

## SELECTION 3

### Snakebite! by Berton Roueche

#### Vocabulary Review

*venomous* creatures  
*herpetological* laboratory  
*unsheathed* and fully erect  
*necrosis* of the tissue

*Herpetologist Gary Clarke only wanted to weigh Big Red, a 52-inch-long rattler. But the snake grew angry, lashed out, and put Clarke through a memorable medical ordeal.*

- 1 "I was alone in the laboratory that day," Clarke said. "I  
2 have an assistant who helps with the routine, but he was at  
3 home with a cold. Ordinarily, that wouldn't have mat-  
4 tered. Snakes need little care. But November 4 was not an  
5 ordinary day. It was the first Wednesday of the month, the  
6 day we usually weigh the snakes. That posed a problem  
7 with the venomous creatures. I can do it myself; still, it is  
8 a lot less trouble with someone helping out.  
9 "I was ready to go at one-thirty. With my assistant, the  
10 weighing took about an hour and a half. I couldn't hope to  
11 breeze along like that alone, but I'd still be through by four  
12 o'clock.  
13 "Weighing a snake can be tricky, but the procedure is  
14 fairly simple: Lift him out of the cage; drop him in a  
15 sack—generally a cotton flour sack; tie it in a knot and

16 hang it on a balance scale. The snake's weight is the total,  
17 minus the weight of the empty sack.

18 "The tricky part is how to release his head, take your  
19 hand away, and close the sack—in time to avoid being  
20 bitten. You can't imagine how fast a snake can move. He'll  
21 be up before you can even blink, so you have to take  
22 advantage of his helplessness. After his tail is inside, you  
23 jerk his head up a bit, stretching his neck. Since he hates  
24 being held by his neck, his instinct is to pull back with all  
25 his strength. The instant you feel him respond, let go. His  
26 pull does the rest. He loses his balance and tumbles to the  
27 bottom of the sack. Then, you quickly knot the end. And be  
28 sure to swing the sack away from your body because he's  
29 very apt to lunge against you, through the sack.

30 "I started in the herpetological laboratory located in the  
31 basement of the institute.

32 "My plan, that afternoon, was to begin with some ven-  
33 omous snakes. Most of the snakes in the experiments were  
34 harmless. Nine, however, were venomous; and I wanted to  
35 get them out of the way first, since they would be the  
36 hardest to handle.

37 "Big Red was the first snake to be weighed. And he's a  
38 handful to handle alone. A good many snakes—even  
39 rattlesnakes—can be picked up by one hand, but not Big  
40 Red. I knew from experience that I'd need both hands to  
41 hold him steady, not because of his disposition—he's the  
42 sweetest snake I know—but because of his size.

43 "I took a straight chair in the laboratory and draped the  
44 sack over the chair back in such a way that the neck hung  
45 open. I unlocked the cage. Big Red was lying there in a  
46 resting coil with his head pillowed on his back. He looked  
47 to be at peace with the world. I took a long-handled snake  
48 hook in my left hand, and gently—so as not to rile him—  
49 pushed his head off his body and pinned it there with the  
50 hook. Red hardly twitched. With my right hand, I grabbed  
51 him by the back of the neck, behind the wedge of his head.  
52 That's the only safe place to hold a red diamond rattler. He  
53 squirmed a little, but this was nothing at all unusual. I  
54 pointed his head well out of reach and carried him over to  
55 the chair.

56 "I have no idea what got into him after that. For when I  
57 hoisted him over the sack and began to slide him in, all of a

58 sudden, he curled his tail and swung it out of the con-  
59 tainer. I tried at least a dozen more times, with exactly the  
60 same result. I finally decided the reason must be the sack. I  
61 released my grip at mid-body, reached down with my left  
62 hand, and widened its mouth. That meant I was holding  
63 Red just by the neck. When he felt himself slump, he gave a  
64 violent wrench. I almost thought I'd lost him. But I let the  
65 sack go and grabbed him again in time. The trouble was  
66 that the damage had already been done. Big Red wasn't  
67 used to that kind of treatment, and he was rapidly losing  
68 his temper. And before he lost it completely, I wanted him  
69 safely sacked.

70 "I started lowering him in once more, but this time he  
71 wouldn't cooperate at all. Instead, he gave the sack a slap  
72 with his tail, knocking it onto the floor. Now he was really  
73 mad. He opened his mouth to striking dimensions. That's  
74 wide—as wide as a pair of shears with the blades fully  
75 extended. I'd never had such a ringside look at his fangs.  
76 All were unsheathed and fully erect.

77 "At that point, I know now I should have hustled him  
78 right back to his cage for his temper to cool off. Neverthe-  
79 less, I still thought I could manage.

80 "Pointing his head as far out of reach as I could, I knelt  
81 down on the floor, leaned across his back, and caught the  
82 edge of the crumpled sack in my teeth. I pulled and yanked  
83 at it until it finally opened. So far, so good. Now it was  
84 time to get the sack over Big Red. He was getting madder  
85 and stronger by the minute, and I was puffing and blow-  
86 ing. I worked his tail through the mouth of the sack and  
87 carefully drew the sack up over his back. He was finally in  
88 enough to give his head that little jerk, and down he went.  
89 Then, holding the sack there on the floor about a foot in  
90 front of me, I started to get to my feet. I was only off-  
91 balance for an instant, but it was long enough for Big Red  
92 to come thrashing out. I felt a stab of pain in my left leg.  
93 His fangs were sunk into the underside of my knee.

94 "It had happened so quickly, so unexpectedly. My mind  
95 just seemed to go numb. But some part of me must have  
96 been functioning—some instinct or reflex or some-  
97 thing—because the next thing I knew, I had broken his  
98 grip and wrenched the sack away.

99 "It was seeing venom that started my mind working

10 again. There was a big yellow stain on the sack where  
 11 Red's fangs had pierced it, another on my trouser leg, and  
 12 some on the floor—a teaspoonful, it looked like. I knew  
 13 Red's venom glands had been full. He'd never been  
 14 milked, and he'd never been fed live food, so it hadn't been  
 15 necessary for him to discharge his venom to eat. The  
 16 amount of venom spewed around was fantastic. It didn't  
 17 seem possible that I could have received very much of a  
 18 dose. In fact, I almost considered going on with the weigh-  
 19 ing. Almost, but not quite.

0 "My leg was on fire—it was like somebody was carving  
 1 it up with a red-hot razor blade. My first real thought was  
 2 that I needed help.

3 "My immediate responsibility, of course, was to get Big  
 4 Red back into his cage. On the way, I looked at my watch.  
 5 It was exactly one-forty-five. We'd been struggling for fif-  
 6 teen minutes. That pretty well tells the story. No snake  
 7 will take that amount of handling without getting good  
 8 and riled. It wouldn't be natural for him. And while I'm at  
 9 it, I want to say that I don't think Red was particularly  
 0 mad at me. He was just mad, and I had the bad luck to be  
 1 within his reach. He was still mad and still dangerous. It  
 2 seemed that I got him caged up in no time flat. I untied the  
 3 sack and peeled it off. I couldn't leave him in it. He had to  
 4 be comfortable and free to get at his water. Then I locked  
 5 him up.

6 "My knee was beginning to hurt like heck. My whole left  
 7 leg felt afire. We always kept a snakebite kit in the serpen-  
 8 tarium. I stuck it in my pocket and headed for the nearest  
 9 telephone, which was in the corridor outside my office. I  
 0 didn't dare hurry, though. I knew enough to realize that I  
 1 mustn't stir up my circulation. In a way, I didn't want to  
 2 rush. It was embarrassing to call my supervisor, Dr. Wil-  
 3 liam House. A herpetologist really shouldn't be bitten. He  
 4 is expected to know better. I'll never forget our conversa-  
 5 tion that afternoon:

6 "I said, 'Dr. House, this is Gary Clarke. I've just been  
 7 bitten by a rattlesnake.'

8 "I can't really say what he said next. It wasn't a word. It  
 9 was like a moan, only worse. Then he said, 'Oh, no.'

0 "I told him I was afraid so.

1 "'O.K. I'll be right down,' he said.

142 "It would take a couple of minutes so I decided I'd better  
 143 start helping myself. I hobbled back to my office, sat down  
 144 at the desk, and rolled up my trouser leg. There was blood  
 145 all over. The fang marks were roughly parallel to my foot.  
 146 Luckily, Red had struck my leg in such a way that he  
 147 couldn't bring his jaws together for a full bite. I'd actually  
 148 only been stabbed.

149 "I pulled a rubber-tubing tourniquet from the snakebite  
 150 kit and whipped it around my leg, just above the knee. The  
 151 next step was to make an incision at the site of the wound,  
 152 for faster drainage; I had just finished cleaning the wound  
 153 when Dr. House came galloping in. Fred Baiocchi, the  
 154 first-aid representative for our section, and Curtis San-  
 155 dage, a senior chemist, were right behind him. Then came  
 156 a whole raft of others. Fred took a blade and made the  
 157 incision. It was a big one—about an inch and a half  
 158 long—but I hardly felt it. It was just another pain among  
 159 many."

160 Clarke was carried into the emergency room at Menorah  
 161 Hospital. A physician was waiting there to receive him.  
 162 The doctor briefly loosened the tourniquet to restore cir-  
 163 culation, preventing necrosis of the tissue. And since the  
 164 results of the serum sensitivity test were negative, he in-  
 165 jected antivenin into the puncture site and into the left  
 166 buttock. He made a second incision just above the knee  
 167 and gave two more injections of antivenin.

168 As a general supportive measure, doses of tetanus an-  
 169 titoxin and ACTH (adrenocorticotrophic hormone) were  
 170 administered, followed by a regular diagnostic examina-  
 171 tion. The findings revealed no cause for alarm. Clarke's  
 172 blood pressure, pulse rate and temperature were normal.

173 The physician dressed the several wounds, removed the  
 174 tourniquet, and injected a soothing shot of morphine.  
 175 That completed the emergency treatment. At two-forty-  
 176 five, or exactly one hour after he was bitten, Clarke was  
 177 formally admitted to the hospital and taken to a surgical  
 178 ward.

179 "By this time," Clarke said, "I'd lost all desire to get  
 180 back to the lab. I remember, at one point, asking the nurse  
 181 for a pencil and paper and trying to make some notes, but I  
 182 didn't have the strength to hold the pencil.

183 "The hospital made it worse. They kept after me every

184 minute—jabbing me with a thermometer, bringing me  
 185 something to eat or drink that I didn't want, or taking my  
 186 blood pressure. They had to, of course. With snakebites,  
 187 there's always the danger of shock. Fortunately, that  
 188 didn't happen. My blood pressure reached its lowest level  
 189 early the following morning, but still stayed above the  
 190 danger point. They also kept giving me injections—  
 191 penicillin, antivenin, morphine. I suppose the morphine  
 192 helped, but I didn't notice. It didn't give me what I'd call  
 193 relief.

194 "Around five o'clock that first afternoon, I tried to de-  
 195 scribe the pain to Margaret Ann. 'My leg feels like it was  
 196 run through a meat grinder and then had acid poured on  
 197 it,' I said.

198 "But that was just the beginning. It got worse. My leg  
 199 began to swell, and every stretch exposed another nerve.  
 200 The doctor looked in on me at six-forty-five. When he  
 201 pulled back the covers and changed the dressing, it was all  
 202 I could do not to yell. The feel of his breath on my knee was  
 203 something I just can't describe.

204 "And so were the next twelve hours. At eight-thirty in  
 205 the evening, my leg began to jerk. I tried to hold it still, but  
 206 I couldn't. I'd feel the muscles begin to contract, and—  
 207 wham! Another jerk. That went on for an hour or more,  
 208 until someone gave me another shot of morphine. I must  
 209 have dozed until some time after midnight. Suddenly, I  
 210 felt an awful wave of nausea—and I vomited. Oh, I was  
 211 sick, and completely out of control of any muscular con-  
 212 tractions. Every heave was like a blowtorch on my leg.

213 "An intern gave me an injection of Dramamine, which  
 214 finally stopped the retching; but by then I didn't care if I  
 215 made it or not. The scientist in me was gone; the patient  
 216 had taken over. I began to pray. I don't know exactly what  
 217 for. It wasn't either to live or to die. I think I just prayed to  
 218 take my mind off my misery. It was a distraction, a way of  
 219 making time move. My goal was seven o'clock. By that  
 220 time, I told myself, 'I will have been in almost unendura-  
 221 ble pain for six or seven hours—and lived through it. So I  
 222 can stand it from now on out. It can't possibly get any  
 223 worse.'

224 "I don't know whether it did or not. Pain is pretty hard  
 225 to measure beyond a certain point. I do know it didn't let  
 226 up. All day Thursday was just like Wednesday night. I was

227 too sick to eat. I only drank tea for breakfast. Lunch was  
 228 the same. I swallowed a little broth.

229 "The only thing I remember about the day was the  
 230 doctor's visit—because it was so horrible. By this time,  
 231 my leg looked like a log—swollen from just below the hip,  
 232 all the way down to my foot. It sported a dozen different  
 233 colors. The doctor decided to make some more  
 234 incisions—a series of six longitudinal cuts at intervals  
 235 around my thigh. On account of the pain, he shot my leg  
 236 full of procaine anesthetic. Every time he touched my  
 237 thigh with the scalpel, it burst open like an overdone  
 238 sausage.

239 "Thursday night was another nightmare. Even a full  
 240 grain of morphine—I'd never had more than a quarter  
 241 grain before—seemed to have no effect on the pain. On  
 242 Friday morning, November 6, I began to feel a little better,  
 243 but I still wasn't out of my misery. My leg still throbbed  
 244 and ached with every breath, but it was bearable now. And  
 245 my appetite came back. The reason was largely the cor-  
 246 tisonone they had given me early that morning. By noon I  
 247 was actually hungry, and when dinner came around, I was  
 248 starved. I cleaned my tray—a bowl of jello, a cup of broth,  
 249 a pot of tea—and I could easily have put away a steak. The  
 250 most important change was my attitude: My will to live  
 251 returned.

252 "I still had a long way to go. It would be another week  
 253 before I could leave the hospital, and much of that time I  
 254 felt awful. But I was never in such pain again or so low in  
 255 mind or spirit. I was beginning to recuperate at last.

256 "On Saturday, I started writing up my notes, and every  
 257 day I saw some improvement. By Sunday my leg began to  
 258 look like a leg once more. I could even bend it a little. The  
 259 following day I was able to hobble to the bathroom with  
 260 the aid of crutches. I almost enjoyed the rest of my stay—  
 261 except for visitors all the time. Everybody in the hospital  
 262 flocked around—interns, nurses, orderlies, even other  
 263 patients—to see what a snakebite looked like. They also  
 264 wanted to know what I was going to do to Red. They  
 265 thought I was counting the days until I could get my  
 266 revenge. And when they learned that I wasn't even mad,  
 267 they looked disgusted. They shook their heads and walked  
 268 away."

269 Clarke was discharged from the hospital on Friday,

November 13. He spent the next four days at home regaining his strength, learning to walk without support, and bringing his clinical notes up to date. The final entry in his record reads: "Area immediately around bite is still tender. Able to walk fairly well now. If my calculations are correct, I was punctured with the hypodermic needle more than 60 times in those days after I had been bitten!"

The morning of Wednesday, November 18, Clarke returned to work. After reporting to Dr. House, he hurried down to the laboratory, briefly conferred with his assistant, and then limped into the venomous serpentarium. "I wanted to see Big Red," he said. "I wanted to make sure that he was clean and comfortable. But there was also something else. I wanted to see what I felt. I wanted to make sure of myself. I looked at Red for quite a while. And it was all right. I didn't feel anything about him—only a deep and abiding respect."

### Selection 3 Comprehension Questions

*Decide whether each of the following statements is true or false according to the selection. Then mark T or F in the appropriate place.*

- 1. Big Red was ordinarily a very mild-tempered snake.
- 2. Clarke was bitten twice.
- 3. Big Red didn't have much venom in his fangs because he had been milked the week before.
- 4. Clarke's assistant was not available to help him because he was home sick.
- 5. Clarke went into shock for a short time on the evening of the bite.

*Choose the correct answer for each of the following questions and circle the letter before it.*

- 6. Which of the following statements is true?
  - a. Clarke was mad at Big Red.
  - b. The bite resulted in a serious infection where the fangs had pierced the skin.
  - c. Clarke's wife sat by his side for the entire first night.
  - d. For a while Clarke was going to take notes on his condition.
- 7. Which of the following statements is *not* true?
  - a. Clarke was dangerously close to death during the first night after the bite.
  - b. Clarke had Big Red out of the cage in order to weigh him.
  - c. Big Red had never been milked.
  - d. Clarke received several injections as part of the emergency treatment at the hospital.

8. Which of the following is at least part of the reason for Big Red being mad?
- Clarke had been struggling with Big Red for a full fifteen minutes—and that's too long for any snake to be handled without getting mad.
  - It was well past his feeding time.
  - He was accustomed to being handled by Clarke's assistant and wasn't used to Clarke's handling.
  - He was sound asleep when taken from his cage.
9. How long was Clarke in the hospital?
- Less than two days.
  - More than two days but less than one week.
  - Between one and two weeks.
  - About one month.
10. Which of the following actions did Clarke *not* take from the time he was bitten until his supervisor came in?
- He cleaned the wound.
  - He made an incision at the site of the wound.
  - He put Big Red back into the cage.
  - He put a rubber tubing tourniquet around his leg.