FIELD HAZARDS TO LEPIDOPTERISTS: SPIDER BITES

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(Editors note: This is the first of several articles by Vernon Brou on similar subjects that will appear in future newsletters.)

At least 50 species of spiders have been implicated in bites to humans. Most toxic reactions in the United States are caused by the Black Widow Spider, Latrodectus mactans, which is endemic to practically the entire United States, and the Brown Recluse Spider, Loxosceles reclusus, especially in the central and midwest areas of the United States.

Most spider bite deaths are caused by the Black Widow Spider. The bite may result in sharp pain and bleeding, accompanied by nausea, vomiting, shock muscular cramping, and possibly convulsions. Recovery from the acute reaction phase is usually complete within three days. Although, in survivors, muscle spasms, nervousness, and abnormal burning sensation can last for months afterwards.

Treatment of the actual bite site is not helpful. Antivenin is not usually used today but intravenous medications for cramping and pain are usually given.

The Brown Recluse Spider produces a localized reaction at the bite site, with progressively severe pain within eight hours. The bite site usually forms a flaccid vesicle, is inflamed, without blood and is replaced with a black lesion within a week. The lesion separates within two to five weeks, leaving a poorly healed skin ulcer that may result in keloid formation.

Fatalities are rare, but occur as the result of blood coagulation. Signs and symptoms of a Brown Recluse Spider bite may include: Cyanosis, rash, blood reactions, nausea, vomiting, jaundice, weakness, fever, chills, malaise, and delirium. Treatment may include intravenous and intramuscular medications. Total excision of the lesion is debatable.

Should you be bitten by a spider, capture the arachnid if possible and seek immediate medical treatment.