

熱帯地方におけるブルリ潰瘍

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Buruli ulcer, caused by *Mycobacterium ulcerans* is considered the third most prevalent mycobacteriosis after Tuberculosis and Leprosy. A largely neglected disease, it represents a serious treat to public health in poor and remote rural areas of endemic countries. Emerging since the eighties as an important cause of human suffering, the disease has been reported or suspected in more than 30 countries in the world. Although Africa remains the most affected region, Asia bears as well some endemic regions like Australia, India and Malaysia whether Buruli ulcer is an emerging or re-emerging remains subject of controversy. But, that Buruli ulcer is a neglected disease fits perfectly in the WHO definition of Neglected diseases. Although Buruli ulcer can prove extensively damaging to the skin, its awareness is very limited in the medical community as well as in the general public. This results in its under-recognition and thus its under-reporting. Its under-diagnosis or most frightening, its misdiagnosis can lead to life threatening consequences. We report here a series of 96 specimens of skin biopsy, obtained from the Agroyesum Catholic Mission Hospital in the Ashanti district of Ghana. Thirty % of the specimen in the series proved to be misdiagnosed lesions, other than Buruli ulcer. Among these, 1/3 were malignant lesions ranging from fibrosarcoma to malignant melanoma. The remaining were inflammatory tumorous conditions. The aim of the present study is to emphasize that Buruli ulcer can lead to confusion with the wide spectrum of tropical both parasitosis and infectious conditions that can mimic its different clinical presentation.

Buruli and the ulcers under the tropics
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