KENYA SNAKEBITE
RESEARCH & INTERVENTION CENTRE

SAVING LIVES & LIMBS

www.ksric-asrg.org
ABOUT US

Kenya snakebite research and intervention centre (K-SRIC), situated within the Institute of Primate Research (IPR), is a centre of excellence in snakebite research and interventions. K-SRIC’s key strategic objective is to undertake multi-disciplinary research activities leading to better Diagnosis and therapies for snakebite, while working towards community-based model intervention systems with the primary goal of saving the lives and limbs of those afflicted with snakebites.

Snakebite is a WHO-listed Neglected Tropical Disease that kills 32,000 people residing in some of the most disadvantaged rural communities of sub-Saharan Africa and leaves over 90,000 surviving victims with permanent physical disabilities/disfigurements. The most economically important and educationally-vulnerable 10–30 year olds suffer the highest rates of snakebite mortality and morbidity.

It is envisaged that K-SRIC’s research, intervention systems and protocols will significantly improve snakebite management in Kenya and could be adopted throughout sub-Saharan Africa to reduce the continent’s high levels of snakebite-induced death and disability.

Kenya Snakebite Research and Intervention Centre
Institute of Primate Research
End of Karen Road
P.O. Box 24481 Karen 00502
Nairobi, Kenya
1. **Community**

The community identifies snakebite victims and contacts the nearest community health volunteer.

2. **Community health volunteers (CHVs)**

Receive call from victim and offer first aid as directed by paramedic.

3. **Nurse/Paramedic**

Move to victim’s location, administer first aid and move victim to nearest health facility.

4. **Motorcycle ambulance**

Rides from victim’s location with paramedic to the receiving hospital.

5. **Local Health facility**

Offer emergency care, assess need for Snake Anti-venom and refer for further management.

6. **Referral Hospital**

Victim receives snake anti-venom and further medical attention.

7. **Back to community**

Nurse follow up on victim’s progress and addresses any challenges faced.
**FIRST AID DO’S AND DON’TS**

**When bitten by a snake...**

**DO**
- Move victim from danger
- Call the medical response number.
- Remove all jewelry
- Circle the site of the bite with a pen and note the time
- Immobilize the affected limb.
- Help calm the patient.
- Position the victim while lying on the side, to ensure an open airway
- Help move the victim into the ambulance, once it arrives.

**DON’T**
- Panic (and neither should the victim)
- Pursue or try to kill the snake
- Apply tourniquet or tight clothing
- Use the affected limb
- Use traditional methods such as herbs or black stones to try and extract the venom

**When spit in the eyes**

**DO**
- Irrigate the eye with a lot of water/milk/urine
- Call the emergency number
- Put a pad over the affected eye

**DON’T**
- Rub the eye
Never try to kill or handle a snake.

Do not put your hands or feet in holes, hollow logs or rock cleavages.

Wear closed shoes.

Control vegetation around your home.

Keep the compound clean and tidy.

Keep water source, poultry and other farm animals a safe distance from the house.

Use raised beds and mosquito nets when sleeping.

Be alert at all times in the bush, especially in the early morning when snakes are more likely to be sunning themselves.

Use a torch when walking around at night.
<table>
<thead>
<tr>
<th>NAME</th>
<th>BITE SIGNS AND SYMPTOMS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Red Spitting Cobra</strong></td>
<td>• Local swelling and blistering</td>
</tr>
<tr>
<td>Orange-red, with a black throat band</td>
<td>• Local necrosis</td>
</tr>
<tr>
<td></td>
<td>• Burning pain and redness in eye envenomation</td>
</tr>
<tr>
<td><strong>Large Brown Spitting Cobra</strong></td>
<td>• Severe, progressive swelling</td>
</tr>
<tr>
<td>Different shades of brown.</td>
<td>• Necrosis</td>
</tr>
<tr>
<td></td>
<td>• Burning pain and redness in eye envenomation</td>
</tr>
<tr>
<td><strong>Black Mamba</strong></td>
<td>• Tingling of the tongue and lips with a metallic taste.</td>
</tr>
<tr>
<td>Gray with a black mouth.</td>
<td>• Drooping eye lids.</td>
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<tr>
<td></td>
<td>• Descending paralysis.</td>
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<tr>
<td><strong>Puff Adder</strong></td>
<td>• Immediate severe pain, swelling and blistering.</td>
</tr>
<tr>
<td>Light brown, overlaid with a pattern of dark brown to black U-shaped bands</td>
<td>• Necrosis with massive muscle and tissue damage.</td>
</tr>
<tr>
<td></td>
<td>• Continuous bleeding from bite wound, mouth, nose and other orifices.</td>
</tr>
<tr>
<td><strong>Boomslang</strong></td>
<td>• Bleeding from bite wound, gums, nose and other orifices.</td>
</tr>
<tr>
<td>Females brown, males green.</td>
<td>• Headache, nausea and sleepiness.</td>
</tr>
<tr>
<td><strong>Carpet Viper</strong></td>
<td>• Local pain and severe swelling.</td>
</tr>
<tr>
<td>Light brown, with pale crossbars along the back</td>
<td>• External and internal bleeding</td>
</tr>
</tbody>
</table>
## NON-VENOMOUS SNAKES IN KENYA

<table>
<thead>
<tr>
<th>NAME</th>
<th>Image</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kenya sand boa</td>
<td><img src="image1.jpg" alt="Image" /></td>
</tr>
<tr>
<td>Rufous beaked snake</td>
<td><img src="image2.jpg" alt="Image" /></td>
</tr>
<tr>
<td>Link-marked sand snake</td>
<td><img src="image3.jpg" alt="Image" /></td>
</tr>
<tr>
<td>Speckled sand snake</td>
<td><img src="image4.jpg" alt="Image" /></td>
</tr>
<tr>
<td>Red Spotted Beaked Snaked</td>
<td><img src="image5.jpg" alt="Image" /></td>
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Contact Us

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