What is a Buruli Ulcer?

Buruli ulcer is a disease that causes significant skin ulceration; it is caused by the bacterium Mycobacterium Ulcerans.

The toxins made by the bacteria destroy skin cells, small blood vessels and fat under the skin, which causes ulceration and skin loss.

It occurs all over the world and is currently highly active on the Mornington and Bellarine Peninsulas

The infection can occur on any area of the body but often on exposed areas such as hands, legs and arms.

What are the causes?

While it is not known exactly how this disease is transmitted, to contract this infection the bacteria needs to get under your skin.

The bacteria has been isolated in mosquitos, soil and possum faeces.

Some theories include:

- Transmission from a mosquito bite.
- Through an open wound.
- Traumatic wounds whilst gardening.

It does not transmit from person to person.

How does it start?

- It can begin as a painless lump (nodule) then develop into an ulcer.
- A scab (covering an ulcer).
- Painful red area of swelling of the skin.

It can be itchy but most often it is painless and can take 1-9 months before a nodule or ulcer appears.

How is it diagnosed?

To diagnose a Buruli ulcer, a skin swab can be taken or a biopsy of the ulcer (under local anaesthetic).

We do both minor procedures at our clinics.

It takes less than a week to receive the results.

Currently the test is not covered by Medicare, so involves a cost of \$84.00 (payable to the pathology company).

What is the treatment?

Once a diagnosis is confirmed, a referral will be made to an Infectious Disease Specialist-Professor Dan O'Brien. He prescribes the antibiotics required (see below), which do not involve an out of pocket expense. The antibiotics are available through Rosebud Hospital Pharmacy.

Professor O'Brien's rooms are located at Geelong Hospital; however he also consults from Sorrento Medical Centre to provide convenient access for people living on the Mornington Peninsula.

- A 6-8 week course of antibiotics; usually a combination of Rifampicin, Clarithromycin or Ciprofloxacin – the dosage and combination will vary between patients, and at times, be changed according to their effect.
 (You will be given a list of side effects when prescribed).
- Regular blood tests and ECG (electrocardiogram), to check your response to the antibiotics.
- Regular wound dressings to monitor progress/changes and possible debridement of the wound. The ulcers are known to worsen before they get better once antibiotic treatment begins.

What are the costs involved?

You will be required to purchase the topical ointments and coverings that are required to dress your wound appropriately in addition to a fee to see our nurse.

We are aware of the commitment and the cost and aim to bulk bill you every second visit.

How to reduce the risk of infection

Protect yourself when outdoors:

- Use insect repellent (picaridin or DEET based)
- Cover up and protect existing cuts.
- Promptly wash and dress any scratches received after being outdoors.
- Wear long-sleeved shirts, shoes, pants and gardening gloves when gardening.

EARLY detection improves outcome

If you have a slow-healing skin lesion/ulcer/ persistent lump or swelling, **book an appointment immediately** with any of our GPs or nurses.

We are an experienced medical team who have successfully treated this condition for many years.

Our Locations:

Rye

2 Ozone Street, Rye 3941 Ph. (03) 5985 7776 Fax (03) 5985 7819

Dromana

1/251 Pt Nepean Rd, Dromana 3936 Ph. (03) 5981 4300 Fax (03) 5987 0891

Rosebud

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Blairgowrie

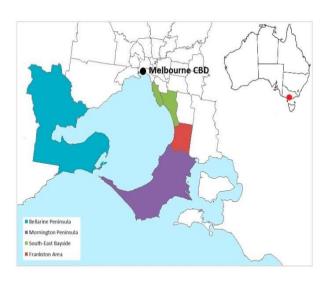
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MYCOBACTERIUM ULCERANS



Also known as the

BURULI OR BAIRNSDALE ULCER