A Queensland Sea Wasp Incident

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On 19 March 1977 at 3.10 pm this patient aged 6 and a half, presented to the Ingham Casualty Department with stings predominantly on her right leg but also on her right arm and left leg. These were purplish in appearance and had blistering over the other side of her right ankle. They had the characteristic laddering appearance of a Sea Wasp jelly fish sting.

Clinical Record

At 2.25 pm on the 19th March 1977 she was being towed through the water by both her hands by her aunt, in water about two or three feet deep. She began screaming and her Aunt noted that she had stings down her leg, so pulled her from the water. Her father was called and within ten to thirty seconds of her being dragged from the water he had poured a large amount of Methylated Spirits over her legs. The ambulance was called and she was taken to the Ingham Casualty Department.

On admission she was in great distress and was given IV Sea Wasp Antivenene one ampoule, IMI Morphine 5mg, IVI Phenergan 5mg and Solu-Cortef 500mg IV and was placed on quarter hourly observations of respiratory rate, blood pressure, pulse rate, and level of consciousness. All Urine samples were to be tested for blood.

The actual stings of the sea wasp were removed from the wounds in the Casualty department after the patient had been sedated and washed down with more Methylated Spirits. These were not sent off to the laboratory but a positive "sea wasp" identification was made by Life Savers at Allingham beach who netted the area after the sting occurred.

At $4.15~\rm pm$ it was noted that her colour was quite cyanosed. On examination her chest was clear, but she was difficult to rouse. She was then given THA 5mg IMI plus 5mg IV. Her colour then improved as her respirations increased. She continued on IV Solu-Cortef 500mg fourth hourly and IV Dextro 3.5% six hourly, and Synalar 0.01% ointment was applied to the sting welts.

On the 20th March she was put on Phenergan 5ml orally four times a day, Panadol 5ml fourth hourly, PVK 5ml four times a day and the IV Hydro-Cortisone 10mg fourth hourly.

On 21st March the patient continued doing well and the skin lesions appeared to be healing well except for a large area of blistering around her right ankle. She was put on Condy's Crystals compresses third hourly (but not at night), and the Prednisone was reduced to $5 \, \text{mg}$ four times per day. She was continued on Phergan (sic) $5 \, \text{ml}$ four times daily.

From the 28th March the Prednisone was reduced by 5mg daily till it ceased. Following this her only treatment was Potassium Permanganate solution baths four times a day: she was discharged on this plus Phenergan 5ml three times daily.

On the 4th April the scars had decreased a great deal, with the worst area being around her right ankle where she had had the blistering.

The time of the incident is noteworthy as it was 19 days past the official end of the season for sea wasp stings. This may indicate that sea wasps do not have an ability to read calendars, or maybe we don't know as much about them as we thought.