

When snakes strike, lives shatter

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Every year, snakes bite about 5.4 million people worldwide but the figure is likely a vast underestimation, given underreporting and patchy recordkeeping, officials say

On June 15, 2015, four-year-old Chepchirchir Kiplagat's life changed forever. Bitten by a snake as she slept, she permanently lost the use of the left side of her body.

Sleeping beside her on a mattress on the floor of their modest, mud-walled home, Chepchirchir's two-year-old sister Scholar was also bitten.

She did not survive.

"It was hard to tell what had happened because the children were crying from the pain," their father Jackson Chepkui, a 39-year-old livestock farmer, told AFP at home in the tiny village of Embosos in Kenya's remote western Baringo county.

"We saw two blood spots on her (Chepchirchir's) wrist, that's how we were able to conclude that they were bitten by a snake."

With tiny Scholar no longer breathing, Chepkui scrambled to save his surviving daughter.

Embosos does not have its own clinic, and the frantic father struggled to find a motorcycle taxi to take them to the nearest town: Marigat about 30 kilometres (18.6 miles) away.

They finally arrived at about 1:00 am—some five hours after the child was bitten—only to find the clinic had no antivenom.

They set off again for the town of Kabarnet, another 40 km away, again to find no stocks of the lifesaving serum.

Finally, Chepchirchir was brought to a hospital in the city of Eldoret, a further 90 km away, by 5:00 am.



An estimated 81,000-138,000 people die of snakebites annually, according to the World Health Organization

The little girl was in hospital for two months and suffered permanent damage. Of school age now, she requires a wheelchair her family cannot afford.

Every year, snakes bite about 5.4 million people worldwide, of whom up to 2.7 million experience "envenoming"—when the animal transfers its poison through its fangs.

This number is likely a vast underestimation, given underreporting and patchy recordkeeping, officials say.

An estimated 81,000-138,000 people die of snakebites annually, according to the World Health Organization (WHO), while about 400,000 survivors suffer permanent disabilities and other nasty aftereffects.

Snake venom can cause paralysis that stops breathing, bleeding disorders that can lead to fatal haemorrhage, irreversible kidney failure and tissue damage that can cause permanent disability and limb loss.

Most snakebite victims live in the world's tropical and poorest regions, and children are worse affected due to their smaller body size.

This one won't bite

The fate of victims like Chepchirchir and her little sister is avoidable, insisted Royjan Taylor, director of the Bio-Ken venomous snake centre in Watamu on the Kenyan coast.

Even simple barriers such as mosquito nets around beds can repel the slithering reptiles, while easy access to trained medical staff and species-specific antivenoms can save thousands of lives.

Figures on antivenom availability today are hard to come by, but a report by Nick Brown of the Global Snakebite Initiative a few years ago estimated it could be as low as 2.5 percent of what is needed, with the majority of African countries having no effective or affordable antivenom at all.



The WHO says that about 400,000 survivors suffer permanent disabilities and other nasty aftereffects of snakebites

And a recent study of more than 100 clinics in Kenya's southern Kilifi county revealed that nearly 90 percent of staff had had no training in snakebite treatment.

"Because it (a snakebite) can't be transmitted (like a disease), people tend not to look at it seriously. But we see so many snakebites, we see so much suffering because people lose limbs, they lose a leg" for something as random as "stepping on a snake," said Taylor.

During a visit by AFP, the Bio-Ken centre receives a call on a dedicated telephone line that immediately jolts the team into action: a snake has

been spotted.

The call came from Emmanuel, 23, who waits for the team, machete in hand, at the spot where he last saw the reptile while locking his goat in its pen.

Moments later, Taylor and a colleague each grab an extremity of the snake using long pincers, and with a choreographed swoop, place it in a special box.

Today's find: an African puff adder—the same type that bit Chepchirchir and Scholar.

"This one was well hidden" under piles of dead leaves, said Taylor. "At least this snake won't bite anybody here."

The captured snakes are released into national parks, far from populated villages and towns. The poison of some is extracted for use in antivenom production.

Neglected

Kenya boasts some of the world's deadliest snakes, key among them green and black mambas and spitting cobras.



Last month, a dedicated working group set up by the UN's public health organ unveiled a strategy for halving snake bite deaths by 2030

And as in other poor, rural areas of Africa, Latin America and Asia, venomous snakes pose a public health risk that experts say has been neglected for far too long.

Things may finally be changing.

On February 21, a dedicated working group set up by the UN's public health organ unveiled a strategy for halving snake bite deaths by 2030.

In its report, the group slams policymakers and drug developers for turning a blind eye to the issue.

"Like many diseases of poverty, snakebite envenoming has failed to attract requisite public health policy inclusion and investment...", the authors state.

"This is largely due to the demographics of the affected populations and their lack of political voice."

The working group's plan envisions making 500,000 antivenom treatments available in sub-Saharan Africa every year by 2024, rising to three million per year globally by 2030.

WHO will work to boost production of the serum, improve regulatory control and reinvigorate the market by ensuring that safe and effective products are available, the report says.

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