

Treatment of yellow scorpion (*Leiurus quinquestriatus*) sting: A case report

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Abstract

Objectives: To report the treatment given to a 26-year-old Air Force medic who was stung twice by a yellow scorpion (*Leiurus quinquestriatus*) while stationed in Iraq and to describe the problems and issues related to the use of the scorpion antivenin.

Patient case: The patient presented 2 hours after envenomation to the local military treatment facility, where she was minimally symptomatic initially. Shortness of breath and anxiety developed, and the patient was sedated, intubated, and evacuated to a large Air Force medical facility for more advanced care. Vasopressor support was required during flight. At the medical facility, antivenin was administered, and the patient's cardiac condition was stabilized with norepinephrine drip, mild hydration, and vasopressor support. A second dose of antivenin diluted in sodium chloride and further pressor support were required. ST-segment depression eventually resolved, and the patient was gradually taken off norepinephrine and extubated. She recovered fully within 2 weeks and returned to active duty.

Discussion: Because the antivenin used is not licensed by the Food and Drug Administration, informed consent was needed; however, it could not be obtained because the patient was unconscious, intubated, and in a life-or-death situation. Antivenin selection is based on the species of scorpion and symptom severity; therefore, the scorpion should be, with great care, killed for identification. In the military setting, inventory control, storage, and accountability are vital issues surrounding antivenin use, and these are discussed in this article.

Conclusion: Immediate action and effective communication, along with timely antivenin administration and well-equipped intensive care facilities, were integral in saving the life of this victim of a yellow scorpion envenomation. All level 3 facilities in Southwest Asia must be familiar with ordering, administering, and documenting this antivenin because it is difficult to obtain and infrequently available.

Keywords: Scorpion envenomation, antivenin agents, case report.

J Am Pharm Assoc. 2007;47:616–619.

doi: 10.1331/JAPhA.2007.07051

Received May 7, 2007, and in revised form August 3, 2007. Accepted for publication August 6, 2007.

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Disclosure: The authors declare no conflicts of interest or financial interests in any products or services mentioned in this article, including grants, employment, gifts, stock holdings, or honoraria. The views presented here are those of the authors and do not necessarily reflect those of the U.S. Air Force or Department of Defense.

Acknowledgments: To the reviewers of this article for their valuable input and to the senior leadership of the 332nd Expeditionary Medical Group for their support of this project.