**Bee Sting First Aid**

Insects in general cause a great deal of undue anxiety and many people are frightening to the point of not wanting to explore the outdoors. This is understandable if they have had a severe or at worst, an anaphylactic reaction from bee or wasp stings. Bee and wasp stings account for the majority of individuals who experience severe allergic reactions. However the vast majority only have local reactions. Please remember that honeybees can only sting once. After they sting you, they fly away and die because they have basically eviscerated themselves and they usually leave part of their intestine along with the stinger in the wound, as opposed to hornets and yellow jackets which can sting numerous times.

Initial signs and symptoms generally include immediate pain, followed by redness and a wheal will develop at the sting site. These can get rather large, even larger than a silver dollar, with redness. This is a histamine reaction, or the body’s reaction to the venom. It is not a reaction from the amount of poison that was delivered, a common myth.

**Bee Sting Treatment**

Treatment for the majority of stings is very simple and consists of cool compresses to the area, no ice. You want to remove the stinger by either pulling it out or scraping it. There was a lot of controversy regarding this, that if you pulled out a stinger from a bee that is still pumping venom, you will induce more venom. This has been studied at length and is also a myth. It does not matter how you get the stinger out as long as you remove it. The reason for that is it can cause secondary infection.

Antihistamines are helpful. Diphenhydramine is always in my pack when I am in the outdoors. You can also pick up other antihistamines, for example an H2 Blocker like Tagamet (generic name Cimetidine) which can also be helpful. You want to observe the individual for at least 24-hours. Most anaphylactic-type reactions will occur within the first 3-4 hours, usually within the first 30 minutes, where you will see an individual with generalized massive hives, itching, shortness of breath and difficulty breathing. These are medical emergencies and patients need to be transported immediately or as soon as possible as they are potentially life-threatening. The question now arises, should everyone carry an Epi-pen? Anyone can have a severe allergic reaction at any point in their lifetime, whether to a bee sting or to a new shampoo or soap product. If one is spending quite a bit of time in the outdoors or you know you are going to be out a week or so, even 3 days out to the mountains or a remove area, it would be very advisable to have an epi-pen. A Boy Scout leader once indicated to me that none of the members of his troop had a history of anaphylactic reaction. They were going out to Utah for a week that summer. He was asking whether he should have an epi-pen available. I told him absolutely yes, as we don’t know if one of these children will have an allergic reaction should they get stung by a bee, and why take the risk? Epi-pens are auto-injectible pens which anyone can use. They do need a prescription written in order to be carried. They are very easy to use. However it is important that individuals know when to use them, and they don’t just inject every time someone has a bee sting. They should only be used when there are signs and symptoms of a severe, anaphylactic type reaction.