NOTE ON A CASE OF DEATH DUE TO JELLY FISH STING IN GULF OF MANNAR

The danger of jelly fish stings has been reported by Phisalix (1922), Pawlowsky (1927), Henderson (1945), Halstead (1957, 1959) and Barnes (1963). The venomous nature of the jelly fishes like Chiropsalmus sp. (sea-wasp), Cyanea sp. (sea-blubber), Dactylometra sp. (seanettle), and the siphonophores like Physalia sp. (Portuguese man-o-war) has been described by Light (1914), McNeil and Pope (1943), Pope (1953), Chu and Cutress (1954), Southcott (1959) and Halstead (1965, 1969).

Apparently death due to jelly fish sting has not been reported so far from India. On 8-7-1971, one fisherman from Keelakarai (Gulf of Mannar) was found missing during the operation of a shore seine in Appa thievu, an island seven miles off Keelakarai. When his body was recovered from the sea next day, there were blisters and inflammatory rashes on face, neck, right side of the chest and stomach. Some of the blisters had burst open exposing the wounds. These evidences seem to indicate death due the sting of jelly fishes like Chiropsalmus sp., which is known to occur in Gulf of Mannar and is known in Tamil as Naalu moolai chori (Naalu = four, moolai = corner, chori = jelly fish). Its sting is known to cause similar symptoms as above (Halstead, 1965).

Such a conclusion is also borne out by an earlier instance. In April 1971 a fisherman of the same village was also stung on the abdomen and waist. He could not be saved even though he was removed to a boat in an unconscious state immediately after the sting. He died before reaching the shore. It is also reported that the tentacles removed from his body, falling accidentally on others, caused severe pain and inflammatory rashes lasting three days. There appear to have been three deaths during this year due to the sting of the jelly fish in Keelakarai.

According to Halstead (1959) the symptoms of jelly fish sting are shooting pain, reddening of the skin followed by severe inflammatory rashes, blistering, swelling and minute skin haemorrhages. In severe cases in addition to shock there may be muscular cramps, abdominal rigidity, vomiting, sensation of constriction of throat, respiratory difficulties and convulsions resulting in death. Death may take place within 30 seconds to 3 hours, but the usual time is less than 15 minutes (Halstead, 1969) due to allergic shock and respiratory failure.

Applying alcohol over the areas of the sting or the removal of the adhering tentacles with sand, sea-weed or wet cloth is essential for preventing further release of nematocysts. Though morphine, intravenous calcium gluconate, oral histamines and dilute ammonium hydroxide or olive oil are used as medicament, there is no specific antidote for jelly fish sting (Halstead, 1959).

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