experience suggests that they will readily accept such advice. I agree that it is hard to find a case where a person suffering an epileptic seizure underwater has resulted in a death but I would regard it as impractical to suggest that someone who is on medication for epilepsy be allowed to dive.

Question:

Diabetics may sometimes have changes in conscious level. Should they be allowed to dive?

Dr D Brownbill

A discussion on the management of diabetes is perhaps not appropriate here but it is worth commenting on the prospects of a diabetic suffering a hypoglycaemic attack whilst diving. Such a person who has decided to dive should take precautions by omitting their normal dose of insulin beforehand and they should take some sugar beforehand and even carry a little plastic bag with some sweets whilst diving because they will have warning of an impending attack and they will have learnt to recognise such warnings very quickly. The careful and experienced diabetic, with appropriate advice, should therefore be able to dive but again his buddy should be aware of the problems.

Dr David Brownbill is the Senior Neurosurgeon at the Royal Melbourne Hospital.

A CASE REPORT - SEA SNAKE BITE

Chris Acott

I do not wish to repeat myself and give another talk on sea snake envenomation, however we had another sea snake bite late last year.

A 19 year old youth was swimming in some murky water when he thought he saw a stick on the bottom. He dived down and picked it up. The stick turned around and bit him on his forearm in two places. One bite was at the wrist and the other on the upper aspect of his forearm.

First aid measures were applied immediately, and he was brought into hospital. When the crepe bandage was removed there were no signs of envenomation. He had first degree heart block on his ECG, and I began to rub my hands with glee that it might have been caused by the venom, but disappointingly it turned out to be congenital.

This was the third sea snake bite that has come to the Rockhampton Base Hospital in the past three years. Only a little girl required treatment for envenomation. This agrees with Reid's original work which said that only a one-third of cases show signs of envenomation.

The girl was bitten on the foot, again the snake meant business. Again Reid's work was verified as she showed signs of a massive envenomation. The symptoms occurred within 2 hours (Reid's 2 hour rule) and required 8,000 units of the antivenom.

Reid divided his cases of sea snake envenomation into 'serious' and 'non-serious' by his 2 hour rule. Serious

envenomation was indicated by myalgic pains especially of the neck muscles, trismus, ptosis, ophthalmoplegia, myoglobinuria and a leucocytosis of greater than 20,000, all occurring within 2 hours, if no first aid measures had been applied. Serious cases required up to 10,000 units of the antivenom, while the non-serious required only about 3,000 units.

Sea snake venoms are either neurotoxic or myotoxic or a combination of both. The neurotoxic venom acts either pre- or post-synaptically or with a combination of both. The myotoxic venom causes muscle destruction with myoglobinuria and myoglobinanaemia which may lead to renal failure.

One should use either sea snake antivenom or Tiger snake antivenom. As a last resort poly-valent antivenom can be used.

SPUMS NOTICES

OBJECTS OF THE SOCIETY

To promote and facilitate the study of all aspects of underwater and hyperbaric medicine.

To provide information on underwater and hyperbaric medicine

To publish a journal.

To convene members of the Society annually at a scientific conference.

MEMBERSHIP OF SPUMS

Membership is open to medical practitioners and those engaged in research in underwater medicine and related subjects. Associate membership is open to all those, who are not medical practitioners, who are interested in the aims of the society.

The subscription for Full Members is \$30.00 and for Associate Members is \$20.00.

Membership entitles attendance at the Annual Scientific Conferences and receipt of the Journal.

Anyone interested in joining SPUMS should write to:

Dr Chris Acott, Secretary of SPUMS, Rockhampton Base Hospital, Rockhampton QLD 4700.

NOTES TO CORRESPONDENTS AND AUTHORS

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