Snake Bites

In Australia there are on average 1200 snake bite victims a year requiring treatment. Of these definite or suspected bites around 80% are a dry bite (no envenomation) but any snake bite needs to be taken seriously as any envenomation can potentially lead to death, even a suspected bite should be treated with the correct First Aid and prompt medical attention sought.

In Australia 2 - 4 people die from snake bite a year, but, there has been no recorded deaths from snake bite in Australia where THE CORRECT FIRST AID has been applied.

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FIRST AID FOR AUSTRALIAN SNAKE BITE

1. Ensure patient (& others) are no longer at risk

- Reassure patient. Encourage lying down & keeping totally still

1. Contact emergency service – ambulance – dial “000”
2. FIRST AID MUST BE STARTED *IMMEDIATELY*

- If impairment of vital functions, support as priority (CPR)

1. Do not interfere with bite in any way
2. Keep limb & person still until bandage & splint can be applied
3. IMMOBILISATION OF BITTEN LIMB & PERSON IS *CRITICAL*
4. Start bandaging at extremity, no matter where on limb bitten

- Remove all jewellery from bitten limb

* Include fingers or toes, & splint to immobilise any joints
* Mark bite site on bandage(s) to allow venom detection in hospital
* Bandage over clothing – removing clothing increases movement
1. If bitten on body or head, immobilisation only
2. Do not give food or drink – small sips of water if requested
3. Follow instructions of paramedics for patient retrieval

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IN SUMMARY

 Start first aid **immediately – do not delay – do NOT**

 **wait “To see what develops”!**

 **Do not ignore a trivial bite (especially if suspected**

 **from a Brown Snake)**

 Immobilisation is ***critical* – patient must NOT move**

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Why Pressure Bandage?

Injected venom moves through the lymphatic system before going into the blood stream. It has to travel all the way around the limb first. (Although there are accounts of venom by-passing the lymphatic system).

The lymphatic system is just under the skin. The correct application of a pressure bandage flattens the lymph vessels and slows the rate of spread of venom away from the bite site. This highly influences patient outcome.

Why Immobilise?

When we move any part of our bodies we use our muscles. This muscle pump effect activates our lymphatic system, which increases venom distribution. Complete immobilisation (not just the bitten limb) is a key part in all snake bite first aid.

Do!

 Reassure patient and keep calm

 Apply an elasticated bandage at even pressure and extend the bandage as high/low as possible on the bitten limb. (Use the same pressure as for a sprained ankle or wrist).

 Check un-bandaged tips of fingers/toes for circulation

 Monitor patient at all times. Cardiac collapse is possible and can be fatal. CPR may be necessary and takes precedence over bandaging.

Do NOT!

 Cut or suck the bite site

 Wash the bite site (it will be swabbed at the hospital for venom ID)

 Use a tourniquet (this can stop the blood flow)

 Remove persons clothing (movement = muscle pump effect)

 Allow the patient to walk (movement = muscle pump effect)

 Try to catch or kill the snake (it is not needed for ID or treatment)

Further Info:

Australian Venom Research Unit: [*http://pharmacology.unimelb.edu.au/research/avru*](http://pharmacology.unimelb.edu.au/research/avru)

Geoff Coombe:[*www.livingwithwildlife.net*](http://www.livingwithwildlife.net)

Clinical Toxinology Resources:[*www.toxinology.com*](http://www.toxinology.com)