

RATTLESNAKE BITE

Contraria contrariis curantur - The opposite is cured with the opposite. -Hippocrates

Basics

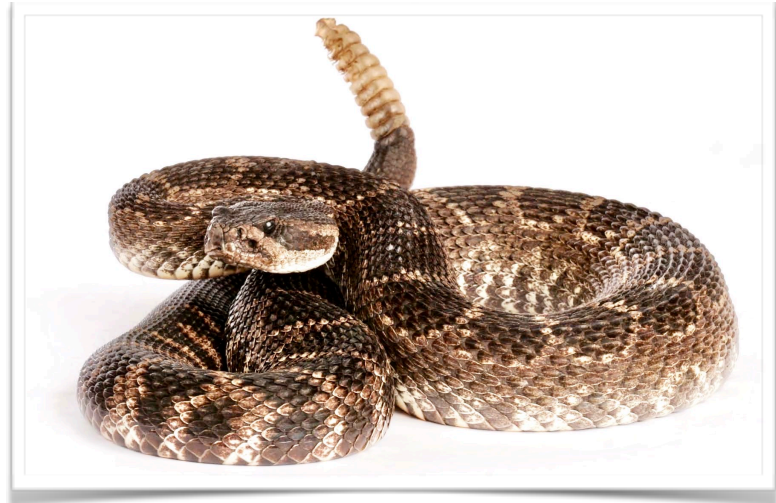
- Mortality rates: From <0.28% with antivenom to 2.6% without antivenom
- Venom is composed of digestive enzymes and spreading factors

Clinical presentation

- Pain around the bite site, swelling
- Taste changes (eg, a metallic taste)
- Difficulty breathing
- Chest pain
- Nausea, vomiting, or diarrhea
- Neurologic symptoms - Weakness, paresthesias

Complications

- Bleeding, such as gastrointestinal or intracranial
- Infection
- Cardio- or neuro-toxicity
- Death (rare in the U.S.)



Prehospital care after rattlesnake envenomation

- Minimize activity (if possible), remove jewelry or tight-fitting clothes in anticipation of swelling. Maintain the extremity in a neutral position.
- Transport the patient to the ED as quickly as possible. Use a pen to mark and time the border of advancing edema.
- **Do NOT:**
 - Apply negative pressure venom extraction device as this can result in additional injury
 - Make incision across fang marks
 - Apply mouth suction or place ice on the wound
 - Use tourniquets
 - Attempt to capture or kill the snake