

TRANSFORMING TOXICOLOGY LANDSCAPE FOR SAFER AND SUSTAINABLE TOMORROW

POSTER PRESENTATIONS

[ID-P#095] Snakebite Clinic at Chittagong Medical College Hospital: Establishment of a Hub and Spoke Model of service delivery

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Background: Snakebite is a medical emergency which warrants immediate evaluation and management. Most of these events occur in rural areas. Unfortunately, most of the patients are used to be referred to tertiary level hospital due to fear of complications like respiratory and renal failure which cannot be managed at a peripheral primary or secondary hospital. In Bangladesh majority (~80%) snakebites are non-venomous. These patients can easily be screened out at peripheral level and managed. Even patients with envenomation can also get initial antivenom and/or supportive medication at peripheral hospitals and later referred to higher center when needed. This needs a coordinated setting among tertiary and peripheral hospitals.

Objective: The system was developed with the objective of providing necessary emergencies and complete care, when possible, at peripheral hospitals and coordinated care for severe cases.

Methodology: A 'Snake bite clinic' was established in 1993 in a medicine ward in Chittagong Medical College Hospital, with the aim to manage all the snakebite patients uniformly, promptly, 24/7, with better documentation, reporting, and publication. A 'Hub and Spoke model' has been introduced recently among this clinic and the subdistrict hospitals of Chittagong and district hospitals of adjacent districts, CMCH acting as the hub providing necessary advisory service to other centers. Results: In the last five years a total of 5,256 snakebites cases have been admitted in this snakebite clinic. Out of this 66.22% were male and 33.78% were female. Among the total snakebite patients 25.4% were venomous. Green-pit viper, Cobra and Krait are the main venomous snakes and deaths in the last five years was 10.

Conclusion: The 'Hub and Spoke' model has reduced the case load in CMCH and resulted in better management at peripheral hospitals and a coordinated management of patients with organ failure and reduced the financial burden of the rural patients and ultimate improvement of the management of snakebite.