Animal Bites During Pregnancy: What Should You Do?

Pregnancy comes with plenty of surprises but getting bitten by a nonvenomous animal like a dog, cat, or squirrel is not on the top of the list.

The good news is that most animal bites can be managed safely during pregnancy. Knowing what to be concerned about can help protect both you and your developing baby.

When Are Animal Bites a Concern in Pregnancy?

Most concerns after an animal bite are related to the possibility of an infection.

Animals have bacteria in their mouths, and even a small bite can sometimes lead to an infection. Signs to watch for include:

- Increasing redness around the bite
- Swelling
- Warmth around the wound
- Pus or drainage
- Fever
- Worsening pain

If you notice any of these symptoms, contact your healthcare provider right away.

Some bites, especially cat bites, have a higher chance of becoming infected because cats' teeth can push bacteria deep under the skin.

If your healthcare provider believes there is a significant infection risk, they may recommend antibiotics. MotherToBaby has a podcast on antibiotics if you would like to know more: Antibiotics – MotherToBaby

What About Rabies?

Rabies is a viral infection that affects the nervous system (the brain, spinal cord, and nerves). In the United States, rabies is uncommon in people, however, it can be transmitted through bites from animals who have rabies. A healthcare provider may consider rabies prevention treatment if you are bitten by a:

- bat
- raccoon
- skunk
- fox
- stray animal
- or any animal acting unusually interested in biting humans or appearing sick

One question MotherToBaby specialists sometimes hear is: “Can I still get rabies shots while pregnant?”

Rabies shots have been studied for use in pregnancy and have not been known to increase risks for birth defects or cause other negative pregnancy problems. The deadly outcomes of untreated rabies can be avoided with appropriate treatment. Your healthcare team can help determine whether treatment is needed based on the type of animal and circumstances of the bite. If you are ever concerned about rabies exposure, always reach out to your healthcare provider right away.

Do Not Forget About Tetanus

Animal bites could also introduce bacteria that cause tetanus through an open wound. Tetanus is a serious illness that causes severe muscle tightness and spasms with no cure. In the United States, obtaining the Tdap or DTaP vaccines on schedule can help prevent tetanus.

If it has been a while since your last tetanus-containing vaccine, your healthcare provider may recommend a booster. Many pregnant women already receive a Tdap vaccine during pregnancy to help protect their newborn from pertussis (whooping cough), but timing and wound management recommendations can vary. Your healthcare provider can help determine what is appropriate for your situation.

What About My Pregnancy?

The primary concerns with animal bites in pregnancy are those that break the skin and could lead to an infection, or those causing harm to the abdomen. If a bite is not on the abdomen, and does not break the skin, the risks to a pregnancy are low.

Prompt wound care and medical evaluation can go a long way toward reducing risks. However, if you experience severe injury, significant blood loss, fever, or other concerning symptoms after a bite, seek medical attention immediately.

How Can I Prevent Animal Bites?

A few simple precautions can help:

- Avoid approaching unfamiliar animals.
- Never try to handle wild animals.
- Teach children to respect animals' space.
- Keep pets up to date on veterinary care and vaccinations.
- Be cautious around animals that are eating, sleeping, or caring for their young.

The Bottom Line

Most animal bites during pregnancy are more scary than dangerous. Cleaning the wound, contacting a healthcare provider, and getting prompt medical advice can help prevent complications.

If you have questions about animals, or other exposures during pregnancy or breastfeeding, MotherToBaby specialists are available to provide evidence-based information you can trust.



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Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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Rachel called us the morning she woke up and found a bat hanging out in her closet. As far as she could tell, she had not been bitten. She was 10 weeks pregnant and wondered what her next steps should be. Her husband also did not detect any bites. He kindly relocated the bat to the outside of their home, but now they were both exposed to potential rabies infection. She was about to leave for work, and her husband had already left for a busy day at the office.

Rachel had been down this road before in high school with a similar event in her childhood home. At that time, her whole family went to their local emergency department and were treated with a rabies vaccine series, or post exposure prophylaxis, to prevent them from becoming ill with rabies. At that time, she remembered being told that she would never need to go through the series again. She was calling us today because her OB provider referred her to MotherToBaby Connecticut for clarification.

In researching this comment about never needing to be treated again, I decided I needed some assistance from our local Poison Control. They confirmed that yes, she ***did*** need to be seen and re-treated in an emergency department of her choice. They also put me in contact with our State of CT Epidemiologist for further consultation. Our epidemiologist reiterated the need to be treated again because of this exposure. Rachel's pregnancy was ***not*** a reason to avoid treatment.

In such circumstances, the benefits outweigh the potential chances for adverse pregnancy outcome from the preventative vaccine series. Rachel's husband would need the vaccine, as well.

The Centers for Disease Control and Prevention (CDC) has a nice online review that I shared with Rachel that confirmed the need for her to receive treatment with the rabies vaccine. It also confirms the benefits of treatment in pregnancy outweighs the chances for any adverse pregnancy outcomes.

Rabies

- Because of the potential consequences of inadequately managed rabies exposure, **pregnancy is not considered a contraindication to postexposure prophylaxis**. Certain studies have indicated no increased incidence of abortion, premature births, or fetal abnormalities associated with rabies vaccination. **If the risk of exposure to rabies is substantial, pre-exposure prophylaxis also might be indicated during pregnancy**. Rabies exposure or the diagnosis of rabies in the mother should not be regarded as reasons to terminate the pregnancy.

Treatment for rabies exposures include the actual rabies vaccine as well as the Human Rabies Immune Globulin (HRIG). The HRIG is a medication given at the time of exposure to provide the patient with immediate protection from the rabies virus. It is only ever given once. That means Rachel will not need HRIG again.

Instead, she will just need two injections of the rabies vaccine (there are up to five shots given after a first exposure). The vaccine helps your body build its own immunity to protect you against the rabies virus.

Because this was her husband's first exposure, he will need the full treatment including the HRIG and up to five injections of the rabies vaccine.

How urgently did Rachel and her husband need to be treated? The epidemiologist said sooner rather than later, recommending they visit an emergency department within the day of exposure.

Though Rachel was not excited about having to get vaccinated again, she was relieved to learn exactly what she needed to do for the health of her baby, her husband, and herself.

We were grateful for the collaboration with our local Poison Control, state epidemiologist and the CDC documents. The best possible reproductive data was provided for this couple to make the best reproductive decisions for themselves. With the help of MotherToBaby and our collaborators, this was one less ***bat***-tle they had to face alone.

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