Chapter 6

CONCLUSIONS

1. Coagulopathy in Green pit viper bites is a defibrination syndrome. Fibrinolytic system activation was found even in cases with normal coagulogram. TT and FDPs are two of the best screening tests.

2. *Trimeresurus albolabris* and *Trimeresurus macrops* bites cause fibrinopeptide A elevation in human. This effect is the most predominant *in vivo* effect of their venom.

3. The model of Green pit viper bites is compatible with disseminated intravascular coagulation with hyperfibrinolysis because plasminogen activator activity is elevated. t-PA level elevation was observed and was the most likely cause of high plasminogen activator activity. The mechanisms of t-PA release have to be further stidied.

4. The t-PA elevation may not be the most important mechanism of hyperfibrinolysis because of its low magnitude of changes and possible unresponsiveness to antivenin. Antifibrinolytic agent use is unlikely to be helpful before antivenin treatment

5. Fibrinolytic action did not respond to antivenin in some cases studied. The significance of persistent hyperfibrinolysis has to be elucidated.