

RBS bite symptoms can be distressing but not life threatening. Analgesia is the mainstay of treatment. The role of RBS AV has been questioned.

RBS bite envenoming is a diagnosis based on clinical features and circumstances. RBS envenoming is not life-threatening.

Clinical features:

Local:

- Bite may not be felt initially but can cause increasing pain over minutes to hours, become severe and may last days
- Pain may radiate proximally from affected limb but also generalized to involve abdomen, chest, and back
- Local erythema, sweating & piloerection may be present
 Systemic:
- Sweating unusual distribution such as bilaterally below knees
- Nausea, vomiting, headache, lethargy
- Mild tachycardia and hypertension
- Irritability, agitation, mild fever and priapism are more common in paediatric population (infants may present with undifferentiated pain, irritability and distress).

Duration of symptoms may persist for hours or up to 5 days. Symptoms rarely persist for greater than 1 week.

AUSTIN CLINICAL TOXICOLOGY SERVICE GUIDELINE

Management

Reassure patient as condition is not life threatening.

First Aid: Ice-pack to bite site. Do not apply pressure bandage and immobilisation

<u>Analgesia</u>

- Paracetamol and ibuprofen
- If pain not adequately controlled, add oxycodone
- If pain not adequately controlled, for parenteral analgesia and consider RBS Antivenom (AV)

<u>RBS Antivenom (see separate RBS Antivenom guideline)</u>- discuss with Clinical Toxicologist

- Efficacy has been questioned and use has become controversial.
- A questionable history or atypical clinical features should generally NOT receive RBS AV
- Pain that is adequately controlled with analgesics does NOT require RBS AV
- Patients **must** be aware of risk/benefit for a condition that is not life threatening & self-resolving.
- Risk: < 5% allergic reactions (anaphylaxis is rare); < 10% serum sickness (fever, rash, arthralgia,
- myalgia) within 14 days. Serum sickness is self-limiting but prednisolone may ameliorate symptoms.
- **Benefit:** possible earlier resolution of pain; obviate need for parenteral analgesics and hospital stay.