

Differential Diagnoses of Buruli Ulcer in Akonolinga, Cameroon

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- Buruli ulcer (BU) is a neglected tropical disease resulting from infection by *Mycobacterium ulcerans*. Infection leads to destruction of skin and soft tissue causing large ulcers, usually on the legs or arms. Treatment is based on combination antibiotic therapy (rifampicin/clarithromycin or rifampicin/streptomycin), wound care, physiotherapy, and surgery if necessary.
- In partnership with the Ministry of Health, Médecins Sans Frontières (MSF) supports a program for the treatment of BU in Akonolinga, in the Center Region of Cameroon.
- For chronic wounds, there are many differential diagnoses of BU. Since the end of 2011, MSF has been particularly interested in improving the diagnosis of wounds to optimize the use of combination antibiotic therapy and appropriately treat non-BU wounds. This work is done in cooperation with the Geneva University Hospitals.
- Suspect Buruli lesions are evaluated by photographs, cytological samples, microbiological samples (PCR and culture), and skin biopsy for histology. Histology is performed at Institut Pasteur in Yaounde and reviewed at the Geneva University Hospitals.
- These cases of ulcers due to a cause other than *Mycobacterium ulcerans* could have been confused with Buruli ulcer. Without the contribution of laboratory tests, maybe they would all have been treated with combination antibiotics and would not have received appropriate symptom-based treatment.
- Clinical, biological and histological comparison is the key to diagnosis and appropriate treatment. Histology provides decisive elements and its use should be expanded.
- On this poster MSF presents 5 cases of differential diagnoses of BU in order to show the complexity of this kind of diagnosis.