

FIRST AID FOR AN AUSTRALIAN SNAKE BITE

Death from snake bite in Australia is quite rare, but the possibility of being bitten when in the bush, particularly in the warmer months or climates, is always present. Persons moving through the bush on foot should always take precautions to minimize the consequences of a bite, and know how to treat one if it occurs.

An entrant in the World Rogaining Championships at the Warrumbungles in October 2006 was bitten by an eastern brown snake. He was not aware of the bite until symptoms started to appear some time later. Fortunately, he had been at least partially protected by wearing long trousers and gaiters, which minimized the amount of venom injected. He made a full recovery after transfer to Dubbo hospital. The importance of protecting your lower legs (in particular) from the possibility of snake bite cannot be ignored. Long trousers at least (and preferably gaiters) should be worn. Shorts, coupled with ankle length socks, are a recipe for possible disaster.

Should a rogainer be unlucky enough to be bitten, both they and their team mates must be fully aware of the following steps to delay the effects of the envenomation until proper medical help can be delivered in a hospital. To this end, each team should be carrying **at least three** elastic crepe bandages between them (and also individually if setting, vetting, or otherwise helping on the course).

1. The bitten person should lie still. Do not move the bitten limb. **Do not attempt to walk the bitten person anywhere** – especially not back to the Hash House – even if the bite is on the arm. Do not wash the bite site. Do not cut the bite site. Just have the bitten person lie still.
2. Apply crepe bandages firmly to the entire limb, starting at the toes or fingers and working up to the body, particularly over the bite site. Two bandages will almost always be necessary for a bite on the leg. The crepe bandages should be applied firmly, about as firmly as for bandaging a sprained ankle, but do not apply them so tightly that they prevent blood flow in the limb. There is no need to remove light clothing first. **Speed is of the essence** – aim for a **maximum of 20 seconds** from bite to application of the first bandage. The quicker the response, the better the chance of recovery. Once quickly applied, a number of hours have usually been gained. Do not remove the bandages once applied (unless blood circulation has been stopped).
3. If the bite is on the head, neck or back and a pressure bandage cannot be applied, apply constant firm pressure by any means possible.
4. Immobilise the limb with a splint (e.g. bind a piece of wood/timber to the limb).
5. **Get help as quickly as possible** – this is still an emergency. Bring help to the bitten person, not the other way around. Attract another team by blowing your whistle. Repeated blasts of three whistles is the accepted distress signal on a rogaine. Under some circumstances, a single team mate may choose to leave the bitten person and go for help.

Extra information on pressure immobilisation first aid for those who are interested.

Pressure immobilisation first aid for venomous bites and stings was developed in Australia in the 1970s by Professor Struan Sutherland, who was head of immunology research at the Commonwealth Serum Laboratories (CSL). Venom is spread via the lymph system, so applying a bandage (as tightly as you would strap a sprained ankle) slows the movement of venom from the bite site into the lymphatic system. Immobilisation with a splint also slows lymphatic drainage. This gives the bitten person more time to reach hospital and medical care, although obviously the situation is still an emergency.

Eastern Brown Snakes



The Eastern Brown snake is one of Australia's most dangerous reptiles. It is fast-moving and aggressive. However, like most snakes, it is more likely to retreat (except when aroused). The name 'brown snake' is a bit misleading. Colours are variable and range from tan through dark brown, russet-orange to almost black, with a cream or white belly. Juveniles have black bands. In some individuals, the bands cover the entire body while others have bands only to the head. Both variations may be born in the same clutch. The black bands fade with age but may still be evident in some adults.