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Cardiac arrest and atrial fibrillation in a patient after hump-nosed pit viper (*Hypnale hypnale*) bite

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Cardiac arrest and atrial fibrillation in a patient after hump-nosed pit viper (*Hypnale hypnale*) bite

Abstract:

A 42-year-old previously healthy male patient died 16 days after a proven hump-nosed pit viper (*Hypnale hypnale*) envenoming due to multi-organ failure. On admission he had cardiac arrest that recovered from cardiopulmonary resuscitation then developed atrial fibrillation which was reverted to normal rhythm by application of synchronized electrical cardioversion. He also had persistent coagulopathy and thrombotic microangiopathy comprising the triad of microangiopathic haemolysis, acute kidney injury and thrombocytopenia. This is the second reported case with cardiac complications following hump-nosed pit viper bites in Sri Lanka.

Introduction

Hump-nosed pit viper bite is a common environment hazard in Sri Lanka and the commonest venomous snakebite in the country (De Silva and Ranasinghe, 1983) accounting for 22-77% of all snakebites (De Silva, 1981; Kasturiratne et al., 2008). Recent taxonomic revision of the South Asian hump-nosed pit vipers revealed that there are three species of the genus *Hypnale* naming *H. hypnale*, found in both Sri Lanka and the Western Ghats of India, *H. zara* and *H. nepa*, both endemic to Sri Lanka (Maduwage et al., 2009). Out of these three species, *H. hypnale* is responsible for the most of bites because it is frequently encountered all over the island except in the peninsula of Jaffna in the north (Maduwage et al., 2013; Namal Rathnayaka et al., 2017a). Hump-nosed pit viper is considered as a deadly venomous snake along with cobra (*Naja naja*), Russell's viper (*Daboia russelii*), saw-scaled viper (*Echis carinatus*) and common krait (*Bangarus caeruleus*) [Iran et al, 2007]. On the other hand, World Health Organization categorized *H. hypnale* under category I of medical importance that requires antivenom (Anonymous, 2010). This is because its envenoming causes significant morbidity, disability and even fatalities (Kularatne and Ratnatunga, 1999; Joseph et al., 2007; Ariaratnam et al., 2008; Namal Rathnayaka and Ranathunga, 2016; Sellahewa and Kumararatne, 1994). The unpredictability of developing severe envenoming and complications is intriguing and requires reporting to strengthen the deadly nature of this snake. We

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