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## **Images in Infectious Diseases**

## Envenomation by a juvenile pit viper (*Bothrops atrox*) presumed to be dead

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Venomous snakes are capable of injuring humans even after experiencing potentially fatal injuries<sup>1</sup>. On October 1<sup>st</sup>, 2017, a 46-year-old-male patient was admitted to the Juruá Regional Hospital 30 minutes after being bitten by a "jararaca" snake (*Bothrops atrox*) (**Figures 1 and 2**) in Cruzeiro do Sul, state of Acre, Brazil. The victim reported sighting the snake on a secondary forest trail at 4 p.m., curled up with its head raised and tail vibrating, which is the characteristic defensive behavior of this species<sup>2</sup>. He cut the snake into three parts with two strikes of a machete. Assuming that the snake was now dead, he picked it up and was bitten on the index finger of his right hand (**Figure 3**). The snake was a juvenile female, measuring 59 cm in length



FIGURE 1: Bothrops atrox snake that caused the envenomation.

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FIGURE 2: Head of the Bothrops atrox snake that caused the envenomation.



FIGURE 3: Finger of the patient bitten by the Bothrops atrox snake.

and weighing 40 g It also had a transparent tail tip, which is characteristic of juvenile snakes<sup>3</sup>. The patient presented with pain, edema in one finger segment (which spread to the second segment on the next day), hematemesis, prolonged time coagulation (but with other normal laboratory data), and hypotension (700 mmHg x 600 mmHg). The patient was discharged from the hospital three days after the administration of three ampoules of anti-bothropic serum. Here, we present the case of a patient admitted to the hospital for a snakebite that occurred while he handled a juvenile pit viper (*Bothrops atrox*) presumed to be dead. Therefore, education on preventing snakebites should include warnings against handling recently killed snakes.

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