

CENTIPEDE BITE WITH COMPARTMENT SYNDROME: TO RELEASE OR NOT TO RELEASE?

Dominic C Bopulas¹, Mohd Shawal Sjahrial¹, Fadzly Ramidi¹

¹Hospital Duchess of Kent

Introduction: Insect bites are common and there had been multiple reports on bites by bees, scorpions and centipedes. Centipede bite commonly causes local reaction centering the bite mark with pain and swelling being the usual manifestation¹. However, centipede bite can also cause envenomation syndrome which may leads to myocardial ischaemia, rhabdomyolysis as well as anaphylaxis. So far, there had been no case reported in Malaysia about centipede bite and compartment syndrome.

Discussion: In this report, we present the case of a 36-year-old male who was bitten by a centipede and was subsequently complicated with compartment syndrome of the finger. The patient was initially presented with swelling over the ring finger which progressively worsen up till the mid-forearm. Assessment of the finger noted that the finger pulp was cyanosed with prolonged capillary refill time and cool to touch. There's also paresthesia over the whole finger with extreme tenderness. He was then diagnosed to have compartment syndrome of the finger based on the clinical assessment done. The patient then undergoes compartment release of the finger. Immediately after the release, the finger became pink with a capillary refill time of less than 2 seconds. He was observed in the ward for a few days before being discharged. Throughout his hospital admission, the wound is dressed using normal saline solution and remained clean and viable. Prior to discharge, the swelling subsided significantly, the sensation is restored with improvement in the ROM of the finger.

Conclusion: In a center with limited resources, it is important to rely on the clinical assessment and judgement of the clinician to make decision in managing cases of insect bites.