
SCORPIONS

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Are all scorpions dangerous?

There are a large variety of scorpion species in the desert Southwest and United States, but only one is potentially dangerous to humans. This is the Arizona bark scorpion (*Centruroides sculpturatus*), a small yellowish-brown scorpion (up to 2-3 inches) that possesses the ability to climb, unlike other species. This allows it greater access to homes and interaction with people. The Bark scorpion uses a stinger located at the end of its tail to inject a neurotoxic venom that may cause serious illness in young children.

How can I avoid getting stung by a scorpion?

Know where scorpions live: Unfortunately, living in or visiting the desert brings you into the scorpions' natural habitat. Bark scorpions are active in the warm-weather months, and are more prevalent near open wilderness areas and preserves. They often enter homes and since they can walk across ceilings and up walls, they may drop into bathtubs, sinks and even cribs.

Avoid walking barefoot: Many people are stung while walking barefoot around their home, near the pool, or in the garage. It is a good idea to wear shoes, even in your home, if you get the occasional scorpion visitor.

Treat your home: Pesticides are effective against scorpions. While some are more effective than others, most pest control companies in the desert are familiar with protecting against scorpions.

Shake out and examine clothes and bed sheets: Many stings occur in the bedroom and living room. Always shake out your shoes and your clothes before putting them on, especially if they are left outside. In areas with known scorpion presence, it is generally a good idea to pull back the bed sheets and look under pillows.

Protect your children: Educating school-age children about how to avoid stings is important. To prevent scorpions from crawling into a crib, place the legs of the crib inside glass mason jars. Keep curtains and drapes away from the crib, since this is an easy way for scorpions to gain access.

How do I know if my child has been stung by a scorpion?

After being stung, most people experience pain near the sting site. A burning and tingling sensation may travel to other parts of the body. More serious envenomations are associated with severe pain throughout the body, with jerking movements of the arms and legs, drooling, sweating, and roving eye movements, which can lead to visual disturbances and nausea. Given their smaller size, children are at much higher risk of developing serious toxicity. Unfortunately, young children may not be able to report the scorpion sting. Sudden onset of uncontrolled thrashing, restlessness, crying, drooling, and abnormal eye movements should alert parents and caregivers to the possibility of a sting. Because of excellent access to medical care in the United States, deaths from scorpion stings are extremely rare.

What should I do if I am stung by a scorpion?

If you believe you've been stung by a scorpion, call your local poison control center at 1-800-222-1222. They will give you first-aid recommendations and follow up with you by telephone to make sure you don't require treatment in a health care facility. The majority of people can be treated with over-the-counter pain medications such as acetaminophen or ibuprofen, but if the pain is severe or if there are other symptoms such as sweating, jerking of the arms and legs, vision problems, or difficulty breathing, medical care should be sought. Lightly applying ice to the area may be helpful, but be careful not to apply too much cold due to risk of frostbite.

What should I do if my young child is stung by a scorpion?

If you believe your child has been stung by a scorpion, call your local poison control center at 1-800-222-1222. Remember that children are more likely to suffer a severe reaction than adults and frequently require care in the emergency department.

How are scorpion envenomations treated?

The great majority of people can be treated with over-the-counter pain medications. Severe pain may require temporary use of stronger prescription pain medications. Patients with severe systemic symptoms, which might include uncontrolled movements of the eyes and muscles as well as difficulty breathing, may benefit from antivenom therapy. Antivenom must be administered by a health professional in a hospital setting.

If my child has previously been treated with antivenom, can he receive it again?

Yes, but your child may be at a slightly increased risk of allergic reaction with repeated doses. When evaluated in the Emergency Department, the doctor will determine if antivenom treatment is appropriate for your child.