

SNAKEBITE FACT SHEET

Identification of plants and animals can sometimes be challenging. With snakes, the consequences of being wrong can be very serious. Six venomous snakes are native to South Carolina and Georgia; five occur in the CSRA, and most of them can be confused with nonvenomous snakes that look similar. You can easily recognize some, but only through experience and looking at live specimens can you learn to identify snakes on the spot. If you see an unknown species of snake, it is best to treat it as venomous and leave it alone if at all possible.

CHANCE OF ENCOUNTERING A SNAKE

Most habitats in rural areas in the Southeast are home to several species of snakes. People who spend a lot of time in wooded areas, or near lakes, streams or rivers will more than likely encounter some type of snake. The probability of encountering a snake can also depend on several environmental factors. Temperature is the most influential factor affecting the movement of snakes and most other reptiles. During a warm spell in the winter months you

may see a snake, but a cold spell in March or April can inhibit their activity. Snakes breed and reproduce during the spring and fall months, making these mate-seeking times of the year the most active periods for snakes. Also snakes have preferential times during the day in which they are more active;



some prefer to move during the middle of the day while others are more crepuscular or nocturnal.

PROBABILITY OF A SNAKE BEING VENOMOUS

There are approximately 40 species of snakes in Georgia and South Carolina. Only six of these are venomous; the rest are virtually harmless.

There are no rules to follow to tell whether you are

more likely to encounter a venomous snake or a non-venomous snake. The season of the year, locality within a state, type of habitat, time of day and weather conditions can influence what type of snake you may encounter.

CHANCES OF BEING BITTEN BY A VENOMOUS SNAKE AFTER ENCOUNTER

Many snakebites happen after you see the snake and while you can still avoid the bite. If you are not completely positive about what type of snake it is, leave it alone! Attempting to kill a snake greatly increases the chances of being bitten. Many bites result from a lack of knowledge and respect for snakes. Children are more likely to be bitten by picking up a snake out of curiosity. But many adults who pick up specimens, thinking they know how to do so safely, are probably going to be bitten as well. Snakebites can also occur when you think an animal is dead or non-venomous and you pick it up. The possibility of being bitten by an unseen snake is very real, but after you see a snake the bite is still avoidable.

HOW DANGEROUS WILL THE BITE BE?

Determining the seriousness of a bite after a victim is struck is very difficult. A study of more than 1,300 cases in the southern United States shows that one-fourth of the bites received from venomous snakes are virtually harmless, and two-thirds of the snakebite victims showed little or no effect from being bitten. Only 10 percent of the bites that were serious may have caused extensive tissue damage or death. It is encouraging to know that only one in every 660 venomous snakebite cases in the United States has resulted in death.

You should consider a couple of variables when judging the seriousness of a snakebite. The type of snake can help determine if the bite may be very serious. A bite from a large diamondback rattlesnake should be more feared than a copperhead; bites from copperheads in the United States in the past 40 years have resulted in no

deaths. Also, if a rattlesnake recently killed a prey item, its venom supply would be greatly reduced. Other variables include how many fangs penetrated, how much venom was injected, where on the body the victim was bitten and differing physiological reactions among people. You should give all bites medical attention.

SNAKEBITE FIRST AID

If you improperly treat a snakebite it can greatly increase the severity of the bite. It is much better to under-treat a bite than to over-treat one. Because of differences in medical opinion on the proper treatment of snakebite, there is not a clear guide to follow. All physicians agree that first aid should follow these measures: Do not drink or eat anything including alcohol, stimulants or medicine. Do not run, but stay still and calm. Get to a hospital as quickly as possible.

You should carefully consider the more traditional first aid for snakebite victims by looking at the benefits and costs of each method. Incision and suction was common at one time, but because of the possibilities of infection and severing tendons, veins or arteries, this method could be very dangerous. Constriction bands are also used in first aid. But while they retard the movement of venom, they also concentrate it in one area, which can cause extensive tissue damage. Cooling with ice packs will reduce the pain, but it will also concentrate the venom in one area. Giving antivenin is a method that should be used only in a hospital. Administration in the field without medical help nearby could result in anti-phylactic shock and infection. The best first aid is to wash the wound and immobilize the area, keeping it lower than the heart if possible. Keep the victim calm and seek medical attention immediately.

This information is provided as a public service by The University of Georgia's Savannah River Ecology Laboratory located on the Savannah River Site near Aiken, S.C. SREL operates under a cooperative agreement with the U.S. Department of Energy. For more information about SREL, you may call Outreach at (803) 725-0156 or Public Relations at (803) 725-2473.



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