



BROWN BUTTON SPIDERS

Brown button spiders (English); bruin knopiespinnepkoppe (Afrikaans)

THERIDIIDAE (*Latrodectus geometricus*)

DESCRIPTION

Size: total length: female 10-11 mm; male 4-5 mm.

Colour: in the female the colour of the abdomen varies from brown with distinct geometrical patterns (Fig. 1), to pitch black (Fig. 2) to cream (Fig. 4), but ventrally the abdomen has a distinct orange-red hourglass marking (Fig. 3); legs dark to faintly banded (Fig. 2). **Carapace:** longer than wide; **eyes:** 8 arranged in 2 evenly spaced rows; **abdomen:** globular in shape and the legs are moderately long and slender with the third pair the shortest, with no or few spines. The tarsi usually tapering, and tarsus IV with the typical row of slightly curved, serrated setae forming a comb. There is sexual dimorphism in size with male much smaller and different in colour.

HABITAT

This species is very commonly found in built-up areas usually outside houses. They make their webs in dark areas such as under window sills.

BEHAVIOUR

They construct three-dimensional webs in dark corners in a variety of microhabitats. There is a funnel-shaped retreat to the one side with strong supporting lines. Some resistance is felt when one touches them. The spiders make use of the same web over a long period of time and the small male is found on the border of the web of the female. This species can easily be recognized by the egg sacs which are covered with silk tufts. They live about one year and prey on a wide range of flying and crawling insects.

DISTRIBUTION

This is a cosmopolitan species and it was introduced in to South Africa.

MEDICAL IMPORTANCE

They produce a neurotoxic venom that can affect the nervous system. However, it causes a milder form of envenomation and is 3-4 times less venomous than that of black button spiders. **Symptoms:** The reaction usually restricted to bite site; localised muscle stiffness may develop; pain in regional lymph nodes may develop; abdominal pain and cramps sometimes experienced; restlessness, agitation and raised temperature may be experienced; bite site evident with red blanched area or localised rash in 80% of cases; occasionally localised increase in sweat secretion (small droplets); symptoms usually clear up within 1-2 days. In children or some adults a mild form of systemic envenomation (latrodectism) may develop. **Treatment:** antivenom in most cases not needed; symptomatic and supportive treatment recommended.

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SANSA—South African National Survey of Arachnida

