**Portuguese Man of War**

**Background:**

Jellyfish are sea creatures that have a nearly see-through (transparent) body with long finger-like structures called tentacles. The Portuguese Man of War, a relative to the jellyfish, has appeared in recent news due to reports of stings of children on Fire Island. While several types of jellyfish are relatively harmless to humans, a Portuguese Man of War sting, if left untreated, could cause severe pain as well as possible systemic reactions. The Portuguese Man of War, also known as a bluebottle jellyfish, is known for their blue/purplish gas filled bubble appearance and for living in warmer seas. The tentacles of a Portuguese Man of War, contain microscopic barbed stingers that when triggered by human touch, can penetrate the skin of an individual to release venom and cause severe injury. Even if found outside of the ocean, the Portuguese Man of War may still release venom if provoked by human touch. Essentially, it is imperative to recognize the dangers of the Portuguese Man of War, as well as to be aware of the recommended and immediate medical treatments.

**Most Dangerous Situations:**

While the Portuguese Man of War will cause immense pain for any victim, it is most deadly to smaller, younger swimmers. The danger of the sting from the man-of-war’s venom is directly proportional to the age and area in which the patient was stung. It is important to realize that skin thickness differs throughout the body and both women and children have thinner skin in comparison to men making them more susceptible to a potentially lethal event. If a child gets stung around the neck, venom can directly enter the bloodstream, which is the most common cause of death due to the Portuguese Man of War.
Risk Factors:

- Swimming on a downwind shore
- Swimming at times when jellyfish appear in large numbers (a jellyfish bloom)
- Swimming or diving in jellyfish areas without protective clothing
- Playing or sunbathing where jellyfish are washed up on the beach
- Swimming in a place known to have many jellyfish

Symptoms:

- Abdominal pain
- Changes in pulse
- Chest pain
- Collapse
- Headache
- Muscle pain and muscle spasms
- Numbness and weakness
- Pain in the arms or legs
- Raised red spot where stung
- Runny nose and watery eyes
- Swallowing difficulty
- Sweating

Important Patient Information (before contacting Poison Control):

- Patient's age, weight, and condition
- Name of the marine animal, if possible
- Time stung
Treatment:

Although the Portuguese Man of War and common jellyfish are two separate species, their effects to the human body cause very similar responses. Therefore, when treating a sting from either species you can follow the same protocol to provide the best patient outcome. Foremost, it is essential to treat patients outside of water to prevent further potential injury or agitation to the wound.

According to Diane Reggio, Poison Control Specialist, protocol treatments are as follows:

1.) Irrigate the area with seawater
2.) Using gloves, remove the tentacles manually
3.) Immerse the wound in hot water for 20 minutes
4.) Use vinegar if available

**WARNING:** Only use vinegar once tentacles are removed. If tentacles are not removed first, vinegar and other substances, including alcohol and baking soda, can activate unfired stinging cells that could worsen the injured area.

Continued Care:

After a sting by the Portuguese Man of War, home care treatments include painkillers, such as paracetamol and ibuprofen, to reduce pain and swelling. Ice is also advised to continue to improve the wounded area during post care. The rash may come and go for up to six weeks.
References


http://www.webmd.com/first-aid/tc/jellyfish-sting-home-treatment-topic-overview

http://www.mayoclinic.org/diseases-conditions/jellyfish-stings/basics/risk-factors/con-20034045


http://www.nhs.uk/Conditions/Stings-marine-creatures/Pages/Treatment.aspx

https://www.google.com/search?q=jellyfish+warning+sign&espv=2&biw=1081&bih=467&source=lnm
s&tbm=isch&sa=X&ei=yX2dVYytEIP3-QGmzIKYBQ&ved=0CAYQ_AUoAQ#imgrc=iVs6V_11J4xo9M%3A

Research conducted and document prepared by Sabrina Saleta & Alex Winter