

# Free treatment still too costly for Buruli ulcer patients

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Researchers have found that the fight against Buruli ulcer, a tropical skin disease, has hit a bump in Central Cameroon. Even as organizations provide free-of charge hospitalization care, patients' economic and social costs are preventing and delaying the treatment. Their study results are published October 15 in the open-access journal *PLoS Neglected Tropical Diseases*.

Buruli ulcer disease is caused by *Mycobacterium ulcerans*, part of the bacteria family that also causes tuberculosis and leprosy. The disease is present in over 30 countries, according to the World Health Organization, with the heaviest impact in Western Africa. The disease is characterised by long-lasting, hard-to-heal skin lesions which, in serious cases, can lead to amputation and deformities. Despite free treatment, hospital abandonment (patient abandonment by their families, and patients' abandonment of treatment) is a recurring problem.

To help determine the cause of this pattern, a study was carried out in Central Cameroon by PASS International. The research shows that the extra costs of transportation to the hospital, the earnings lost while caring for the patient, and other hidden expenses leave families needing to reduce or cut off all ties with their hospitalised family members. Over half (62%) of all patients at the time of the study were abandoned at the hospital due to the extra costs, which accounted for 25% of yearly earnings. With this in mind, many victims of Buruli ulcer either cease treatment before being healed or simply avoid seeking treatment in the specialised centres altogether.

This dynamic of abandonment is a serious issue, the authors say, because it jeopardizes the health of the victim and can lead to devastating future consequences such as deformity, disability, and loss of livelihood resulting in impoverishment.

The study concludes that bringing medical care closer to the victims could significantly reduce the social and economic burden of the disease. Since the time of the study, Leprosy Relief Emmaus-Switzerland, in close collaboration with Cameroon's Ministry of Health, has taken steps towards decentralisation of treatment, consisting of the early detection of the disease at the community level and antibiotic treatment at local health centres to reduce hospitalisation time. The evaluation of this decentralisation process could provide further insight into ways of improving patients' access to efficient treatment in low-income settings.

Citation: Peeters Grietens K, Um Boock A, Peeters H, Hausmann-Muela S, Toomer E, et al. (2008) "It Is Me Who Endures but My Family That Suffers": Social Isolation as a Consequence of the Household Cost Burden of Buruli Ulcer Free of Charge Hospital Treatment. PLoS Negl Trop Dis 2(10): e321. [dx.plos.org/10.1371/journal.pntd.0000321](https://doi.org/10.1371/journal.pntd.0000321)

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