Snake Bite First Aid http://www.firstaidanywhere.com/snake-bite-first-aid.html

The knowledge of snake bite first aid can be the difference between death and survival for a person that has been bitten.

Most species of snake are harmless but unless you are absolutely sure that you have identified the snake correctly then treat the bite seriously and apply **snake bite first aid - See instructions below.**

Snake Facts

- Children are at higher risk for death or serious complications because of their smaller body size.
- Snakes found in and near water are frequently mistaken as being poisonous.
- A snake can actually bite for up to an hour after it is dead (from a reflex).
- Although Australia is home to the largest number of venomous snakes in the world, it averages only one fatal snake bite per year.
- Not all poisonous snakes are fully charged with venom.
- Even those that are fully charged do not always inject a lethal dose.

Other factors that influence the possible seriousness of a snake bite include

- the persons health, size, age, and psychological state.
- the nature of the bite may also vary, like penetration of one or both fangs, the amount of venom injected, the location of the bite and proximity to major blood vessels.
- the health of the snake and the interval since it last used its venom mechanism is also important.

These multiple variables make every bite unique. Depending on circumstances, the bite of a "mildly" venomous snake may be life-threatening and that of a "strongly" venomous snake may not. Again treat the bite seriously and apply **snake bite first aid - See instructions below.**

Signs and Symptoms

The most common symptoms of all snakebites are:

Emotionally based symptoms-

- overwhelming fear
- panic
- emotional instability

This may be because of all the hype surrounding snakes and possible death or injury from bites which in turn may cause symptoms such as-

- nausea
- vomiting
- diarrhea
- vertigo
- fainting
- tachycardia (fast heart beat)
- cold and clammy skin.

Physically based symptoms-

- Most snake bites, whether by a venomous snake or not, will have some type of local effect. There can be minor pain and redness in over 90% of cases, although this varies depending on the site.
- Bites by vipers and some cobras may be extremely painful, with the local area sometimes becoming tender and severely swollen within 5 minutes. The bite area may also bleed and blister.
- Pit viper bites may include lethargy, weakness, nausea, and vomiting. Then over time may develop more life-threatening symptoms such as low blood pressure, rapid breathing, severe tachycardia (heart beats very fast), altered perception of what is happening around them and

respiratory failure (breathing difficulty or breathing stops). It this happens <u>CPR</u> should be applied.

First Aid For Snakebites

- Call medical help immediately if possible.
- Remain calm, remember most snake bites are not fatal.
- Minimise movement if possible. If you are hiking alone you may have to hike out for help.
- If you are bitten on the arm or finger remove any rings, bracelets or watches. Loosen any tight clothing in case swelling occurs.
- Apply a <u>pressure bandage</u> to the bitten limb. If the bite is to the trunk, head or neck, apply firm pressure to the bitten area. Do not restrict chest movement as breathing will be affected by this.
- Splint or use a <u>sling</u> on the bitten limb to restrict movement.
- If there is no bandage or equivalent to apply a pressure bandage make note of any inflammation by tracing the edge of the swelling with a pen or the like near/around the bite and mark the time clearly next to it. If it progresses make a new tracing noting the time of each new mark beside that new tracing. This will give valuable information to medical help as to the development of the swelling.
- If possible, lie down and keep the bitten extremity at body level. Raising it can cause venom to travel through the body quicker. Holding it down, can increase swelling.
- When possible arrange for transport to the nearest hospital emergency room, where anti-venom for snakes common to the area will often be available and given if required.

Some definite No No's for Snake Bite First Aid

- NO aspirin or other pain relievers.
- NO tourniquets. This cuts blood flow completely and may result in loss of the affected limb.
- DO NOT try to suck the venom out of the wound or cut into the bite with a knife. Such measures have not been proven useful and may cause further injury (see below explanation).
- DO NOT apply a cold compress or ice on the bite. Research has shown this to be potentially harmful.
- DO NOT raise the wound above the heart. Raising it can cause venom to travel into the body. Holding it down, can increase swelling.
- DO NOT use electric shock or a stun gun on the bite area. This method is under study and has yet to be proven effective. It could harm the victim.
- DO NOT wash the snake bite area Australian recommendations for snake bite treatment **strongly recommend against** cleaning the wound. Traces of venom left on the skin/bandages from the strike can be used in combination with a snake bite identification kit to identify the species of snake. This speeds determination of which anti-venom to administer in the emergency room.(1)
- DO NOT try and capture the snake. If it's safe you can try to take a photo with a camera or with your phone. This is the best way in aiding snake identification.

If it is not possible or safe to take a photo then make note of some characteristics of the snake. Here is an article on snake identifiers:-

What are the Snake Identifiers?

Now let's get down to the points that serve as snake identifiers:

* Length: When it comes to the length of the snake, the first thing that you have to do is imagine how it would look when it is stretched out. The small snakes would be up to 12 inches (30 cm) long and they would include snakes like <u>red belly snake</u>, <u>brown snake</u>. Then there are the medium sized snakes <u>queen</u> <u>snakes</u>, <u>milk snakes</u>, etc. And then you have the large snakes like the <u>cobras</u>, <u>rattlesnakes</u>, water snakes, etc.

* **Shape:** This acts as an important snake identifier. The question that you have to ask yourself is whether the body of the snake is slender, heavy or thick. The thick snake would include the <u>cottonmouth</u>, <u>boa</u>, etc.

while the slender one will include the ribbon snake, vine snake, etc.

* **Head:** This might be a confusing snake identifier because many snakes are actually known to flatten their heads when they are threatened. This can be a bit confusing owing to the fact that <u>pit vipers</u> are known to have arrowheads.

* **Eyes:** This is rather a simply snake identification technique that can help you tell apart a poisonous from a non-poisonous one. Non-venomous snakes are known to have a round pupil whereas the venomous snakes are known to have a vertical pupil similar to the cat's eye.

Although it is a true fact that snakes can be dangerous, you have to remember that they usually keep to themselves. So, if you've found a snake in your yard or inside your home, worry not. The snake can be easily identified – all you have to do is take note of the identifiers I have listed above. This information can then be conveyed to a professional, who in turn will determine whether or not the snake is poisonous.

Article by Natasha Bantwal

Outdated Snake Bite First Aid Treatments

Old style snake bite kit that should **NOT** be used in snake bite first aid.

The following snake bite first aid treatments have all been recommended at one time or another but are now considered to be ineffective or outright dangerous. Many cases in which such snake bite first aid treatments appear to work are in fact the result of dry bites (snake bites where no venom is released).

- Application of a tourniquet to the bitten limb is generally not recommended. Untrained tourniquet use is dangerous, since reducing or cutting off circulation can lead to gangrene, which can be fatal or result in amputation of the limb. The use of a compression bandage is generally as effective, and much safer.
- Cutting open the bitten area, an action often taken prior to suction, is not recommended since it causes further damage and increases the risk of infection.
- Sucking out venom either by mouth or with a pump, does not work and may harm the affected area directly. Suctioning by mouth presents a risk of further poisoning to the person doing the procedure through the mouth's mucous tissues. The release of bacteria from the person's mouth into the victim's wound can lead to infection at the wound site.
- Immersion in warm water or sour milk, followed by the application of snake-stones (also known as la Pierre Noire), which are believed to draw off the poison in much the way a sponge soaks up water.
- Application of potassium permanganate formerly known as permanganate of potash or Condy's crystals.
- Use of electroshock therapy. Although still advocated by some, animal testing has shown this treatment to be useless and potentially dangerous.

In extreme cases, where the victims were in remote areas, all of these misguided attempts using outmoded snake bite first aid treatments have resulted in injuries far worse than an otherwise mild to moderate snakebite.

In worst case scenarios, thoroughly constricting tourniquets have been applied to bitten limbs, completely shutting off blood flow to the area. By the time the victim has finally reached appropriate medical facilities their limb had to be amputated.

(Outdated snake bite first aid treatments has been summarised from wikipedia)