[ID-P#028] Snake Venom Ophthalmia: A Case Report

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Snake bites constitute a major but neglected public health problem. Snake venom can also cause ocular envenomation (snake venom ophthalmia), a rare ocular condition, caused by venom of spitting cobra ejected into the ocular surface of its victim. This condition remains to be under reported, poorly documented and possibly mismanaged acute medical emergency. If not promptly treated, this condition may lead to irreversible blindness.

27 year old male came in due to eye pain, irritation, tearing but no blurring of vision. He stumbled a black cobra from their ceiling and tried to catch with his bare hands. It crept near him and spat venom directly into his eyes. Immediately, he washed his eyes with tap water & sought consult. Vitals were stable with erythematous right eye with minimal blepharospasm; no lid nor periorbital edema. Visual acuity was counting fingers at two meters in both eyes. EOMS and convergence were intact with no cranial nerve palsy. IOPs were digitally normal in both eyes. Systemic evaluation was unremarkable. Fluorescein staining nor slit lamp examination were not done since they were inaccessible. Patient's eyes were immediately irrigated with saline solution for 20 minutes. Blepharospasm improved after irrigation. Patient was discharged on analgesia & topical antibiotics.

Spitting cobras, like the Philippine cobra eject their venom to their enemies as a defensive strategy. This "venom spitting" aimed at ejecting venom forcefully into the victim eyes by fast undulating head movements while spewing the venom, thereby increasing the coverage area. The resulting ocular injury is called ocular envenomation, also known as snake venom ophthalmia.

Antivenom is neither necessary nor recommended. Diagnosis is primarily clinical but the use of slit lamp may identify the extent of ocular injury. Immediate copious irrigation of the affected eye remains to be the cornerstone of management.