

P0629

Poster Session II

Helminths

HAS DRACUNCULIASIS BEEN COMPLETELY ERADICATED IN AUSTRALIA? A RECENT SURGICAL EXPERIENCE WITH THE WATERBORNE DISEASE IN MELBOURNE

M. Pereira E Cotta¹, H. Sheorey², W. Morrison¹, J. Darby³

¹Bernard O'Brien Institute of Microsurgery, St Vincent's Hospital Melbourne, Fitzroy, Australia ;

²Microbiology, St Vincent's Hospital Melbourne, Fitzroy, Australia ; ³Infectious Diseases Unit, St Vincent's Hospital Melbourne, Fitzroy, Australia

Objectives: Transmission of dracunculiasis (Guinea worm disease), a waterborne parasitic disease, was thought to have been interrupted since 1981 in Australia through water sanitation efforts. However, in 2005 an incidental finding of *Dracunculiasis medinensis* (*D. medinensis*) was reported in Royal Perth Hospital in a Sudanese immigrant. We report a recent case of *D. medinensis* in Melbourne, Australia in a Sudanese migrant.

Methods: The patient presented with inflammation in the sole of his left foot and the medial aspect of his left Achilles tendon, however he was serologically negative. On radiology, calcified serpentine lesions were seen within the soft tissues of the sole of the foot and the ankle.

Results: Its characteristic appearance, combined with the patient's background, led to the diagnosis of *D. medinensis*. The calcified lesions were removed surgically and the patient recovered fully with good post-operative clinical results.

Conclusions: As a consequence of increased refugees and immigrants from affected nations, *D. medinensis* is still prevalent in non endemic countries like Australia. 89% of patients are usually asymptomatic hence requiring no treatment. The disease may have significant impact if affected migrants arrive during the incubation period, when the parasite emerges from the skin rather than calcifying. Thus, it is important for health personnel to be aware of dracunculiasis and its management in the Australian care setting.