

Column

Mbasu

Nathalie Bale



"Have you heard about the curse?," my cousin asked me. "The curse? What curse do you mean?" She opened YouTube and showed me a video of this mysterious curse.

All over Kinshasa, the capital of the Democratic Republic of Congo, people seemed to have been cursed. "They throw something at you and within several hours to days, your flesh starts rotting off your bones," my cousin said. There were people with different presentations. Skin lesions that, to me, looked like simple inflammations, bloody infected limbs and some people even had skin tumours on different parts of their bodies. 'Mbasu' they called it. Which means... well I don't know what it means in dialect, but it sounded like a serious curse to me nonetheless!

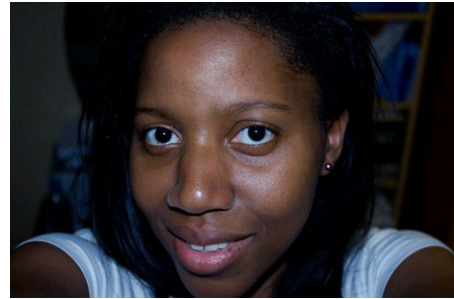
My cousin and I kept watching the video with both interest and horror. But, unlike my cousin, I tried not to think of it as a curse. Instead, I tried to imagine how it had gotten to this point. 'They throw it at you,' but what is it exactly? There were people with different presentations of it. I noticed the great amount of children that had deforming masses on their faces. As a medical student with at that time a minor in paediatric oncology, I started thinking about the possibilities. My tunnel vision was in full mode that day and my brain screamed 'Burkitt lymphoma!' It grows rapidly and therefore seems to come out of nowhere. The endemic variant is also known as the African variant and it often presents on the face. But the problem with my theory was that you couldn't throw it at another person. Moreover, cancer isn't contagious. What else could it be? It must involve some kind of human contact; another person has to throw Mbasu at you, after all. That, and considering the poor hygiene conditions in some parts of my capital, I figured a microorganism must be involved. Quite disappointing: no curse to scare people with. On the other hand,

I didn't recognise the disease. I'm not a perfect student, but I would have remembered a disease with such a broad and sometimes horrible presentation. Because I wasn't able to solve it, I ended up thinking that perhaps it really was caused by a curse after all.

What is it with some of us and superstition? Being a religious student in higher education is sometimes seen as negative. And even I, being as religious as I am, unintentionally don't have a high opinion of superstitious people who, for instance, believe in bad luck caused by crossing paths with black cats, or breaking mirrors. But then again, when this curse presented itself to me, I started to believe in it. And this was even just after watching an amateur video on YouTube. I wasn't even onsite to see what was really going on with my own two eyes. If I was, I'm sure that by the end of the day, I would have been running around town as well, screaming about how they throw the curse at people.

When I used to think about global health, I always thought about how I would go back to my country and improve the health system there in a blink of an eye. Mbasu made me realise I was forgetting one important thing: the people and their culture. My own culture in this case. You should never underestimate the role that culture plays in developing countries. It might be Mbasu, it might be a village chief wanting privileges. The fact is, we all have different beliefs and customs. Bringing change starts with understanding what you are changing.

Which brings me back to my curse. In the end, I found out it was a neglected disease caused by a member of the mycobacterium family, *M. ulcerans*. The same family that is responsible for leprosy and tuberculosis. The official name of the infection is Buruli ulcer, but I think I prefer Mbasu.



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Buruli Ulcer

Mycobacterium ulcerans disease, known as Buruli Ulcer, is a painless, necrotizing disease of the skin, subcutaneous tissue and bone. Left untreated it leads to severe handicaps, loss of livelihoods, and social stigmata. The disease is endemic in more than 30 countries, but is most frequently found in the tropical wetlands of West Africa. Worldwide it is the third most common mycobacterial infection after tuberculosis and leprosy. The mode of transmission and much of the pathology of Buruli Ulcer remains unknown.

Further reading:

"Buruli ulcer, a neglected disease", Menno Smit, Global Medicine 8.