[ID-P#137] A Rare Case: Bitten by *Bungarus fasciatus* in Perak, Malaysia

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Introduction: Bungarus fasciatus snakebite is a rare case entity in Malaysia. We describe a case of confirmed Bungarus fasciatus (banded krait) snakebite with systemic neurotoxicity, successfully treated with neuropolyvalent antivenom with good neurological outcome.

Case Report: A 29 year-old Malay gentleman had been bitten by a snake while he was cutting grass at his home garden at night. A curiosity of wanting to relocate the snake leads him to get bitten once over his right hand at third webspace region. Clinical toxicologist identified the snake as juvenile Bungarus fasciatus. He developed subtle true ptosis and dysarthria that had been recognize by the emergency medicine registrar 90 minutes post bite and prompt five vials of neuropolyvalent antivenom was administered. He develop anaphylactoid reaction that resolved with conventional treatment, and the antivenom able to be completed uneventfully.

Discussion: Confirmed Bungarus fasciatus snakebite is a rare case that can be encountered in Malaysia. Based on our Remote Envenomation Consultancy Service (RECS) Database from 2017 till 2021, only small number of cases been consulted involving confirmed krait bite, particularly Bungarus fasciatus. This maybe because the nature of the snake that almost always will avoid confrontation with human being, unless being threatened. After bitten by a krait, although initially the patient might be asymptomatic, patient should be monitored closely in resuscitation area so that the subtle neurotoxicity manifestation can be detected as soon as possible so that patient do not progress further to full blown neurotoxicity. Early administration of appropriate antivenom is mandatory due to the pathophysiology of the venom component at the neuromuscular junction that involved irreversible destruction of the pre synaptic receptor membrane.

Conclusion: Early krait bite patient presentation need to be closely monitored so that the earliest signs of neurotoxicity can be picked up. Timely appropriate antivenom is mandatory to treat the patient.