

Clinical Practice Guidelines:

Toxicology and toxinology/Envenomation – Spider

| Policy code | CPG_TO_ESP_0120 |
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| Date | January, 2020 |
| Purpose | To ensure a consistent approach to patients who have been exposed to a spider envenomation. |
| Scope | Applies to Queensland Ambulance Service (QAS) clinical staff. |
| Health care setting | Pre-hospital assessment and treatment. |
| Population | Applies to all ages unless stated otherwise. |
| Source of funding | Internal – 100% |
| Author | Clinical Quality & Patient Safety Unit, QAS |
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Envenomation – Spider

January, 2020

Spider bites are common. There are two important groups of spiders in Australia – funnel web spiders and redback spiders. All other spiders are rarely of any clinical significance.

Funnel-web spiders (Large black spiders)

Funnel-web spider envenomation is rare but potentially lethal. ^[1] All large black spiders should be assumed to be funnel-web spiders. Funnel-web spiders are found within southern Queensland up to approximately Gladstone and the mountain region near Mossman. ^[2]

Redback spiders

Redback spider bites are common, but rarely life-threatening. ^[1] Clinical features can be distressing for the patient and pain can be difficult to manage.

Funnel-web spiders

- Localised severe pain at bite site
- Puncture/fang marks are often visible
- Signs and symptoms of envenomation (may occur within 10 minutes):^[1]
 - **general:** nausea, vomiting, abdominal pain, headache
 - neurological: muscular spasm, numbness/tingling and fasciculations
 - autonomic: diaphoresis, salivation,
 piloerection, lacrimation, hypertension,
 tachycardia or bradycardia
 - cardiovascular: pulmonary oedema, myocardial injury
 - **central:** agitation, drowsiness, coma

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