

Clinical Study and Management of Snakebite Cellulitis in Gmkmch Salem

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ABSTRACT:

INTRODUCTION: Snakebite is a major public health problem throughout the world especially in tropical and sub-tropical countries. Snake bite cellulitis is the most feared complication. In addition to the anti snake venom, fasciotomy helps in improving the outcome of the patient. Hence early identification and treatment plays major role in reducing the morbidity and mortality.

AIM AND OBJECTIVES: To study the incidence of compartment syndrome, fasciotomy, wound debridement and amputation rate. 50 patients admitted with signs of cellulitis secondary to snakebite were taken up for the study from January 2019 to June 2019.

MATERIALS AND METHODS: Prospective study was conducted in the department of surgery, Government Mohan Kumaramangalam Medical College Hospital, Salem. This includes 50 cases of snakebite cellulitis and its outcome were studied in one year period.

OBSERVATION: Out of 50 cases of snakebite cellulitis 31 were males and 19 were females. In this most common age group between 21-30 years (14%), 31-40 years (22%), 41-50 years (34%), 51-60 years (24%), 61-70 years (6%). Majority of patients (73%) had Snake bite on lower limbs. Patients improved from conservative treatment (76%). Patients developed compartment syndrome (24%) and underwent fasciotomy (24%) followed by wound debridement (8%), amputation (4%).

CONCLUSION: Cellulitis is dreadful complication of snake bite. Early intervention with ASV and identification of compartment syndrome reduces the morbidity and mortality of the patients.

KEY WORDS: Snake Bite, ASV, Compartment Syndrome, Fasciotomy.

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I. Introduction

Snake bite is a common global burden in the society. Its morbidity and mortality depends on the timing of intervention. Most feared complication is compartment syndrome. Hence early administration of ASV and identification of the compartment syndrome helpful in reducing the mortality, morbidity and economic burden of the people.

AIM AND OBJECTIVES:

To study the incidence of compartment syndrome, fasciotomy, wound debridement and amputation rate among snake bite patients.

MATERIAL AND METHODS:

Study design - prospective non randomised study

Study group – Over a period of 1 year, 50 patients admitted with signs of cellulitis secondary to snakebite were taken up for the study from January 2019 to June 2019.

INCLUSION CRITERIA

All the patients with signs of cellulitis secondary to snake bite having noticed the offending snake.

EXCLUSION CRITERIA

Cases with signs of cellulitis secondary to Bites due to other poisonous Creatures.

Doubtful cases of snake bite with or without definite history or acute onset signs and symptoms of envenomation are excluded from the study

Not willing for study.

STUDY METHOD INSTITUTED:

From January 2019 to June 2019, study was conducted to know the incidence of compartment syndrome, fasciotomy, wound debridement and amputation rate among snake bite patients. All patients were monitored from day of admission till the day of discharge by team of emergency care specialists, surgeon, pathologists and radiologists.

Patients were monitored serially with clotting time, Doppler study to know the efficacy of the ASV and reduce the morbidity of the patients.

II. Results

In our study 50 cases of snakebite with features of cellulitis observed clinically for outcome measures including conservative management, fasciotomy, wound debridement and amputation

TABLE 1: GENDER WISE DISTRIBUTION OF PATIENTS:

	FREQUENCY	PERCENTAGE
MALE	31	62%
FEMALE	19	38%
TOTAL	50	100%

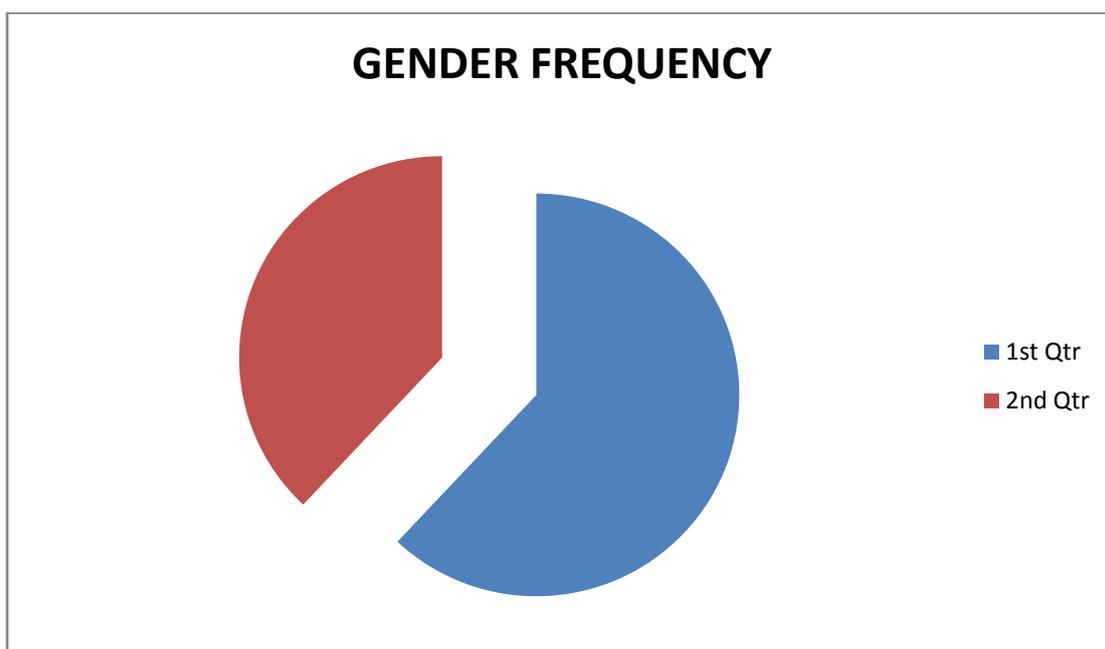


TABLE 2: AGE DISTRIBUTION:

AGE	FREQUENCY	PERCENTAGE
21-30	7	14
31-40	11	22
41-50	17	34
51-60	12	24
61-70	3	6
TOTAL	50	100

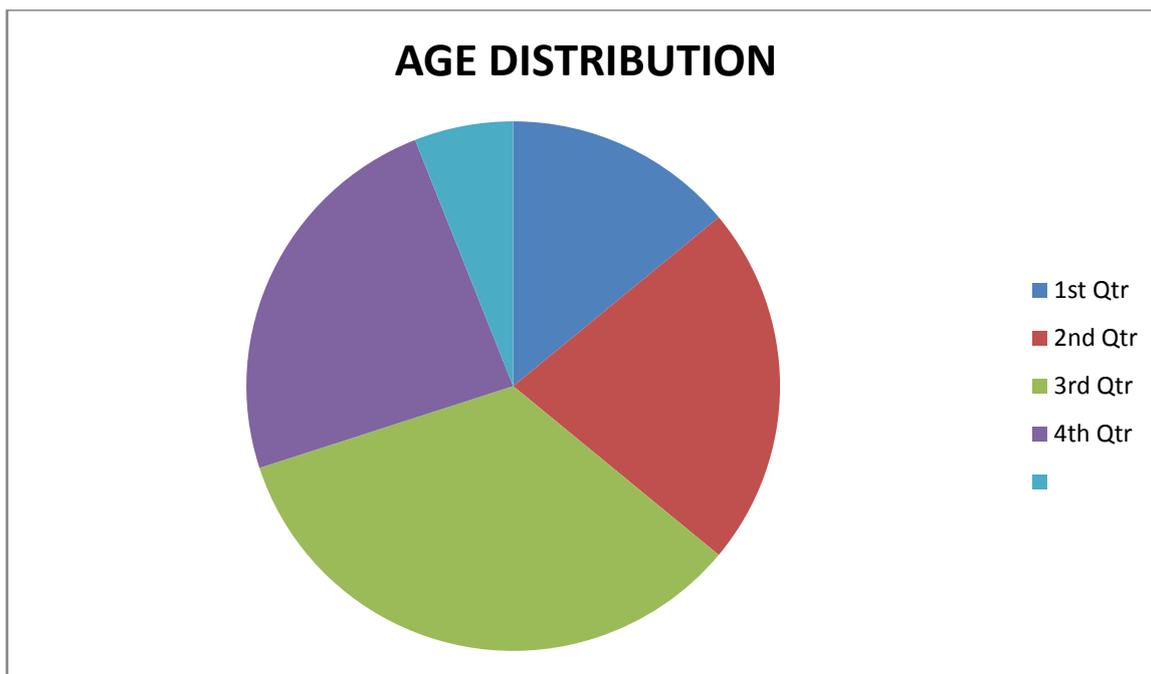
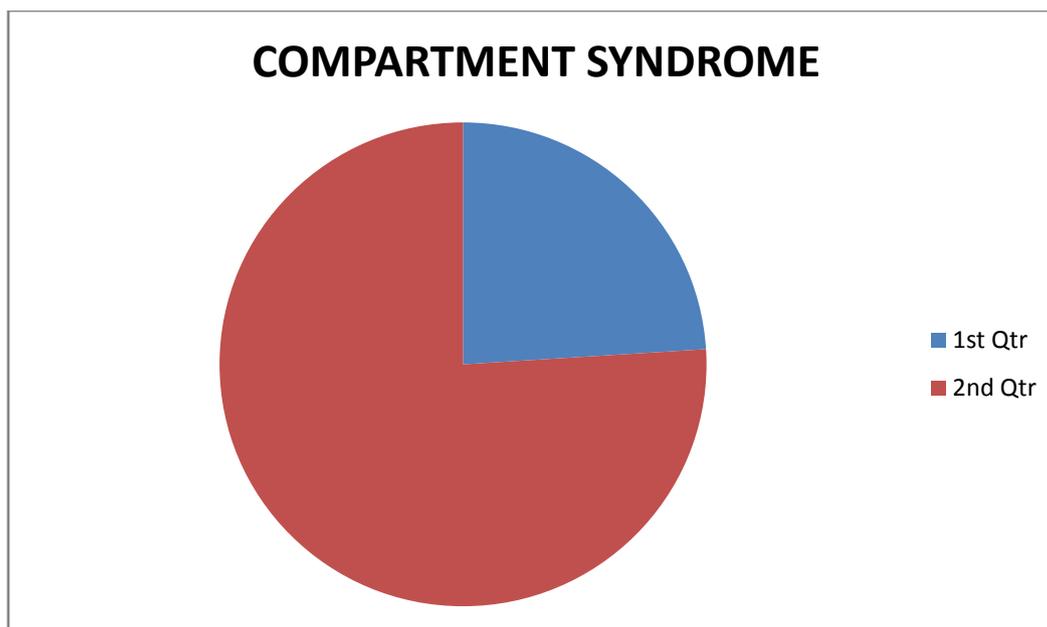


TABLE 3: FREQUENCY OF COMPARTMENT SYNDROME:

COMPARTMENT SYNDROME		
	FREQUENCY	PERCENTAGE
YES	12	24
NO	38	76
TOTAL	50	100



Out of 50 patients 12 patients went for compartment syndrome. Other 38 patients managed conservatively and discharged.

TABLE 4: FREQUENCY OF FASCIOTOMY:

FASCIOTOMY		
	FREQUENCY	PERCENTAGE
YES	12	24
NO	38	76
TOTAL	50	100

All patients with compartment syndrome under fasciotomy as the next surgical procedure.

TABLE 5 : FREQUENCY OF WOUND DEBRIDEMENT:

WOUND DEBRIDEMENT		
	FREQUENCY	PERCENTAGE
YES	4	33
NO	8	67
TOTAL	12	100

Out of 12 patients, 4 patients with fasciotomy underwent further wound debridement.

TABLE 6: FREQUENCY OF AMPUTATION:

AMPUTATION		
	FREQUENCY	PERCENTAGE
YES	2	17
NO	10	83
TOTAL	12	100

Out of 12 patients , 2 went further for amputation.

TABLE 7: DURATION OF HOSPITAL STAY:

DURATION OF STAY	
CONSERVATIVE & ARV	7+/- 3
COMPARTMENT SYNDROME	14+/-4

Hence patients with compartment syndrome have prolonged stay of hospital. Hence morbidity of patients also increased.

III. Conclusion

Hence early identification and appropriate ASV measures,early intervention reduces the morbidity , mortality and economic burden of the people.

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