Abstract

Insect stings are common in Sri Lanka being a tropical country and out of which the majority are caused by order Hymenoptera. This wasps' sting causes mild localized skin reaction to toxin induced multi-organ involvement such as kidney, liver and blood cell lines. Our case report illustrates a patient who developed anaphylactic shock, acute kidney injury, toxic hepatitis and thrombocytopenia following wasp envenomation. Allergic acute coronary syndrome was excluded by normal ECG and 2D ECHO with negative troponin I. Complete recovery archived in about 5 weeks. Either direct effect of the toxins or consequences of anaphylactic shock is the cause for the organ injury. Generalized vasodilatation and organ hypoperfusion are the most recognized systemic effects of wasp stings. Established guidelines are not available on the management of wasp envenomation and management is categorized into three steps such as anaphylaxis management with adequate fluid resuscitation and correction of electrolytes, Preventing organ injury and organ support provision