

Observations on fighting dogs

Donald H. Clifford, DVM, MPH, PhD; Mary Pat Boatfield, B Ed; Judy Rubright, BS

DOG FIGHTING IS A VESTIGE of the ancient use of dogs to kill for food, protection, and sport. In nineteenth century Europe, dogs were matched against bulls, bears, and other animals. This evolved into the cruel sport of matching one dog against another. Unfortunately, this sport persists and appears to be increasing in the United States.^{1,2} Companion dogs now are selected away from their predatory instincts, toward temperaments that make them compatible with other animals and man; however, in certain mixed and established breeds, there may be animals that retain an uncontrollable urge to fight and kill.

Many people use the term "pit bull" when referring to dogs used for fighting. There is no recognized breed with this name. Recognized breeds that have been associated with dogfighting in the United States are the American Staffordshire Terrier, originally accepted for registry by the American Kennel Club in 1935,³ the Bull Terrier, a breed that dates back to 1835,³ the Staffordshire Bull Terrier, which was admitted to registration in 1974,³ and the American Pit Bull Terrier,⁴ registered in 1898. Other breeds, eg, Bulldog Terrier, Old Pit Bull Terrier, and Bull and Terrier are interesting historically, and dogs conforming to former standards may exist in an unregistered status. The American Pit Bull Terrier (United Kennel Club) is the predominant pit or fighting dog (Fig 1). There appears to be considerable variation in the "stop," length of muzzle, weight, and other characteristics between the American Pit Bull Terrier and the American Staffordshire Terrier.⁵ Some dogs are registered as both American Pit Bull Terriers and American Staffordshire Terriers. In November 1981, 32 fighting dogs were seized by the Humane Society of the United States and the Toledo Humane Society⁶ and confined at the Medical College of Ohio. A total of 3 recognized breeds were represented. One dog was of mixed breeding. The lack of fixed conformation was illustrated by 7 pups that were whelped by a confined bitch that conformed to the standards of an American Pit Bull Terrier. Of



Fig 1—Typical head of a pit bull. This dog has purulent drainage from the wound on the right side of the muzzle. The lesion responded to surgical drainage and antibiotic treatment. Notice the short ear crop or "bun crop." Thick and wide leather collars with rings are used more commonly than nylon web or chain collars.

these, 2 pups resembled Staffordshire Bull Terriers, one was like a Bull Terrier, and the remaining 4 dogs looked like American Pit Bull Terriers.

The 32 dogs were seized at the residences of 6 Toledo, Ohio (Lucas County) dogfighters. The predominant lesions (wounds, abscesses, and scars) observed in the dogs are listed for adult dogs, immature dogs, and pups (Table 1; Fig 2 to 5). There was not evidence of veterinary treatment of any of the 32 dogs. Antibiotics and other drugs that could be used to treat dogs were taken from the residences of the owners.⁶ Other conditions, including cutaneous gran-

From the Division of Laboratory Animal Medicine, The Medical College of Ohio, CS No. 10008, Toledo, OH 43699 (Clifford, Boatfield), and the Toledo Humane Society, 320 Indian Wood Circle, Maumee, OH 43537 (Rubright).

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⁶Last 3 plead guilty in dogfighting cases. *The Blade* (Toledo, Ohio) 132:14, July 4, 1982.

TABLE 1—Distribution of wounds, abscesses, and scars according to maturity in 32 fighting dogs seized in 6 kennels in Lucas County

	Adult dogs*		Immature dogs†		Pup‡		Total (32)
	Male (9)	Female (17)	Male (2)	Female (1)	Male (2)	Female (1)	
Wounds	1	2	...	...	...	...	3
Abscesses	1	2	...	...	...	...	3
Scars							
Ears	4	9	1	...	1	...	15
Muzzle	4	9	...	...	1	...	14
Throat	1	5	1	...	2	...	9
Forelimbs	5	13	...	...	2	2	22
Hindlimbs	6	10	...	...	2	1	19

* >6 months old. † 4 to 6 months old. ‡ 12 to 4 months old.

ulomas (2), ringworm (6), paronychia (2; Fig 6), and healed fractures (2), were observed. All of the lesions and conditions responded to debridement, surgical drainage, administration of antibiotics, and other treatments during confinement at the Medical College of Ohio.

Adult dogs were confined separately in runs, whereas immature dogs and pups were confined separately in cages as well as in runs. In over 6 months of confinement, there were many apparent and subtle differences between the fighting dogs and the dogs routinely confined in this institution.

Aggressiveness of the fighting dogs toward other dogs was always evident during the period of confinement. Masonry dividers, 4 feet high, between the pens prevented contact between dogs. Dogs of either sex were not compatible with dogs of the same or opposite sex. In 1 instance an older male broke out of its pen and seriously mauled a young female that was being exercised. Because of an inclination toward violent fighting, it was necessary to separate 7 littermates into groups of 1 or 2 when they were 10 weeks old. Two pups that appeared compatible were taken to another location; however, within 2 weeks, it was

necessary to separate these animals. Compared with other dogs, the fighting dogs appeared to react less to IV and IM injections and to be less sensitive to pain. They recovered promptly from the effects of ataractic, analgesic, and anesthetic drugs. The dogs did not bite the personnel handling them but became increasingly athletic, difficult to handle, and threatening. They still were manageable by regular, experienced handlers but appeared very aggressive toward new handlers. The dogs gained weight on high-energy food, which constantly was available, in spite of considerable exercise in the large pens. Pups or young dogs had a tendency to defecate in the same area and did not soil themselves as readily as pups from other breeds. Rawhide chews that would have lasted several days or weeks for most dogs were devoured in 1 day. They liked to carry or "mouth" food dishes and other objects. The fighting dogs barked and jumped against wire doors when strange people came into the area, but they tended not to bark when they were in direct contact with people or other dogs. When not barking, their mouths were open. They consistently maintained eye contact and did not "back down" or move away from other animals or people. They did not make threatening gestures such

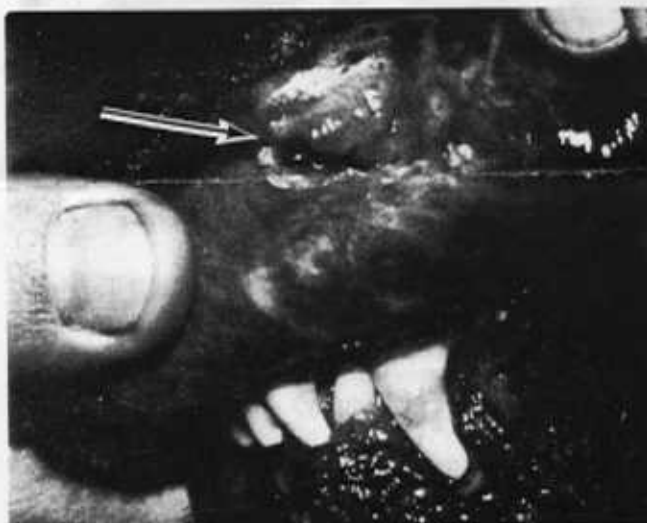


Fig 2—Bite wound through the lip. Granulation tissue at the margin of the wound is visible. This type of wound is frequently self-inflicted when the lip becomes impaled on the canine tooth during a match.⁵ Dogfighters use the term "fanged" for such an injury, which is cause to stop the fight until the dog can become unfanged with a parting or breaking stick and/or pencil.



Fig 3—Scar at the nasal orifice. Nose or face biting is a common style of fighting. Such wounds healed rapidly with local treatment and systemic administration of antibiotics.



Fig 4—Scars and muscular atrophy of a pelvic limb. These scars appear to have resulted from deep wounds following a stifle or leg hold. Femoral vessels may be severed during this type of injury, which can be fatal.

as baring their teeth, snarling, or raising the hair over their back and neck. They maintained a wide stance as if ready to move forward or laterally.

Blood and feces were examined for evidence of internal parasitisms. The endoparasitic burden of the pit bulls was over 50% higher than that reported in several surveys.⁷⁻¹⁰ The percentages of endoparasitic infections among pit bulls resembled those reported in pound (stray and abandoned) dogs.¹¹⁻¹³ Each dog also was examined for ectoparasites and, with the exception of 5 dogs that had demodectic mange, ectoparasites were not found.

Most veterinarians are not familiar with the subculture¹⁴ of dogfighting, since dogfighters are reluctant to seek veterinary advice and assistance. Veterinarians should be aware of the breeds most commonly involved in dogfighting and know how to identify pit bulls (Fig 1 and 5). It would be appropriate to advise their clients to tattoo their dogs and record them with a national registry since pet dogs as well as street dogs are used as training animals by dogfighters.

The distinguishing characteristics of fighting dogs include short ear crops (Fig 1), recent or long-standing wounds and abscesses, and scars over the head, throat, legs, and ears (Fig 1 to 5). Also, wide leather or web collars with heavy rings may be worn. Dogs confiscated at dogfights may have puncture wounds and lacerations, with edema over injured areas.¹⁶ Other lesions or conditions may include missing teeth, inability to stand, scars, abrasions, loss of the tip of the tail, and circular wounds on the legs.¹⁸ Deep thoracic and abdominal wounds, inflicted by "chest dogs" or "stomach dogs" also may be encountered.^{16-20,b}

Fighting dogs may be parasitized heavily due to the fact that anthelmintic treatment is empiric or sporadic, and sanitation at holding and training areas often is poor. Exercising devices such as treadmills, catmills,^c and spring poles^d may be shared by

¹⁴Swift JE: The gentle looking dog went for the other's legs. *Ledger-Enquirer* (Columbus, Ga) 94-B1, B5, July 27, 1980.

^cAn exercising device with radial spokes extending outward from a central axis. Bait consisting of a chicken or cat may be placed in a cage or bag in front of the dog.

^dA pole or sapling and hide that a dog can grab by jumping to strengthen the hindlimbs and jaws.



Fig 5—Multiple wounds on the head, neck, and legs of an adult pit bull. This dog had severe demodectic mange, which responded to local and systemic treatment in addition to a special diet. Notice the thin, muscular body and large head and muzzle. This animal is near "match weight" or the optimal weight for fighting.

several animals and provide an opportunity to become infected.

If a pit bull needs to be hospitalized, it should be confined to a cage or run that cannot be opened by the dog, and it should not be allowed to come in contact with other animals in any situation. A pit bull can seriously injure or kill a dog of similar size in a few minutes and it is not easy to detach a pit bull in preferred "hold." Pit bulls can bite with greater force than most dogs and once in a hold they do not simply maintain the "bite," but continue to grind their premolars and molars into the tissue while the canine teeth stabilize the hold.²⁰

A law was passed in Wisconsin in 1981 requiring veterinarians to report (in writing) to the local humane officer, society, or organization or to the local law enforcement agency, dogs that they believe have been in intentional dogfights.²¹ Although this information can be very useful to those investigating and



Fig 6—Digital infection. Such an infection, with or without paronychia, may be caused by fighting or injury on the treadmill. In this and another dog, the hindlimbs had similar lesions and it was suspected that the feet had been caught between the belt and the frame of the treadmill.

prosecuting dogfighters, it may pose some danger to the reporting veterinarian.

References

1. Keenan G: The savage world of dogfighting. *Am Humane Mag* 66:8-11, 1978.
2. Lowther W: Dying like a dog. Confirming that man is the vilest of beasts. *Macleans* 9:45-46, 48, 50, 1978.
3. *The Complete Dog Book*. Official Publication of the American Kennel Club, ed 16. New York, Howell Book House Inc, 1980, pp 437-440, 451-454, 514-516.
4. Stratton RF: *This Is the American Pit Bull Terrier*. Neptune City, NJ, TFH Publications Inc, 1976, pp 1-176.
5. Boatfield MP, Clifford DH, Rubright J: The confinement, handling and care of fighting dogs. *New Methods J Anim Health Tech* 5:7-10, 1983.
6. Rubright J: The Toledo Humane Society and HSUS unite to break dogfighting ring. Police, sheriffs assist with 15-hour raid. *Humane Soc Heartbeat* (Toledo, Ohio), Spring: 4-5, 1982.
7. Vaughn J, Jordan R: Intestinal nematodes in well-cared-for dogs. *Am J Trop Med Hyg* 9:29-31, 1960.
8. Hoskins JD, Malone JB, Smith PH, et al: Prevalence of parasitism diagnosed by fecal examination in Louisiana dogs. *Am J Vet Res* 43:1106-1109, 1982.
9. Visco RJ, Corwin RM, Selby LA: Effect of age and sex on the prevalence of intestinal parasitism in dogs. *J Am Vet Med Assoc* 170:835-837, 1977.
10. Jaskoski BJ: Endoparasites of well-cared-for dogs. *J Parasitol* 54:432, 1970.
11. Vaughn JB, Murphy WS: Intestinal nematodes in pound dogs. *J Am Vet Med Assoc* 141:484-485, 1962.
12. Worley DE: Helminth parasites of dogs in southeastern Michigan. *J Am Vet Med Assoc* 144:42-46, 1964.
13. Braun JL, Thayer CB: A survey for intestinal parasites in Iowa dogs. *J Am Vet Med Assoc* 141:1049-1050, 1962.
14. Meadows E: An American pastime. *Harper's Magazine* 252:6, 1976.
15. Brown CM: Pit. *Atlanta* 22:60-67, 83, 1982.
16. Crews H: A day at the dogfights. *Esquire* 91:56-57, 59-60, 62, 65, 1979.
17. Fitz-Barnard L: *Fighting Sports*. Covent Garden, London, Odham's Press Limited, 1921, pp 131-150.
18. Fox RK: *The Dog Pit, or How to Select, Breed, Train and Manage Fighting Dogs with Points as to their Care in Health and Disease*. New York, The Police Gazette Publishing House, 1888, pp 1-32.
19. Kroll B: The savage pit. *Geo* 1:56-78, 1979.
20. *An Exposition of Dogfighting*. Washington, DC, The Humane Society of the United States, 1980, pp 1-8.
21. *Chapter 160 Laws of 1981*. Published by the State of Wisconsin, April 9, 1982, pp 1-2.