

Introduction

Tetanus, known commonly as lockjaw, is a severe bacterial infection caused by *Clostridium tetani*, leading to intense muscle spasms and potentially fatal complications. Malaysia's vaccination program has made it rare in the country, with the vaccine considered nearly 100% effective. This case report highlights a rare occurrence of tetanus in a vaccinated individual, emphasizing the need for continued awareness and risk mitigation.

Case Description

A 78-year-old Malay man with no known medical conditions presented with jaw clenching and muscle stiffness. A week earlier, he had received a booster shot of anti-tetanus toxoid after sustaining multiple forehead lacerations and a second-degree abdominal burn from a fall. Examination revealed risus sardonicus, generalized hypertonia, poor hygiene, and inadequate wound care. His vital signs were stable initially, but he later developed oxygen desaturation, requiring supplemental oxygen. Treatment included intramuscular human tetanus immunoglobulin (TIG), intravenous benzodiazepines, and antibiotics. Laboratory tests indicated acute kidney injury with rhabdomyolysis. He was intubated for airway protection and admitted to the ICU. However, he later succumbed to complications of his condition.

References

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Discussion

Several factors may explain why clinical tetanus occurs despite vaccination, with poor wound care being a significant contributor. In this case, inadequate wound management likely allowed *Clostridium tetani* to thrive, leading to infection despite a recent booster dose. Additionally, as tetanus immunization was only introduced in Malaysia in 1978, the patient may have never received the full primary vaccination series, increasing his susceptibility. The absence of a nationwide digital immunization registry for adults, unlike South Korea's IRIS program, further complicates verification of past vaccinations. While rare, similar cases have been reported, often linked to poor wound care or uncertain vaccination history. This case highlights the critical role of proper wound management in preventing tetanus and underscores the need for comprehensive vaccination records. Further research, including case reports, is essential to better understand the causes of vaccine failure.



Figure 1
Risus Sardonicus



Figure 2
Generalized Hypertonia with Posturing

Conclusion

Tetanus remains a threat despite immunization, especially with inadequate wound care and unverifiable vaccination history. This case underscores the urgency of stringent wound management, comprehensive immunization, and the establishment of a national digital health registry to ensure accurate medical records and strengthen disease prevention.

