A recent discussion meeting of the authors on the use of antivenom (AV) in cases of snakebite envenoming in Bangladesh concluded that AV should be used early in the disease process of envenoming once indicated by the presence of neurological manifestation, or coagulation abnormality, or progressively increasing local swelling, or acute kidney injury following snakebite. AV use should be preceded by subcutaneous injection of adrenaline (half dose of the therapeutic dose) unless contraindicated.

The AV product that is currently in supply in Bangladesh when used with adrenaline premedication has not been found to produce significant hypersensitivity reaction (anaphylactoid reaction) which was commonly observed in earlier years.

During or before referral, or during AV use, measures for organ support must be considered. Early use of AV, if indicated when the patient arrives at the first contact hospital (e.g., Upazila Health Complex) can save patients’ lives, and it can prevent the progression of envenoming as well as complications that may otherwise result in disability.

All are urged to adhere to the National Guideline for Management of Snakebite.

References: