Record of Bites from Pit-Vipers (Mapepires) from Trinidad, West Indies

Hans E.A. Boos

When I was researching the occurrence of snake bites for my book “The Snakes of Trinidad and Tobago” (Boos 2001), I interviewed several people who had been warded at the two main hospitals in Trinidad that handle these injuries. Almost all of the bites were from one of the two pit-vipers found in Trinidad - the Mapepire Balsain (*Bothrops atrox*).

Though the Mapepire Zanana, *Lachesis muta*, is reputed to be such a dangerous snake, I could find no living person in Trinidad who had been bitten by a snake that had been reliably identified as a Mapepire Zanana. Allan Rodriguez, from Sangre Grande, who handles snakes has reported being bitten by this species, although these incidents resulted from accidents while cleaning cages of snakes in captivity.

On 16 February, 2007, at about 1720 h, HH from Denmark, one of the guests staying at the Asa Wright Nature Centre in the Blanchisseuse/Arima Valley, was running along the road that joins the Centre to the main road. This access road runs through heavy jungle and secondary forest and bush.

When I interviewed HH about two days later at the Sangre Grande Hospital, she explained that she had been exercising by running approximately a half mile along this narrow roadway, and was sprinting the last two hundred yards back towards the Centre, when, on passing some low bushes at the side of the road, she felt something hit her on the outside of her left knee. She stopped, and looking back, saw a fairly “large” snake lying coiled in the afternoon dappled shade at the side of the road. She saw that she was bleeding from the spot where she had felt the blow.

She continued on to the Centre, where she reported that she had been bitten by a snake, and some members of the staff went immediately to the place where she said she had seen the snake. There they saw and captured a Mapepire Zanana, about 1.5 m long. HH was swiftly taken to the Sangre Grande Hospital, where she was attended to by the staff there, who are quite experienced in handling snake bite victims. She was given several ampoules of polyvalent anti-venin, which is effective against both pit-vipers found in Trinidad.

When I saw HH, she had been in hospital several days; the doctors were having a great deal of difficulty stabilizing her blood clotting factor. The doctors were going on the assumption that there had been more than one bite, as the site on her leg showed multiple puncture wounds.

I examined the site of the bite and saw that in fact there had been only one bite, but the snake must have hit her with full force, its jaws opened perhaps to almost 180 degrees, for the imprint of almost all the teeth of both the upper and lower jaws was clearly to be seen, as well as what appeared to be only one main puncture wound from the left fang of the snake. It was difficult to judge if the right fang had made contact with or punctured the skin. So powerful was the strike that even the palatine rows of teeth from inside the upper jaw were clearly imprinted in her flesh. There was massive bruising running up the underside of her thigh; this black and blue area seemed to extend well onto her buttocks.

About three weeks later HH was sent to Martinique, where she was given several transfusions to stabilize her blood clotting. I heard from her when she got back home to Denmark, thanking me for my concern and advice, and praising the good work of the hospital staff, for she said she was told by the doctors in Martinique that few people survive such a highly envenomed bite.

In my book (p.176) I describe the Zanana’s reputed habit of “biting high”. HH’s bite seems to bear this out, as the bite was delivered in an upward arc, making contact with her knee, which must have been approximately two feet off the ground and passing swiftly by as she sprinted those last few yards.

Coincidentally, while I was with HH on the day I visited her, I was informed that there was another snake bite victim, SC, in the nearby male ward, who had been bitten on 20 February, 2007. I went over to this ward and met and interviewed SC. He reported that he had not seen the snake that bit him as he was wading barefoot through ankle-deep water in the Valencia River. He felt a stinging sensation, and there was immediate pain, and swelling of the foot close to a set of small punctures on the side of his foot near the big toe. He felt faint and disoriented within minutes of the bite. These symptoms are also typical of the bite from the Mapepire Balsain.

**REFERENCE**


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