## МУСЕТОМА.

## By A. M. BURKE.

We receive quite a number of cases into hospital suffering from this disease, which makes one come to the conclusion that it is fairly prevalent. I trust the small description I give below will be of interest to the readers of THE BRITISH JOURNAL OF NURSING. I enclose two photographs of typical cases nursed in the wards of the hospital I am in in Bombay.

Mycetoma is a disease found generally in warm climates. It is a fungus disease, the theory being that the parasite enters the part affected through a small abrasion or other small wound. It can attack any organ of the body, but the majority of cases I have seen have

chosen the foot, only in one case the hand getting the prefer-ence. Of course, in the hospital cases this was easily accounted for, the majority of the patients being Indian agriculturists, and therefore generally people who go barefoot. Frequently the history given by these patients was that a thorn had pricked the sole of the foot. A short while after they noticed a swelling. On closer questioning they would often say it was a '' Babul thorn.'' This is a thorny tree peculiar to certain parts of India.

At the commencement of the disease it

may easily be mistaken for tubercular disease of the joint. It starts by the foot getting enlarged and deformed (we will take the foot for example, as it is the part of the body most frequently found affected). Naturally the poor ignorant Indian at first resorts to hakims (quacks) and charms as his forefathers did; finding no relief, he seeks admission into hospital when the disease is in a fairly advanced stage. Very often the foot is plastered with a smelling yellow ointment, which I believe is composed of saffron, garlic, &c., and sometimes an anklet of peacock's feathers.

On looking at the photographs, you will notice the foot covered with what appear to be nodules, but in reality are a number of cysts or

Opening through these cysts and blisters. communicating with them are a number of sinuses, leading through the structures of the foot and in advanced cases reaching and piercing even the bone itself, the structures and bone having become a pulpy mass. Oozing from these sinuses is a perpetual flow, varying in quantity, of an oily purulent fluid, in some cases smelling abominably. In India, mycetoma is localized to certain districts only. Madura, in Southern India, seems to be the hotbed of this disease, therefore this complaint is often spoken of as "Madura foot." It is also to be found in Kashmir, the Punjab, Rajputana, parts of Africa, China, and South America. There is no cure for this disease : it is slow but sure, and if the limb, &c., affected is not



MYCETOMA-CYSTS COMMUNICATING WITH SINUSES.

removed by amputation, the patient eventually dies from exhaustion.

(Sir Patrick Manson, on page 850 in his book, "Tropical Diseases," says :—" The first indication of disease is the slow formation of a small, firm, rounded, somewhat hemispherical, slightly discoloured, painless swelling, perhaps about half an inch in diameter. After a month or more this swelling may soften and rupture, discharging a peculiar viscid, syrupy, oily, slightly purulent, sometimes bloodstreaked fluid, containing in suspension certain minute rounded greyish or yellowish particles, often compared to grains of fish roe.")

When the disease is in an advanced stage, the foot looks an oval shape, and the toes, as



