

Abstract

Wasp stinging is a common environmental and occupational hazard in Sri Lanka. It has a myriad of presentation ranging from local reactions like oedema, urticaria and erythema to systemic envenomation with multiorgan dysfunction and anaphylaxis. We present a 54-year-old man who developed rhabdomyolysis, acute kidney injury and haematological evidence of thrombotic microangiopathy following multiple wasp bite. Renal histology revealed acute interstitial nephritis. Patient was managed in a multidisciplinary team approach resulting in a successful clinical outcome.

Key words: wasp sting, acute kidney injury, thrombotic microangiopathy, rhabdomyolysis