

**CHIRACANTHIUM PUNCTORIUM VILLERS (ARANEAE: CLUBIONIDAE) :  
FIRST NOTE IN UMBRIA ON FOUR CASES OF HUMAN ENVENOMATION.**

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Spiders of the genus *Chiracanthium* (= *Cheiracanthium*) C.L.Koch, 1839 (Araneae : *Clubionidae*) commonly known as "sac spiders" have often been involved in cases of man's envenomation. They have been recorded with more than twenty species in Southern Africa, and also in USA, New Zealand, Korea, Japan and among the European countries, in Italy too. Reported herein are the cases of four people that were bitten by *Chiracanthium punctorium* Villers in different years, in Umbria, in areas around Trasimeno Lake, from August to September, while they were trying to get rid of it. The people bitten - three adults and one child - showed cutaneous necrosis at the site of the bite, shivers, sweat, nausea, vomiting, fever (38,8°C - 39°C) and, moreover, in one case also a circulatory breakdown was reported. The most recent case of these ones occurred in Castiglione del Lago: a woman was bitten on the tip of a finger of her left hand by a spider. Immediately, the victim had a severe stinging and burning pain locally, extending in a few minutes through the whole finger and within twenty minutes' time, unbearably, through the whole forearm. Furthermore, she had got shivers, her pains changed into paresthesia spread to the whole radial part of the left hand and both hands assumed a "tetanic spasm-like position" (attitude of "ostetrician's hand") with impossibility to clench her fist. As soon as the patient arrived at the first aid station of C. del Lago Hospital, she showed diffuse sweat and increasing difficulty to breathe, in particular to breathe in, presumably because of spasm of her respiratory muscles; there was no increase of her body temperature, her ECG was normal and her cardiac frequency was moderately increased. She was immediately given 4mg. of Bentaian and also calcium gluconate 10% by intravenous injections and Voltaren by intermuscular injection. In addition, she was given a phleboclysis with physiological solution and 10 ml of calcium gluconate. The patient's general conditions appeared clearly improved after a few minutes and her dyspnoea and her hand spasm disappeared. Pains remained severe five, six hours more and resolved within 48-72 hours. Although frequent cases such those we have reported are recorded in many places, *C. punctorium* is not regarded as a particularly aggressive spider and in laboratory conditions it is hard to induce it to bite. The unusual behaviour of this arthropod seems to be determined by the period August-September, during which it lays its eggs and must defend them. It is a spider that undoubtedly has to be known and above all has not to be provoked in the periods of greater aggressiveness.