the autoinjector. Also, make sure the people closest to you know how to administer the drug — if they're with you in an anaphylactic emergency, they could save your life. Medical personnel called in to respond to a severe anaphylactic reaction also may give you an epinephrine injection or another medication.

Consider wearing an alert bracelet that identifies your allergy to bee or other insect stings.

Allergy shots

Bee and other insect stings are a common cause of anaphylaxis. If you've had a serious reaction to a bee sting or multiple stings, your doctor likely will refer you to an allergist for allergy testing and consideration of allergy shots (immunotherapy). These shots, generally given regularly for a few years, can reduce or eliminate your allergic response to bee venom.

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If a bee stings you or your child, follow the suggestions below.

Treatment for minor reactions

- If you can, remove the stinger as soon as possible, such as by scraping it off with a fingernail. Don't try to remove a stinger below the skin surface. A stinger may not be present, as only bees leave their stingers. Other stinging insects, such as wasps, do not.
- Wash the sting area with soap and water.
- Apply a cold compress.

Treatment for moderate reactions

The following steps may help ease the swelling and itching often associated with large local reactions:

- If you can, remove the stinger as soon as possible, such as by scraping it off with a fingernail. Don't try to remove a stinger below the skin surface. A stinger may not be present, as only bees leave their stingers. Other stinging insects, such as wasps, do not.
- Wash the affected area with soap and water.
- Apply a cold compress.
- Take an over-the-counter pain reliever as needed. You might try ibuprofen (Advil, Motrin IB, others) to help ease discomfort.
- If the sting is on an arm or leg, elevate it.
- Apply hydrocortisone cream or calamine lotion to ease redness, itching or swelling.

- If itching or swelling is bothersome, take an oral antihistamine that contains diphenhydramine (Benadryl) or chlorpheniramine.
 - Avoid scratching the sting area. This will worsen itching and swelling and increase your risk of infection.
-

Preparing for your appointment

Bee and other insect stings are a common cause of anaphylaxis. If you've had a serious reaction to a bee sting but did not seek emergency treatment, consult your doctor. He or she may refer you to an allergy specialist (allergist) who can determine whether you're allergic to bee or other insect venom and can help you find ways to prevent future allergic reactions.

Your doctor or allergist will do a thorough physical examination and will want to know:

- When and where you were stung
- What symptoms you had after getting stung
- Whether you've had an allergic reaction to an insect sting in the past, even if it was minor
- Whether you have other allergies, such as hay fever
- What medications you take, including herbal remedies
- Any health problems you have

Some questions you might want to ask your doctor include:

- What do I do if I get stung again?
- If I have an allergic reaction, do I need to use emergency medication such as an epinephrine autoinjector (EpiPen, Auvi-Q, others)?

- How can I prevent this reaction from happening again?

Don't hesitate to ask other questions, as well.

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Diagnosis

If you suspect that you're being bitten by bedbugs, immediately inspect your home for the insects. Thoroughly examine crevices in walls, mattresses and furniture. You may need to perform your inspection at night when bedbugs are active.

Look for these signs:

- **Dark specks.** Typically found along mattress seams, these specks are bedbug excrement.
- **Skin castings.** Bedbugs molt five times before becoming adults. These empty skins are pale yellow.
- **Rusty or reddish stains.** You may find small smears of blood on your bed sheets where bedbugs were crushed.

Treatment

Bedbug bites don't usually need treatment, as they usually disappear on their own within a week or two. You might ease symptoms by using:

- A skin cream containing hydrocortisone (Cortaid)
- An oral antihistamine, such as diphenhydramine (Benadryl)

Treating your home

It can be difficult to get rid of a bedbug infestation because they hide well and can live months without eating. You may need to hire a professional exterminator, who will likely use a combination of pesticides and nonchemical treatments.

You may also treat your home for bedbugs by:

- **Vacuuming.** A thorough vacuuming of crevices can remove bedbugs from an area but likely won't capture all of them. Empty the vacuum after each use.
- **Laundering.** Washing items in water that's at least 120 F (48.9 C) can kill bedbugs. As will putting them in a dryer on a high setting for 20 minutes.
- **Placing items in an enclosed vehicle.** If you live in a very hot place, bag up the infested items and place them in a car parked in the sun with the windows rolled up for a day. The target temperature is at least 120 F (48.9 C).

In some cases, you may have to throw out heavily infested items such as mattresses or couches. Make it obvious the item is unusable so no one else picks it up and gets bed bugs.

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