

Fatal Leopard Bite

Vaibhav Sonar*, Rajesh Bardale**

Abstract

The authors report a fatal case of leopard attack in rural area of Sangli district. The victim was a 10 year old boy who was roaming in farm when he was attacked. The injuries present over the neck were consistent with the big cat attack. The leopard attacks are uncommon in rural part of Sangli district and hence the case is reported.

Keywords: Leopard Bite; Medico Legal Autopsy; Injuries Around Neck.

Introduction

Fatal attacks by wild animals on humans causing fatal injuries are not uncommon in rural or forest areas of India. During autopsy of such cases of animal bites, one must be aware of the types of injuries seen in sharp force trauma cases. The ability to differentiate between animal bite marks, insect bites and other mechanisms that injures skin is vital. Knife and teeth wounds can be amazingly similar. Animal bite mark injuries and fatalities are increasing in incidence and are yet another patterned injury that should be recognized by autopsy surgeon [1,2]. Hence the present case is reported to describe the bite mark pattern produced by large cat attacks and its rarity in western Maharashtra.

Case Report

10 years old boy residing at rural part of Sangli district brought by relatives with history of animal bite (leopard) to nape of neck and lateral aspect of face. Boy was apparently alright and roaming in farm

Authors Affiliation: *Associate Professor, **Professor and Head, Dept. of Forensic Medicine, Govt. Medical College, Miraj.

Reprints Requests: Vaibhav Sonar, Associate Professor, Dept. of Forensic Medicine, Govt. Medical College & Hospital Miraj -416410, Maharashtra.
E-mail: sonufm76@gmail.com

when leopard came from behind and hit him on nape of neck and face. Boy was admitted in private hospital on the same day, died in spite of treatment. Body was brought to Govt Medical College and Hospital, Miraj for medico legal post mortem examination.

On external examination boy was averagely built and nourished, having following injuries on the neck, on left side of neck two oval puncture wounds present, 4 cms apart, and one present over angle of mandible and other at the level of thyroid cartilage which was stitched (Fig. 1). Neck vessels were exposed to exterior.

On right side of neck two oval puncture wounds were present 3.5 cms apart, neck tissues deep with multiple abrasions in between them with reddish thick pus oozing from lower puncture wound. There was abscess formation beneath the said injury (Fig. 2).

Three other punctured lacerated wounds present over nape of the neck. All these injuries denote large



Fig. 1: Bite mark over left side of neck

carnivore bite marks (Fig. 3).

Leopards have extremely long canines and a complement six incisors plus two canines for a total of eight [2]. Abrasions in between the oval punctured wounds correspond with the six incisors.



Fig. 2: Bite Marks over right side of neck



Fig. 3: Bite marks over nape of neck

Discussion

Most of the cases of animal bites or attacks presented in GMCH Miraj and PVPGH Sangli are of dog bites and crocodile bites. Crocodiles are more common inhabitants of Krishna River and cases of crocodile bites most commonly came to casualty of GMCH Miraj and PVPGH Sangli. As such leopards are uncommon in rural part of Sangli district and not a single case of leopard attack is reported in this part. The circumstances surrounding this case leave little doubt as to the identity of the perpetrator.

All large cats hold down its prey with its paw. It never attacks head on but prefers an approach from rear or shoulder, going for the nape and neck. Its canine and ripping teeth are indeed formidable, and their structure allows them to thrust these teeth deep into tissues and kill by strangulation [3, 4]. The wound is usually contaminated with the oral flora of the offending animal, with infection rates ranging from 5% to 30% [5]. Leopard attacks are usually fatal [6].

The autopsy findings are consistent with a large cat attack. The wound distribution, around head and nape of the neck, is commonly found on the pray of small and large cats such as jaguars, leopards etc. [2, 3, 4, 6, 7]. Our case also shows penetration of deep vasculature of neck which is common extension of neck wounds in big cat attacks.

References

1. C. Michael Bowers, *Forensic Dental Evidence an Investigator's Handbook*, (1st Ed), Elsevier Academic Press.
2. J. Stephen Vogel, John R Parker, Fred B Jordan, Thomas L Coury and Arthur R Vernino, Persian Leopard (*Panthera pardus*) Attack in Oklahoma. *Am J For Med Pathol*. 2000; 21(3): 264-269.
3. Ramin Babram, Jonthan E Burke, Head and Neck Injury From Leopard Attack: Case Report and Review of the Literature. *Oral Maxillofaci Surg*. 2004; 62(2): 247-249.
4. Stephen Chapernoire, Bernard Camiade, Michel Legros, Basic Instinct in a Feline, *Am J For Med Pathol*. 2001; 23(1): 46-50.
5. Callaham M, Dog Bite Wounds, *JAMA*. 1980; 224: 2327.
6. Dar G. Nabi, Shafaat Rashid Tak, K. A. Kangoo, M. A. Halwai, Comparison of Injury Pattern in Victims of Bear (*Ursus thibetanus*) and Leopard (*Panthera pardus*) Attacks. A Study from a Tertiary Care Centre in Kashmir, *Eur J Trauma & Em Med*. 2009; 35(2): 153-158.
7. Cohle S D, Harlan C W, Harlan G, Fatal Big cat attacks, *Am J For Med Pathol*. 1990; 11(3): 208-212.