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SNAKE COURSES

The ASI offers both public and corporate snake courses.

Public courses take place at various venues throughout South Africa.

The corporate training is done on-site, both in South Africa, as well as in 19 African countries.

We pride ourselves on teaching only the safest snake handling methods, to ensure the safety of both the handler and the snake.

We offer a range of different course options, including snake awareness, first aid for snakebite, venomous snake handling, venomous snake handling bootcamps, as well as advanced first aid for snakebite, advanced venomous snake handling and a reptile photography course.

For course info, click here or email us on courses@asiorg.co.za for details.





INTRODUCTION

he African Snakebite Institute is the leading training provider of Snake Awareness, First Aid for Snakebite and Venomous Snake Handling courses in Africa as well as the largest distributer of quality snake handling equipment, snake PPE and snakebite first aid kits. Our aim is to spread snake awareness as far and wide as possible, which is why we've launched our new free E-Book series.

ur CEO, Johan Marais is a well-known herpetologist with over 40 years of experience with snakes. He has worked at various reptile facilities and has collaborated on a variety of scientific studies with some of the world's leading herpetologists. He is also one of Africa's most prominent authors of snake books and has written the best-sellers A Complete Guide to Snakes of Southern Africa, Snakes and Snakebite in Southern Africa and First Aid for Snakebite, to mention just a few.



COMMON SNAKES OF PRETORIA

auteng has 48 different types of snakes. In Pretoria there are five species which are considered potentially deadly, three species considered dangerous and two species that can inflict a painful bite. We've listed the common species in this booklet, showing venomosity, key ID features, full distribution, and snakebite info for venomous species.

Snakebite is problematic with most bites reported from the hot, wet regions in the eastern part of the country. More than 4,000 snakebites are reported annually with over 1,000 victims being hospitalised. Of those around 60% show signs of envenomation and the remaining 40% show no symptoms – these are referred to as dry bites or may be bites from mildly venomous or harmless snakes. In a recent 5 year survey of 879 snakebite cases in Zululand, nearly 98% of victims showed typical signs of cytotoxic envenomation – largely Mozambique Spitting Cobra, Puff Adder, Common Night Adder and Stiletto Snake bites. Despite their relative frequency, if treated correctly in hospital, these bites are rarely fatal. Most bites occured in the early evening in the warm wet summer months from November to April/May. Around 84% of the bites were inflicted well below the knee. Less than 11% of these victims received antivenom and none of the bites in this survey were fatal.

Generally speaking we have 10 - 12 fatal snakebites a year in South Africa and these are invariably caused by the Black Mamba and Cape Cobra. Both of these snakes have a potent neurotoxic venom that may quickly affect breathing.

SNAKE HANDLING EQUIPMENT

The African Snakebite Institute is the leading provider of quality snake handling equipment in Africa. View our range online here.



COMMON SNAKES OF PRETORIA



Pretoria has around 35 species of snakes. Five species are considered highly venomous. Three species are venomous and two others can deliver a painful bite that may require stitches. Nine species are mildly venomous and the rest are harmless to humans.

HIGHLY

human fatalities

Painful bite, but does not require antivenom

VENOMOUS

Not thought to be harmful HARMLESS

Not dangerous to humans



uted Cobra















Puff Adder (Bitis arietar



Mole Snake - Juvenile



Short-snouted Grass Snake



Spotted Skaapsteker



Black-headed Centipede-eater



Brown Water Snake



Brown House Snake



Aurora House Snake



Herald Snake



HARMLESS

Spotted Bush Snake



Common Egg-eater (Dasypeltis scabra) - photo Luke Ken



JOHAN MARAIS is the author of various books on reptiles including the best-seller A Complete Guide to Snakes of Southern Africa. He is a popular public spea CEO of the African Snakebite Institute. The African Snakebite Institute (ASI) offers a variety of courses including Snake Awareness, Scorpion Awareness and Venomous Snake Handling. ASI is accredited by the International Society of Zoological Sciences (ISZS) and Travel Doctor-approved service provider. The courses are also accredited by the Health Professions Council of South Africa (HPCSA). ASI is the largest provider of quality snake handling and safety equipment in Africa

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www.AFRICANSNAKEBITEINSTITUTE.com

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Download the high resolution poster here.

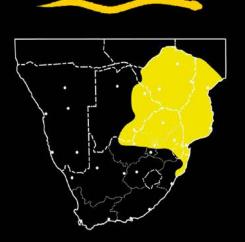






Snouted Cobra (Naja annulifera)

Maximum Length: 2.5m



Other names:

Wipneuskobra, Bosveldkapel

The Snouted Cobra is largely a moist and dry savannah inhabitant but is also found in lowveld and bushveld areas where it actively hunts its prey during the day or at night. It feeds on rodents, birds, their eggs and especially toads, but is fond of eating snakes, including the Puff Adder. It is not an aggressive snake but if cornered will stand its ground and form an impressive hood. It may exceed 2.5 m in length. It is usually different shades of brown, but some individuals have broad light brown and purplish-black bands on the back. The venom of this snake is both neurotoxic and cytotoxic and may cause some tissue damage. Polyvalent antivenom is effective, but luckily bites are rare.







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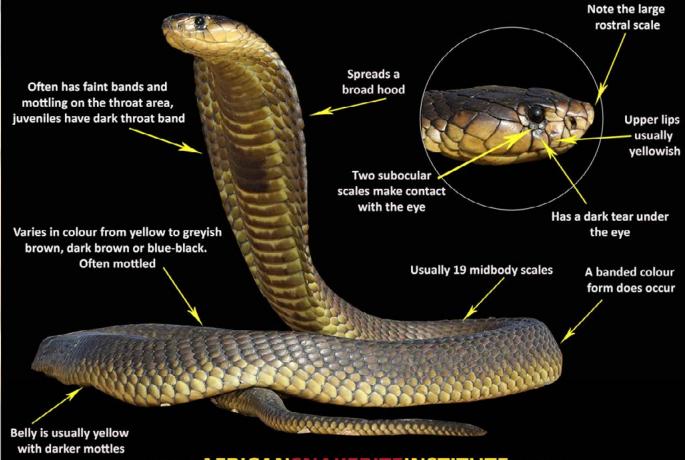
Snouted Cobra (Naja annulifera)

HIGHLY VENOMOUS

Average length: 1.2 - 1.6 m. Maximum length: 2.5 m

Can be confused with: Mozambique Spitting Cobras, Cape cobras







SNAKEBITE PROFILE SNOUTED COBRA

Naja annulifera



Risk of Bites

Bites from the Snouted Cobra are not common. This snake frequently visits residential gardens in search of rodents and toads. It also raids poultry runs. Dogs are at risk and often get bitten when attempting to kill the snake.



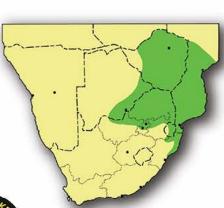
Most Bites

Bites are infrequent and usually occur when accidentally confronted or stepped on at night. Most bites are on the lower legs, or to those who try and handle the snake.



Symptoms & Venom

The venom is both neurotoxic and cytotoxic. It is one of our largest cobras reaching 2,5 m in length and can deliver a lot of venom in a single bite. Bites may result in burning pain, nausea and swelling followed by tissue damage. It can also affect breathing.



See pages 52-53 - Snakes and Snakebite in Southern Africa (2024).



First Aid

Immobilise and reassure the patient, who must lie down in a rescue position. Immediately arrange transport to a hospital with emergency facilities. If far from a hospital, apply a pressure bandage (Page 19 of Snakes and Snakebite in Southern Africa). Resort to artificial respiration if the victim stops breathing.



Medical Treatment

In cases of severe envenomation, especially where patients are not breathing, they should be intubated, ventilated, and treated with 12-15 vials of SAVP Polyvalent antivenom. Additional vials of antivenom may be required at a later stage.







HIGHLY VENOMOUS

Mozambique Spitting Cobra (Naja mossambica)

Maximum Length: 1.8 m



Other names:

Mosambiekse Spoegkobra

The Mozambique Spitting Cobra occurs on the eastern side of South Africa, most of Mozambique, Zimbabwe, north-eastern Botswana, northern Namibia and further north in Africa. Its diet consists largely of frogs, small mammals, birds and snakes, including the Puff Adder. It is active on overcast days, but more active at night, often ending up in houses where people are bitten while asleep. This snake accounts for the majority of serious snakebite cases in southern Africa, but fatalities are rare. It also spits its venom and does not always spread a hood when doing so. The venom is potently cytotoxic causing pain, swelling, blisters and in many cases severe tissue damage. Antivenom is effective if administered early and in large dosages.







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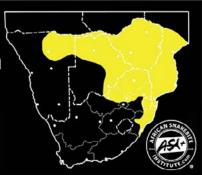


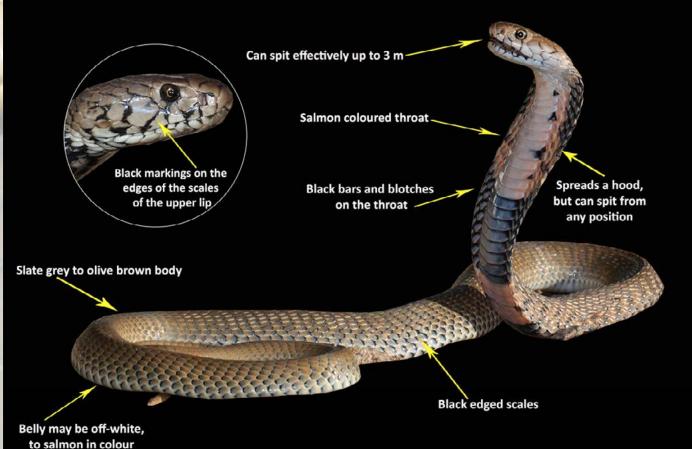
Mozambique Spitting Cobra (Naja mossambica)

HIGHLY VENOMOUS

Average length: 80 cm - 1.2 m. Maximum length: 1.83 m

Can be confused with: Rinkhals, Snouted Cobras





SNAKEBITE PROFILE

MOZAMBIQUE SPITTING COBRA

Naja mossambica



Risk of Bites

Bites are common, as this snake is widespread throughout much of southern Africa. Along with the Puff Adder, these two snakes account for most serious snakebites in southern Africa. Dogs are at risk and often get bitten when attempting to kill the snake.



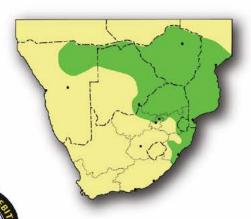
Most Bites

Most victims are bitten at night when accidentally stepping on the snake, or while in bed. The snake enters homes and may bite sleeping victims, often multiple times. Bites in bed appear to be somewhat of a feeding response with the snake smelling a mammal and biting. Should you live within the range of this snake it is advisable to ensure that exit doors seal well without gaps or to fix mosquito-proof doors to all exits. People are also encouraged to sleep under mosquito nets.



R Symptoms & Venom

The venom is predominantly and potently cytotoxic. Symptoms include severe pain, progressive swelling, various lesions and, in some cases, severe tissue damage.



See pages 64-65 Snakes and Snakebite in Southern Africa (2024).



First Aid

Immobilise and reassure the patient. Elevate the affected limb and remove tight clothing and jewelry. Promptly transport the victim to the nearest hospital that has emergency facilities. Avoid all other first aid remedies including bandages. For venom in the eyes, wash the eyes out immediately using water or any other bland liquid and get the victim to a medical doctor for further examination and treatment.



Medical Treatment

In cases of severe envenomation where there are clear signs of progressive swelling, extending more than 10-15cm per hour above the bite site, doctors must treat such bites with 12 ampoules (or more) of polyvalent antivenom. It appears that SAVP polyvalent antivenom is not very effective against the venom of this snake, therefore it should be administered within an hour or two after a bite. Anti-inflammatories (NSAID's) and antibiotics are not indicated in the short term. Fasciotomies are rarely justified and should generally be avoided. In cases where patients suffer tissue damage, surgery may be required but rarely in the first few days. Fatalities are rare.





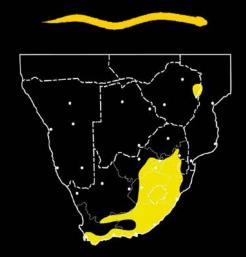




Rinkhals

(Hemachatus haemachatus)

Maximum Length: 1.5 m



Other names:

Ring-necked Spitting Cobra

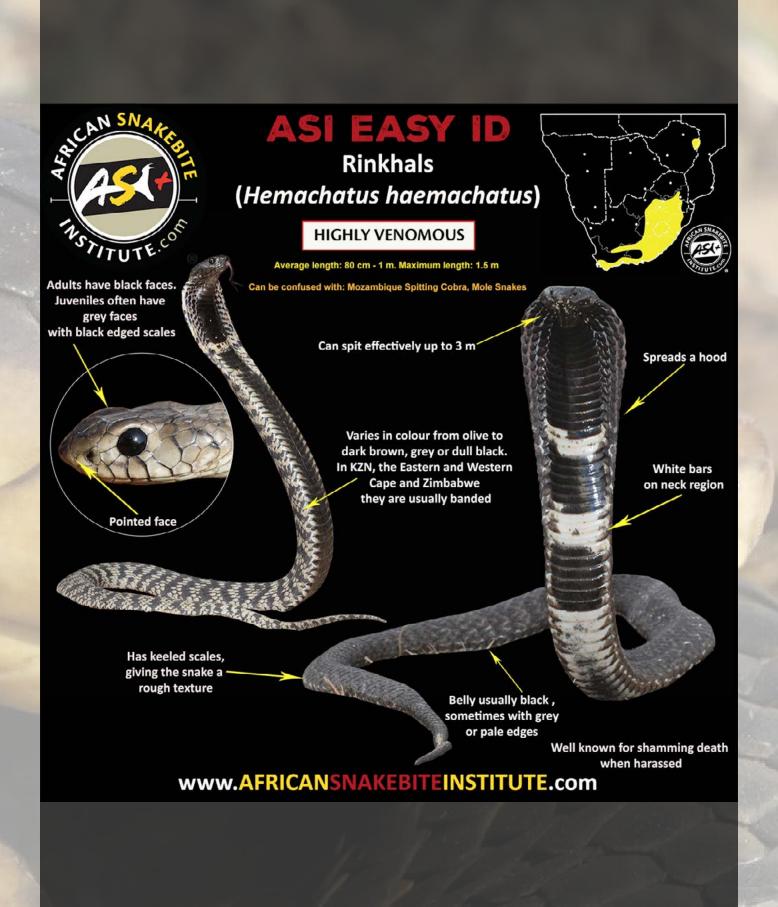
The Rinkhals is endemic to Southern Africa and is found only in South Africa, eSwatini, Lesotho and eastern Zimbabwe. Though it resembles a cobra (spreads a hood) it is not a true cobra and gives birth to live young. It is essentially a grassland inhabitant but is also found in fynbos in the Western Cape. It is fond of wetlands where it feeds on frogs. When threatened it is quick to disappear down a hole, but if cornered it will stand its ground, form a hood and spit. The Rinkhals is also quick to play dead with the body turned upside down and the mouth hanging open. The venom of this snake is largely cytotoxic causing pain, swelling and potentially tissue damage. Bites are extremely rare and fatalities virtually unheard of. Polyvalent antivenom is effective.







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SNAKEBITE PROFILE **RINKHALS**

Hemachatus haemachatus



Risk of Bites

This snake is quick to hood in a defensive position when startled and will often spit venom at attackers. It is also well known for playing dead when cornered. Bites to humans are uncommon. However, dogs that attack the snake are often bitten and die quickly unless treated with antivenom by a veterinarian soon after a bite.



Most Bites

Bites are not common, except for incidents where snake keepers are bitten by captive snakes. Persons handling the snake may also be bitten.



Symptoms & Venom

The venom is both cytotoxic and neurotoxic. Symptoms include painful swelling of the affected limb and possibly necrosis at the site of the bite. Other symptoms, though not common, include nausea, dizziness and respiratory distress.



See pages 67-69 - Snakes and Snakebite in Southern Africa (2024).



First Aid

Immobilise and reassure the patient. Elevate the affected limb. Promptly transport the victim to the nearest hospital that has emergency facilities. Avoid all other first aid remedies including bandages. For venom in the eyes, wash the eyes out immediately using water or any other bland liquid and transport the victim to a medical doctor.



聞 Medical Treatment

In cases of severe envenomation where there are clear signs of progressive swelling, which extends more than 10-15cm per hour above the bite site, or respiratory distress, doctors will treat such bites with 12 ampoules (or more) of polyvalent antivenom. Anti-inflammatories (NSAID's) and antibiotics are not indicated in the short term. Fasciotomies are rarely justified and should generally be avoided. In cases where patients suffer tissue damage, surgery may be required but rarely in the first few days. There are no documented fatalities from these bites in more than 45 years.









Boomslang

(Dispholidus typus)

Maximum Length: 2.1 m



Other names:

Boomslang

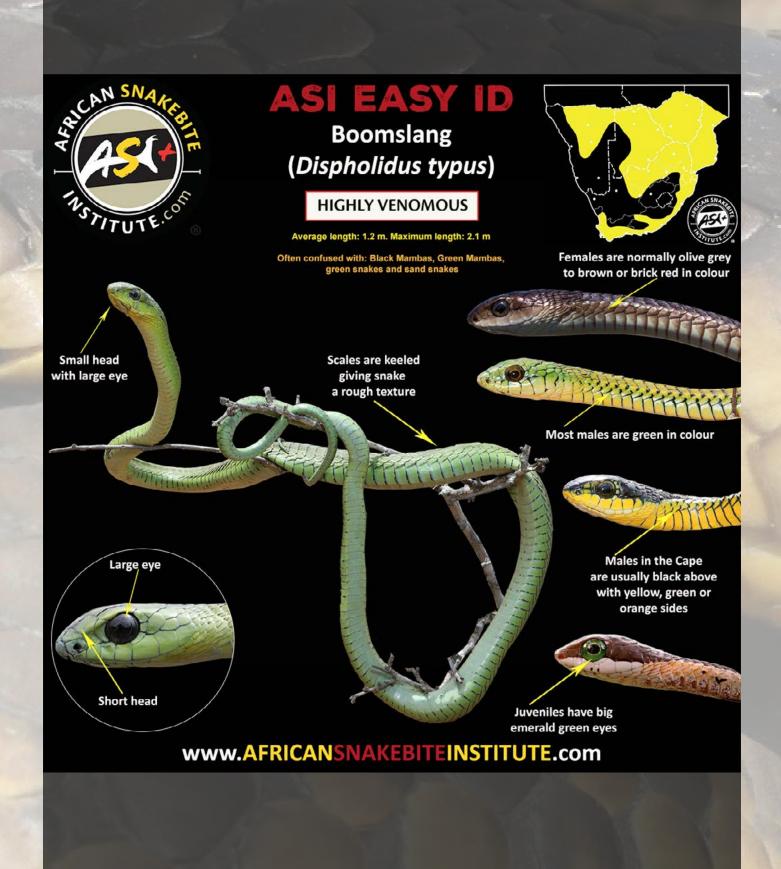
The Boomslang is largely tree-living but may descend to the ground to bask. In trees it poses no threat to humans as it is extremely reluctant to bite, and bites are rare. Juveniles are grey with a massive emerald, green eye but change to the adult colours around a length of 1 m. Most males are bright green, sometimes with black between the scales, but in the Cape Provinces they are usually black above with green, yellow or orange sides. Females are usully brown to grey in colour. Boomslang venom is haemotoxic and compromises the blood clotting mechanism, causing uncontrolled bleeding if not treated. The South African Vaccine Producers manufacture a monovalent antivenom for bites from Boomslang that is very effective.







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SNAKEBITE PROFILE BOOMSLANG

Dispholidus typus



Risk of Bites

Bites are not common in South Africa. This snake lives in trees and shrubs and interactions with humans are infrequent. It is a placid snake that only bites when provoked or handled. If spotted, it is quick to flee higher up into trees.



Most Bites

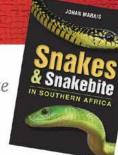
Bites occur when a basking snake is accidentally stepped on or grabbed, or when it is handled.



Symptoms & Venom

Drop for drop the Boomslang has the most potent venom of any snake in Africa. It is slow-acting, but potently haemotoxic and symptoms include bleeding from the bite site, the nose, mucous membranes and internal bleeding.

See pages 79-81 Snakes and Snakebite in Southern Africa (2024).



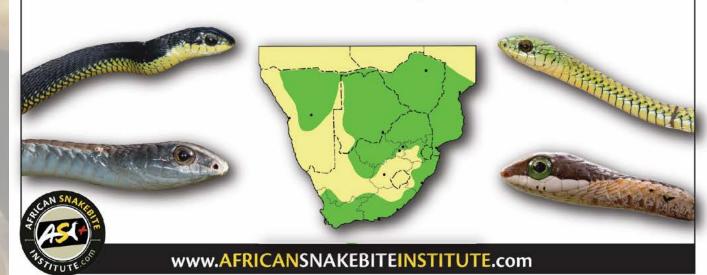
First Aid

Immobilise and reassure the patient. Elevate the affected limb. Promptly transport the victim to the nearest hospital that has emergency facilities. Avoid all other first aid remedies including bandages.



Medical Treatment

In cases of severe envenomation patients are treated with monovalent Boomslang antivenom. The initial dosage is two vials but, in some cases, a third vial may be required. This antivenom is produced by the South African Vaccine Producers. It is a Schedule 4 drug, therefore a script is required should one wish to purchase it. It comes in a 10 ml vial and must be refrigerated. It has a three year shelf life.





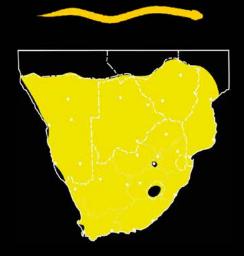
HIGHLY VENOMOUS



Puff Adder

(Bitis arietans)

Maximum Length: 1.4 m



Other names:

Pofadder, Imbululu

The Puff Adder is widespread over much of southern Africa and further north into Africa. It is a heavy-bodied snake that relies on its excellent camouflage and is reluctant to move. Much of its life is spent in camouflage mode and recent research has shown that when hiding, the Puff Adder will not hiss or strike when approached, as this would give away its presence. It is an ambush hunter that will coil up into a striking position and await its prey. This can last several days or even weeks. Toads are lured closer with flicking of the tongue. Puff Adder venom is potently cytotoxic, causing severe pain, swelling, blistering and in many cases severe tissue damage. Polyvalent antivenom is effective.







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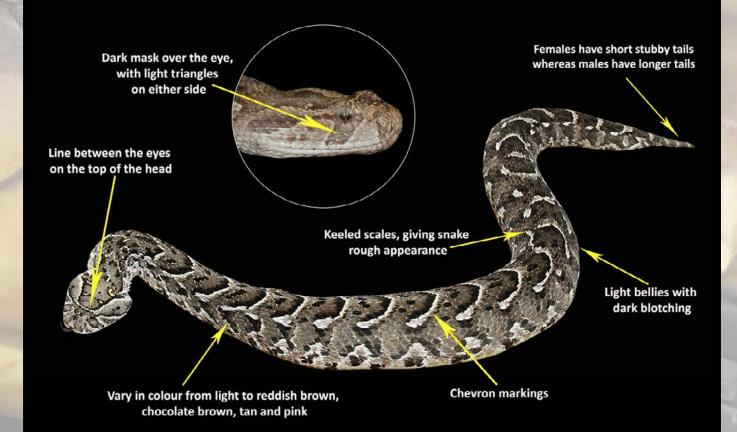
Puff Adder (Bitis arietans)

HIGHLY VENOMOUS

Average length: 90 cm. Maximum length: 1.4 m

Often confused with: night adders and Berg Adders







SNAKEBITE PROFILE PUFF ADDER

Bitis arietans



Risk Of Bites

Bites are common as this snake is widespread throughout most of southern Africa. Along with the Mozambique Spitting Cobra, these two snakes account for the majority of serious snakebites in southern Africa. Dogs are at risk and often get bitten when attempting to kill the snake.



Most Bites

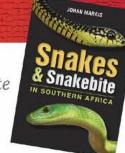
Most victims are bitten at night when accidentally stepping on the snake, but bites are also inflicted during the day when the snake is basking. Most bites are on the feet or lower legs.



Symptoms & Venom

The venom is potently cytotoxic as well as haemotoxic. Symptoms include severe pain, progressive swelling, bleeding from the fang punctures, blistering and tissue damage. The lymph nodes may also be affected. Dogs may perish after a bite from this snake, unless treated with polyvalent antivenom, if required.

See pages 26-28 Snakes and Snakebite in Southern Africa (2024).





Immobilise and reassure the patient. Elevate the affected limb and remove tight clothing and jewelry. Promptly transport the victim to the nearest hospital that has emergency facilities. Avoid all other first aid remedies including bandages.



Medical Treatment

In cases of severe envenomation where there are clear signs of progressive swelling, which extends more than 10-15cm per hour above the bite site, doctors will treat such bites with 6 ampoules (or more) of polyvalent antivenom. Anti-inflammatories (NSAID's) and antibiotics are not indicated in the short term. Fasciotomies are rarely justified and should generally be avoided. In cases where patients suffer tissue damage, surgery may be required but rarely in the first few days.

Fatalities are rare.







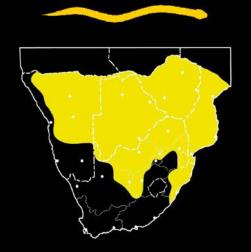


VENOMOUS

Bibron's Stiletto Snake

(Atractaspis bibronii)

Maximum Length: 70 cm



Other names:

Bibron se Sypikslang; Moladder; Mole

Viper; Burrowing Asp

After the Mozambique Spitting Cobra and Puff Adder, the Bibron's Stiletto Snake accounts for most serious snakebites in South Africa. It spends most of its life underground but often emerges on hot humid nights and may be stepped on. With large hinged fangs it cannot be handled safely and also cannot be held behind the head – it merely twists its head sideways and will get a fang to penetrate a fingertip. It is usually blackish brown in colour and is easily confused for a variety of harmless snakes. This snake averages 30 cm but can exceed 70 cm in length. Its venom is potently cytotoxic causing severe pain, swelling, blistering and necrosis. Antivenom is not available for this snake.







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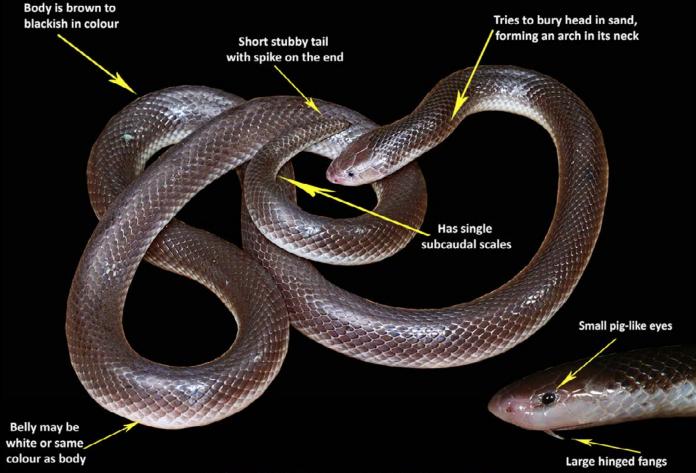
Bibron's Stiletto Snake (Atractaspis bibronii)

VENOMOUS

Average length: 40 - 60 cm. Maximum length: 98 cm

Often confused with: wolf snakes, blind snakes, purple-glossed snakes





SNAKEBITE PROFILE **BIBRON'S STILETTO SNAKE**

Atractaspis bibronii



Risk of Bites

Bibron's Stiletto Snake is largely active at night, especially on warm summer nights after a bout of rain. It may also fall into swimming pools and may be brought indoors by cats.



Most Bites

Most victims are bitten picking up Stiletto Snakes, mistaking them for a harmless snake. Otherwise, when stood on while walking barefoot at night.



Symptoms & Venom

The venom of this snake is potently cytotoxic, causing severe pain, local swelling, blistering, and potentially local tissue damage.



See pages 85-87 – Snakes and Snakebite in Southern Africa (2024).



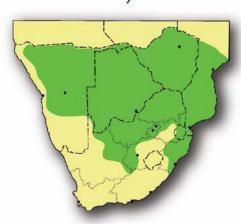
子 First Aid

There is virtually nothing that can be done. Elevate the affected limb and get to a hospital that has an emergency department.



IIII Medical Treatment

As there is no antivenom for a bite from this snake, doctors need to treat for pain and rehydrate the victim. Anti-inflammatories, antibiotics and antihistamines are not effective and should not be administered. It is equally as important not to resort to any form of surgery for at least 5-7 thereafter should Only days. debridement be considered depending on the severity of the bite.



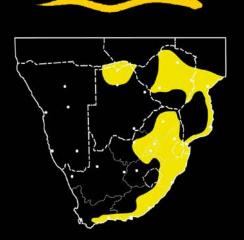




VENOMOUS

Common Night Adder (Causus rhombeatus)

Maximum Length: 1 m



Other names:

Rhombic Night Adder, Gewone Nagadder

Despite the common name, the Night Adder is more active during the day. It averages 30 – 60 cm in length, but can reach 1 m. It can be identified by the distinct dark V-marking on the head. It prefers damp localities and is a frog specialist. The Night Adder is generally a docile snake but will hiss aggressively and strike when provoked. It accounts for many bites, especially in KZN and the Eastern Cape. It is commonly found in suburban gardens.

Night Adder venom is cytotoxic, and most bites are not serious – causing pain and swelling. Having said that, the venom of this snake should never be underestimated, especially in children, as some victims require hospitalisation.







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Common Night Adder (Causus rhombeatus)

VENOMOUS

Average length: 40 - 60 cm. Maximum length: 1 m

Often confused with: Rhombic Egg-eaters, Berg Adders and Puff Adders



Despite the common name, they are mainly active during the day Single distinct "V" Rhombic markings. marking on the head. Dark brown, light-edged blotches The apex of the V ending along the centre of the body and tail between the eyes Black lines on the Often has edges of the scales dark mask of the upper lip over eye Belly usually white to yellowish or light grey Colour, varying shades of light grey, olive, Round pupil or light to pinkish brown



SNAKEBITE PROFILE **COMMON NIGHT ADDER**

Causus rhombeatus



Risk of Bites

Bites are quite common in coastal KwaZulu-Natal and the Eastern Cape. Despite the common name, this snake is active during the day and frequents moist areas at dams, rivers and streams, where it feeds largely on toads. Dogs are at risk and often get bitten when attempting to kill the snake.



Most Bites

People are bitten when accidentally stepping onto one of these snakes. Most bites are on the feet or lower legs. Some people are under the wrong impression that Night Adder venom is mild and get bitten when handling the snake.



First Aid

Immobilise and reassure the patient, elevate the affected limb and rest it. In severe cases, especially in small children, the patient may require hospitalization for rehydration and pain.

See pages 40-41 Snakes and Snakebite in Southern Africa (2024).





Symptoms & Venom

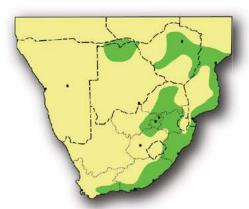
cytotoxic is largely (cell-destroying), causing pain, swelling, and discoloration of the bitten area within an hour or two. The lymph nodes may also be affected. Swelling and discoloration may persist for more than a week, but blistering is rare. The venom of this snake does not cause tissue damage but could be quite serious when dogs are bitten. Small dogs may perish after a bite from this snake.



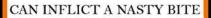
Medical Treatment

There is no antivenom for this bite of a Common Night Adder. Both antibiotics and anti-inflammatories (NSAIDs) are not indicated and should not be given in the first 72 hours. If well rested, patients recover fully within a week or two.





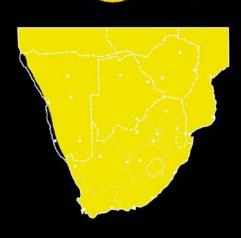






Mole Snake (*Pseudaspis cana*)

Maximum Length: 2.1 m



Other names: Molslang

The Mole snake is a muscular day-active snake that spends much of its time down rodent burrows in search of food. It is widespread and occurs throughout most of Southern Africa. It is often encountered in the Cape, but not seen commonly elsewhere in the country. Individuals vary from black to dark brown, medium brown, light brown or even brick red, while the juveniles have bright markings. This snake is not venomous but does have pin-sharp teeth and is capable of quite serious bites that may even require stitches. Mole Snakes are often confused with the Cape Cobra and the venomous stiletto snake even though it does not resemble them.







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Mole Snake (Pseudaspis cana)

NON-VENOMOUS, BUT CAN INFLICT A NASTY BITE

Average length: 1.2 m. Maximum length: 2.1 m

Often confused with: Cape Cobras, and Snouted Cobras.
Juveniles are often confused with egg-eaters, night adders and skaapstekers









MILDLY VENOMOUS

Short-snouted Grass Snake (*Psammophis brevirostris*)

Maximum Length: 1.2 m



Other names:

Short-snouted Whip/Sand Snake, Kortsnoet Grasslang

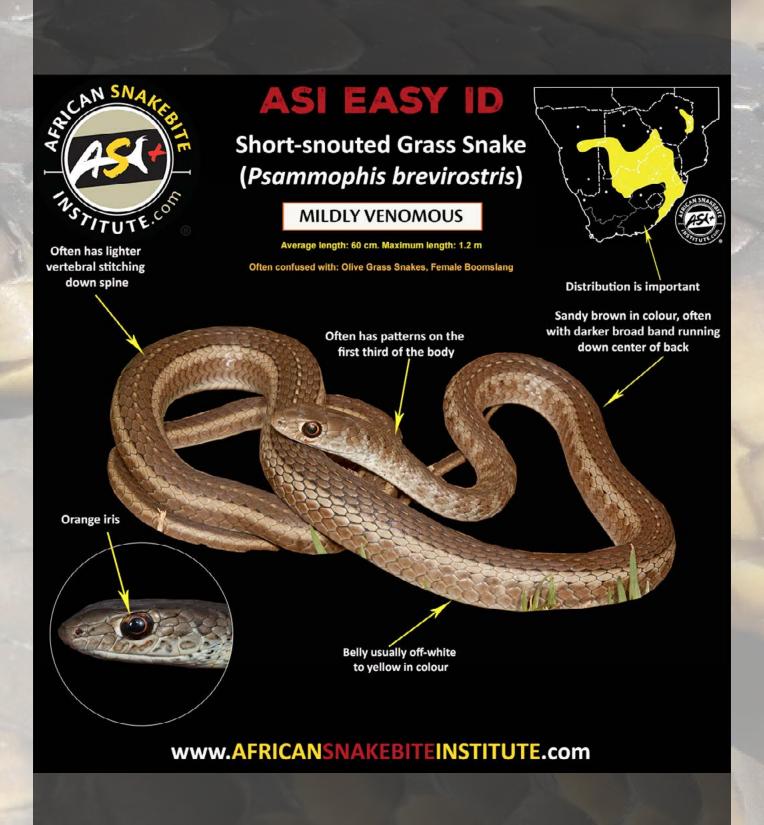
A medium sized, fast-moving snake that is active during the day. It averages 40-60cm but may exceed a meter in length. This snake is fond of basking and very quick to escape. It may flee into low shrubs. If handled it will not hesitate to bite. Individuals captured by the tail will spin and snap a piece of tail off in order to escape. The Short-snouted Grass Snake feeds on lizards, snakes and small rodents. It is a common snake in Gauteng and occurs throughout most of the central part of southern Africa and as far south as the Eastern Cape. Also found in Limpopo, North West and elsewhere further north. The venom of this snake is mild and poses no threat to humans.







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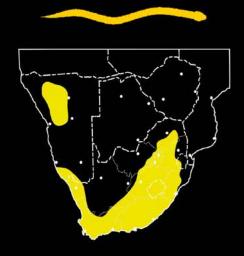


MILDLY VENOMOUS

Spotted Skaapsteker

(Psammophylax rhombeatus)

Maximum Length: 1.4 m



Other names:

Rhombic Skaapsteker; Gespikkelde Skaapsteker

A fast-moving diurnal snake that inhabits grasslands, fynbos, moist savanna and semi-desert areas. It is a nervous snake and is quick to escape, either into a bush or grass tuft or under a rock. The name 'Skaapsteker' came from the mistaken belief that these abundant snakes accounted for sheep deaths, when the actual culprit was probably the Cape Cobra. This is also one of few African snakes that coil around and protect their eggs – the Southern African Python being the other. The Spotted Skaapsteker feeds on rodents, lizards, birds, frogs and other snakes. The venom of this snake is mild and poses no threat to humans.







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Cape form has

red and blue flecks

ASI EASY ID

Spotted Skaapsteker (Psammophylax rhombeatus)

MILDLY VENOMOUS

Average length: 40 - 60 cm. Maximum length: 1.4 m

Often confused with: other sand and grass snakes and Striped Skaapsteker



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Striped form





MILDLY VENOMOUS

Black-headed Centipede-eater (Aparallactus capensis)

Maximum Length: 40 cm



Other names:

Swartkop Honderdpootvreter,

A small slender nocturnal snake that averages 30 cm with a maximum length of 40 cm. This common snake is usually found in deserted termite mounds or under logs and rocks as well as in leaf litter. It occurs in the eastern half of the country from the Eastern Cape northwards.

The Black-headed Centipede-eater is a specialist feeder and preys on centipedes – it will seize its prey and then chew along the body until the venom takes effect. The centipede is eaten headfirst. It has a blackish head and light brown to orange-brown body, making it easy to identify. This snake is back-fanged and mildly venomous and poses no threat to humans.







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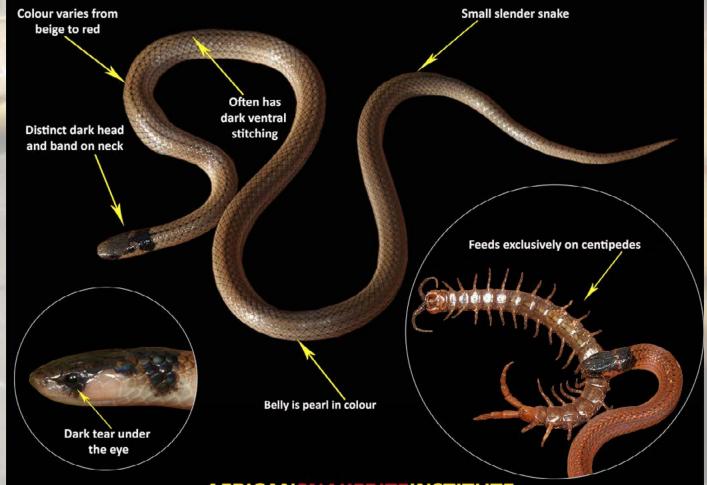


Black-headed Centipede-eater (Aparallactus capensis)

MILDLY VENOMOUS

Average length: 30 cm. Maximum length: 40 cm







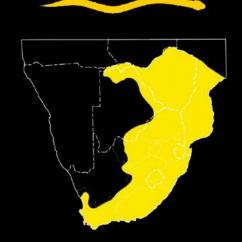
MILDLY VENOMOUS



Herald Snake

(Crotaphopeltis hotamboeia)

Maximum Length: 1 m



Other names:

Rooilipslang, Red-lipped Snake

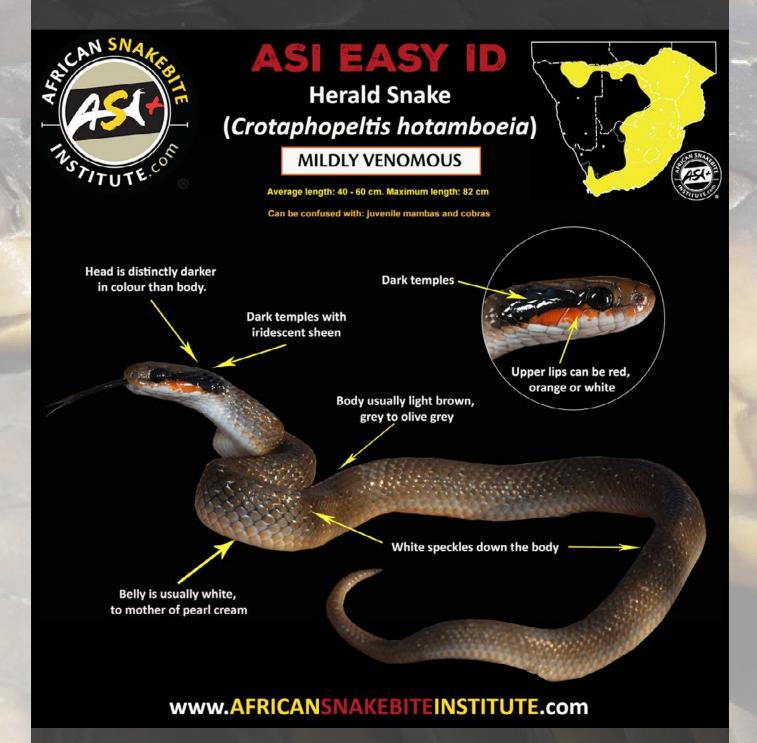
A nocturnal snake that frequents suburban gardens, especially those with water features. It is a toad specialist and often eats toads that look far too large to swallow. The Herald Snake is usually greyish to olive-grey in colour, but some individuals are quite dark. The head is always darker than the body and there may be white speckles on the body. In parts of the range the upper lip is bright red, orange or yellowish to white. When threatened, this snake puts up quite a show, drawing the head back into a striking position with the mouth agape and the head flattened. It is mildly venomous and poses no threat to humans or domestic animals.







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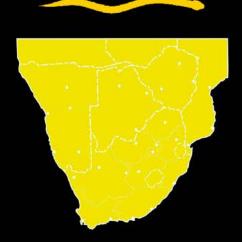




Brown House Snake

(Boaedon capensis)

Maximum Length: 1.5 m



Other names: Bruin Huisslang

The Brown House Snake, true to its name, frequents human dwellings where it feeds largely on rodents and lizards. It is completely harmless and relies on muscle power to constrict its prey. It is widespread in South Africa and very common in suburban gardens.

This snake is active at night and is relatively slow-moving. Most individuals are medium to dark brown with a mother-of-pearl belly and two light lines on either side of the head – one from the nose through the top of the eye to the back of the head and the other from the back of the eye to the angle of the jaw. The Brown House Snake comes in a variety of shades of brown, often with mottling of white along the neck.







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Brown House Snake (Boaedon capensis)

HARMLESS

Average length: 55 cm. Maximum length: 1.5 m

Can be confused with: Slug-eaters



Varies in colour from light brown to reddish brown, chocolate brown, tan and pink

May have mottled markings down the neck

One light line from the nose through the top of the eye to the back of the head



A second light line from the back of the eye to the angle of the jaw

Belly is generally a pearl colour

Note the lines above and below the eye

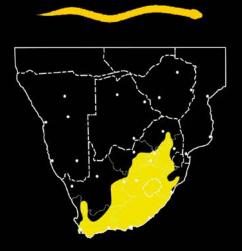




Aurora House Snake

(Lamprophis aurora)

Maximum Length: 90 cm



Other names:

Auroraslang

A beautifully-marked, slow-moving snake that favours damp localities in grasslands, lowland forest and fynbos where it hunts for nestling rodents, lizards and frogs at night. Adults average 60 cm but may exceed 90 cm. It varies in colour from shiny olive green to dull dark green above with a bright yellow to orange vertebral stripe from the top of the head to the tip of the tail. It is a harmless constrictor that seldom attempts to bite. This snake is endemic to South Africa and Lesotho and occurs from the Cape Peninsula through the Western and Eastern Cape into parts of the Northern Cape, the Free State, much of KwaZulu-Natal, Mpumalanga, Limpopo, Gauteng and eastern North West province.







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Aurora House Snake (Lamprophis aurora)

HARMLESS

Average length: 30-50 cm. Maximum length: 90 cm

Often confused with: Spotted Harlequin Snakes (Grassland form)









Common Wolf Snake (Lycophidion capense)

Maximum Length: 65 cm



Other names:

Cape Wolf Snake, Gewone Wolfslang

This common little snake averages 25-40 cm in length and is frequently found in suburban gardens. It is active at night when it hunts for lizards, especially skinks and geckos. The Common Wolf Snake is fond of damp localities where it seeks refuge under rocks, logs and in rubbish heaps. Though harmless it has long, recurved teeth in both the upper and lower jaw, hence the common name. Females produce 3–9 eggs in early summer. The Common Wolf Snake is difficult to distinguish from the venomous stiletto snake. It differs by having a long thin tail, the head is distinct from the body, and it usually has light spots on the back of each body scale.







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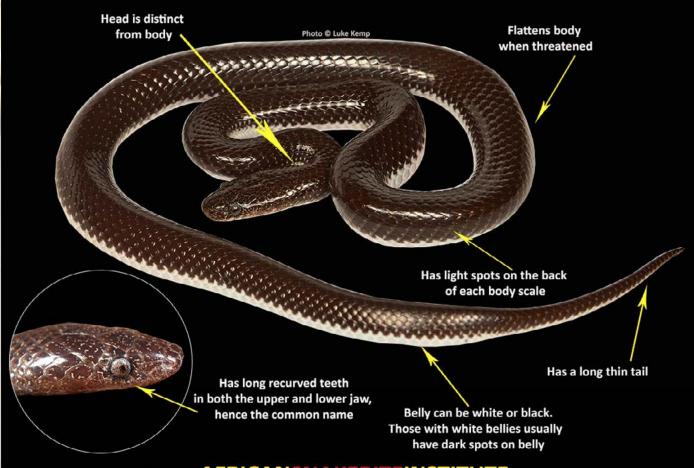
Common Wolf Snake (Lycophidion capense)

HARMLESS

Average length: 40 cm. Maximum length: 64 cm

Often confused with: stiletto snakes



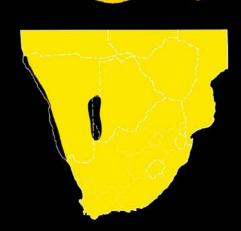






Common Egg-eater (Dasypeltis scabra)

Maximum Length: 1.16 m



Other names:

Rhombic Egg-eater, Gewone Eiervreter

A common snake throughout most of southern Africa except for true desert and closed canopy forests. It averages around 50 cm and is well adapted at climbing trees. It is most abundant in thornveld and grasslands where it can be found in any situation. It is nocturnal, spending most of the day hiding beneath rocks or under loose bark. When agitated, it will coil and uncoil while striking out viciously. The rubbing scales create a rasping sound similar to a hiss. It is completely harmless, and the teeth are reduced. It feeds exclusively on birds' eggs. It may be confused with the venomous Common Night Adder.







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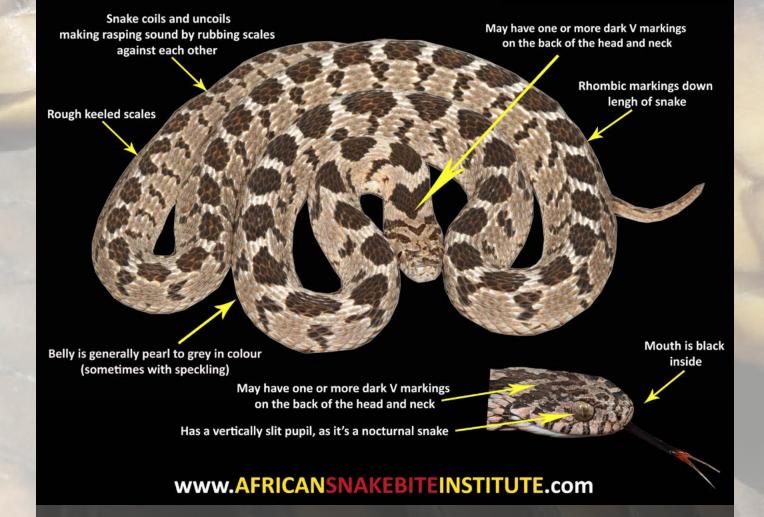
Common Egg-eater (Dasypeltis scabra)

HARMLESS

Average length: 55 cm. Maximum length: 1.16 m

Often confused with: Common Night Adders



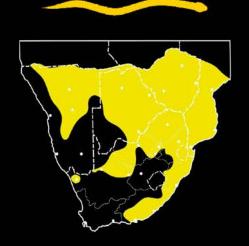






Spotted Bush Snake (*Philothamnus semivariegatus*)

Maximum Length: 1.3 m



Other names:

Variegated Bush Snake; Gespikkelde Bosslang

An alert, day-active snake, that climbs well and is often found between the walls and ceilings of outbuildings, where it hunts for geckos. Sadly, this harmless snake is often mistaken for a Green Mamba or Boomslang and needlessly killed.

The body is bright green to a copper-green with distinct blackish spots on the front half of the snake, but little or no dark marks on the back half. The belly is yellowish to white and the pupil orange.

This snake has keeled belly scales which enables it to climb up the bark of a tree or even up face-brick walls. It is commonly found in suburban gardens and juveniles are often killed by domestic cats.







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Spotted Bush Snake (Philothamnus semivariegatus)

HARMLESS

Average length: 70 cm. Maximum length: 1.3 m

Often confused with: Western Natal Green Snakes, Green Mambas, Boomslang

Prominent yellow to red iris

Excellent climbers, often found in trees and bushes and in ceilings of outbuildings

In the north of their range, they often have a copper coloured tail

> Yellowish to white belly with keeled ventral and subcaudal scales for climbing

Have bright metallic blue flecks

Double temporal scales



Three upper labials making contact with eye



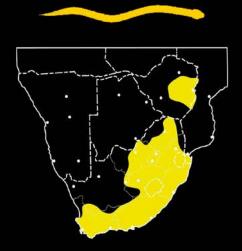
Blackish spots on the first half of the body





Brown Water Snake (*Lycodonomorphus rufulus*)

Maximum Length: 97 cm



Other names: Bruin Waterslang

A smallish snake averaging 30-50 cm with a maximum length of 97 cm. It is light to dark brown with a salmon-pink to yellow coloured belly. Snakes from the Western Cape are often much darker. This snake is not as aquatic as the Dusky-bellied Water Snake but does frequent rivers, streams, vleis and other damp areas. It is active at night and swims well but is often seen hunting along shaded streams during the day. It is a powerful constrictor and feeds on frogs, tadpoles, fish and occasionally nestling rodents and geckos. Females produce 6 – 23 eggs in summer. Though harmless this snake is much feared in Zulu culture and is called Ivuzamanzi elimdubu.







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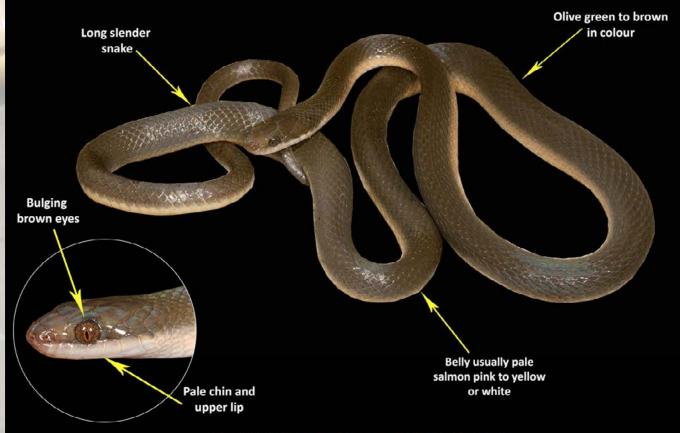
Brown Water Snake (Lycodonomorphus rufulus)

HARMLESS

Average length: 45-60 cm. Maximum length: 97 cm

Often confused with: Olive Snakes, Yellow-bellied House Snakes





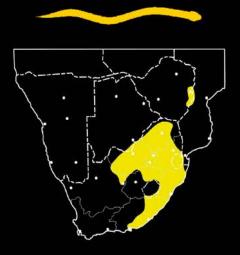




Bibron's Blind Snake

(Afrotyphlops bibronii)

Maximum Length: 48.4 cm



Other names:

Bibron's se Blindeslang

This harmless burrowing snake spends most of its life underground where it feeds on ants, termites and their larvae. It is often flushed to the surface after heavy rains. As the common name indicates it is largely blind, with a scale over the eye – an adaptation for an underground existence. Bibron's Blind Snake averages 30 – 38 cm with a maximum length of 48.4 cm. Both ends are rounded, and one must look carefully to work out which end is the head and which is the tail. A variety of burrowing snakes, like the stiletto and harlequin snake prey on this species. This snake may be confused with Delelande's Beaked Blind Snake and the venomous stiletto snakes.







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Bibron's Blind Snake (Afrotyphlops bibronii)

HARMLESS

Average length: 30-40 cm. Maximum length: 48.4 cm

Often confused with: stiletto snakes and Delelande's Beaked Blind Snakes





FIRST AID FOR SNAKEBITE



IN THE EVENT OF A SNAKEBITE, DO NOT...

- Do not try to cut or suck out the venom. Never cut the bite site as cutting may do far more harm than good. Sucking does not remove significant amounts of venom.
- Do not apply any electric shock therapy. Shock treatments have been tested extensively and have been shown to have no effect on the outcome of the bite. Electric shocks do not neutralise snake venom.
- → Do not apply a tourniquet. Many people are bitten by harmless snakes or venomous snakes that do not inject sufficient venom to cause serious damage. Arterial or venous tourniquets are not advised in most bites as venom is transported largely through the lymphatic system and not through veins. There is little evidence that a tourniquet could be lifesaving following a snakebite.
- Do not apply heat, ice, lotions or potions. Apart from cleaning the bite site with water and applying a sterile gauze dressing nothing should be applied to the bite. Very hot water does not neutralise snake venom.
- ◆ Do not inject antivenom as a first aid measure. Most snakebite victims
 do not require antivenom and the polyvalent antivenom is only effective
 for the bites of certain potentially deadly snakes. If required, antivenom
 must be injected intravenously by a medical doctor and usually in large
 quantities. As victims may go into anaphylactic shock when injected
 with antivenom, adrenaline and other drugs may also be required.
 Anaphylactic shock is a serious medical condition which may be fatal if
 not treated promptly.

FIRST AID STATE ST

FIRST AID KITS

We stock a wide range of First Aid for Snakebite Kits, as well as Smart Pressure Bandages, Resuscitators, and first aid books. View the range online here.





FIRST AID FOR SNAKEBITE



IN THE EVENT OF A SNAKEBITE, DO...

- → Do get the victim to a hospital as soon as possible and in a safe manner. This is by far the most important first aid measure. For medical advice in a snakebite emergency, call the African Snakebite Institute +27 (0)82 494 2039.
- → Do keep the victim calm. Often easier said than done as people tend to panic in a snakebite emergency. Many snakebite victims go into shock, experience a drop in blood pressure and may even become nauseous and faint. If possible, do not allow the victim to walk, run, jump etc. Bear in mind that more than 99% of snakebite victims that are hospitalised within a few hours survive their snakebites.
- Do remove jewellery as well as tight clothing. If bitten on the hand/arm/foot/ lower leg, remove rings, bangles, bracelets, watches, anklets and any other tight jewellery including tight clothing.
- → Do administer artificial respiration if patient stops breathing. In serious snakebite cases involving snakes with predominantly neurotoxic venom, like the Black Mamba or Cape Cobra, the victim may soon experience difficulty with breathing, even within 20 minutes. This is a very serious medical condition and assisted breathing could be life-saving. Mouth-to-mouth resuscitation may be beneficial in the short term, but the proper use of a Bag Valve Mask is far better in such an instance.

SPITTING SNAKES

- ★ The common spitting snakes in South Africa are the Mozambique Spitting Cobra or M'Fezi and the Rinkhals. In the western parts of the country these are replaced by the Black Spitting Cobra. These snakes spray their venom up to a distance of three metres and do so in self-defence to temporarily blind their attacker so that they can make a quick escape.
- ★ Although spitting snakes accurately aim for the eyes, the venom diffuses into a spray over a wide area and may get onto your hair, face, arms and chest. Venom in the eyes is very painful and must be flushed or diluted as quickly as possible. The production of tears starts this process, but as a first aid measure, flush the eyes with water or a weak (normal) saline solution. The idea is to flush away any excess venom. Transport the victim to a medical doctor, who will examine the eyes for corneal damage and prescribe antibiotic eye drops to prevent secondary infection. There is no reason to use diluted antivenom it has no proven benefits and may cause an allergic reaction.
- If treated quickly, the chance of permanent damage to the eyes is extremely remote.

SNAKEBITE EMERGENCY NUMBERS

Netcare Ambulance: 082 911

ER24 Ambulance: 084 124

Provincial Ambulance: 10177/112

African Snakebite Institute: +27 (0)82 494 2039

HOSPITALS AROUND PRETORIA

Netcare Pretoria East Hospital

Tel: 012 422 2300 (-25.819641, 28.304518) Netcare St, Moreleta Park, Pretoria, 0181

Life Wilgers Hospital

Tel: 012 807 8100 (-25.768039, 28.319325) Die Wilgers, Pretoria, 0041

Mamelodi Hospital

Tel: 012 841 8300 (-25.718704, 28.369655) 19472 Serapeng St, Tsamaya Ave, Mamelodi, Pretoria, 0122

Netcare Montana Hospital

Tel: 012 523 3000 (-25.674310, 28.244400) crn Dr Swanepoel Rd, and, Rooibos Rd, Montana Park, Pretoria, 0159

Steve Biko Academic Hospital

Tel: 012 354 1000 (-25.729958, 28.202802) Steve Biko and, Malan St, Capital Park, Pretoria

Life Eugene Marais Hospital

Tel: 012 334 2777 (-25.710278, 28.193883) 696 5th Ave, Les Marais, Pretoria, 0084

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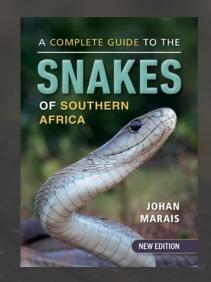


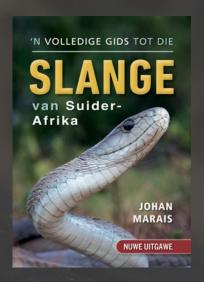


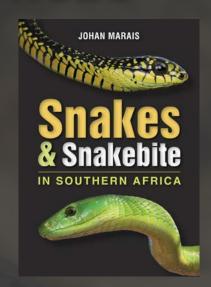




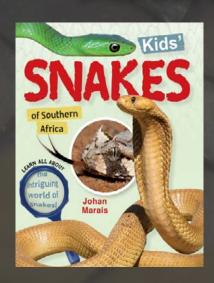
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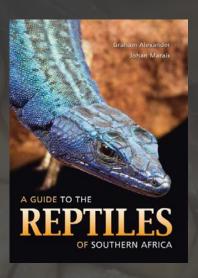




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