



MEDIA STATEMENT

13 October 2004

Re: Treatment of snake bite at Bowral Hospital

- A patient presented to the Emergency Department at Bowral Hospital on Monday 4 October with a suspected brown snake bite, covered by a compression bandage.
- Emergency staff rapidly assessed him on arrival. Medical observations and pathology tests showed no sign of poisoning (envenomation).
- The administration of antivenene is very serious and can put the patient at risk of anaphylaxis. Antivenom should only be given if there is clear evidence of poisoning.
- In line with clinical guidelines and under constant monitoring, the patient's bandage was removed to access the snake bite to confirm whether he had been poisoned and the type of poison.
- The patient showed signs of toxicity, was stabilised and treated with antivenene.
- His condition was closely monitored before transfer to Liverpool Hospital where he was treated with more antivenene and discharged the next day.
- Ten vials of brown snake antivenene are kept at Liverpool Hospital in two separate locations, four of these were out of date.
 - The hospital is investigating why some vials had expired and putting procedures in place to ensure this does not happen again.
- Because the patient needed such a large amount the hospital obtained more antivenene from three separate locations.
- Antivenene must be given slowly so there was time to bring in the extra supplies without affecting the patient's care.
- South Western Sydney Area Health Service is reviewing its poisonous bite protocol to ensure it is up-to-date and to see if any improvements can be made.
- The health service has been in contact with the patient and his family to offer support and access to any information they might require.
- All emergency department staff are participating in refresher education on managing poisonous bites.

Background

- Snake bites are a rare occurrence, most people need no antivenene while some can require significant amounts of antivenom.
- The administration of antivenene is very serious and can put the patient at risk of anaphylaxis. Antivenom should only be given if there is clear evidence of poisoning.
- Blood can be taken away from the affected area to see if venom has gone into the blood stream.
- Each hospital keeps limited amounts of antivenene as there are limited stocks available across the state. This enables smaller hospitals to provide initial treatment before, if necessary, transferring patients to a tertiary hospital or obtaining more supplies.

Issued by South Western Sydney Area Health Service Public Affairs 9828 5700.