Venomous Snake Bite

Palm Beach Herpetological Society

STATISTICS

- 7000 venomous snake bites are reported annually in the United States.

- 15 fatalities result, placing the chance of survival at roughly 499 out of 500.

- Approximately 3000 are classed as "illegitimate," meaning these bites occurred while the victim was handling or molesting the snake.

- 85% of the natural bites are below the knee.

- 50% are dry. Squeezing the venom glands to inject is a voluntary reflex. In that strikes against humans are generally defensive actions, it is estimated that no venom is purposely injected about half the time. This holds true with the pit vipers. With the Coral Snake the amount of venom injected is directly related to the size of the snake and the length of time it holds on to the victim.

FIRST AID THERAPY

The stabbing strike of a pit viper can be recognized by one or two definite puncture wounds, and if venom is injected there will be intense, burning pain and swelling around the holes.

The Coral bites and holds. There will be little pain, but the victim will begin to lose control of all reflexes. Drooping eyelids will probably be the first outward sign of envenomation.

Do

- Do remain calm — Remember that there is an excellent chance for survival, and in most cases there is plenty of time.

- Do suck and squeeze — as much venom as possible directly from the wound. Venom is protein and can be taken orally with no ill effects.

- Do remove jewelry — Swelling can progress rapidly, so rings, watches and bracelets can be a real problem.

- Do mark the time — The progress of symptoms (swelling) is the most obvious indicator of the amount of envenomation.

- Do keep the stricken limb below the heart.

- Do get to a hospital as quickly as possible — Anti-venom serum is the only sure cure for envenomation, and because some people are allergic to horse serum it should only be given in a fully equipped medical facility.

- In case of a Coral bite, do pull the snake off immediately — Corals’ fangs are relatively small, and they have to work at getting venom into the
wound. Therefore, the faster the snake is
removed the less venom is injected.

- **Do attempt to identify the offending snake** —
  Positive identification in the form of a dead snake
  is helpful, if convenient, but no time or safety
  should be wasted since the symptoms will give
  medical personnel an accurate diagnosis.

- **Do get a tetanus shot.**

  **Don't**

  - **Don't cut the wound** — This almost always causes
    more damage than it’s worth.

  - **Don't use a tourniquet** — This isolates the venom
    in a small area and causes the digestive enzymes
    in the venom to concentrate the damage.

  - **Don't use alcohol orally** — it speeds the heart
    and blood flow and reduces the body's counter-
    acting ability.

  - **Don't use ice** — Freezing the stricken limb has
    been found to be a major factor leading to
    amputation.

**PREVENTION**

- Do not play with snakes.
- Keep landscape well manicured.
- Wear shoes around the house.
- Wear gloves when weeding.
- Wear boots in snake country.
- Develop the habit of watching where you step or
  place your hands.

**ADDITIONAL INFORMATION**

For further information, or to request a guest
speaker, contact the Palm Beach Herpetological
Society at P.O. Box 125, Loxahatchee, FL. 33470.