



Parasite found

While backpacking around South America and Africa, Nick Dall did battle with a skin-eating enemy he couldn't even see.

“Do you ever think about taking your own life?” the psychologist asked. “What?” I replied. “I’m just here for an infected mozzie bite.”

Maybe I shouldn’t have been so harsh on him. After all, I was in the preadmission queue at the HIV outpatient clinic at Groote

Schuur hospital. But mine was a special case. I’d e-mailed the head of the HIV programme, an international expert on infectious diseases, about the worrisome bite on my arm and he had agreed to look at it on condition that I waited my turn.

It had all started six months before, in the

Bolivian Amazon. I’d spent a few months in the jungle during the rainy season and my body had become a plaything for mosquitoes and sandflies. A while later, while cruising down the Rio Paraguay, one of the bites flared up forming a small, hard pyramid. It didn’t hurt but it smelled funny, even at the beginning.

The Chaco region of Paraguay isn’t exactly at the cutting edge of medical innovation and I had to make do with an antibiotic bought from a shack on a muddy riverbank. Unsurprisingly, the antibiotic didn’t work.

When I got to Posadas in Argentina about two weeks later, I went straight to the hospital. “*¡Infectadísimo!*” said the nurse.

A surgeon also happened to be on duty. He pumped my arm with anaesthetic and attacked the wound with a pair of forceps and, later, a scalpel. He bandaged it impressively and prescribed more antibiotics.

Later, in Uruguay, I was swimming in the sea and a tumble on the coarse sand in the breakers did my arm no good. The skin around the hole became hot and bubbly. Cracks formed like crazy paving and serum oozed from between the tiles. For the first time I could feel pain.

It was Easter and doctors were in short supply, but I managed to find a clinic in a neighbouring town. I was given yet another round of antibiotics, but after a few days there was still no improvement. I heard one of the doctors mention “gangrene”. I tried another antibiotic and, after a few days, my arm came back from the brink.

A period of limbo followed. I spent the next two months traipsing from one Argentine pueblo to the next, stopping at every local pharmacy to raid it of hydrogen peroxide and gauze. The hole didn’t get bigger or smaller, but it didn’t go away either. I learnt to dress my own wound.

More worrying, though, was that my arm hole wasn’t alone any more. A few more had appeared: one on top of my head; another on my baby toe; a third on my instep.

Somewhere along the way I met a Swiss girl with a scar behind her ear, who gave me a ziplock bag full of first-world bandages. On a previous trip to South America she’d contracted some awful parasitic disease with a name too long to remember and had to have chemotherapy get rid of it. This time she was taking no chances.

When I finally got home to South Africa I did the obvious thing and went to a dermatologist. What a waste of time. After some deliberation, we established that I wasn’t 16 and I didn’t have acne, and I paid the exorbitant bill.

Next I tried my GP, who was much more helpful. He cleaned the wound and prescribed a highly specialised waterproof dressing that I only changed every fourth day. Slowly, the holes started to close up.

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But back to the HIV clinic at Groote Schuur. The professor was the first person who saw my wound as anything other than an infected bite. He asked sensible questions:

“Where exactly did you go? Show me on this map.”

I indicated the southern half of South America.

“Where did you sleep? Were you ever in reed huts?”

“Only once or twice. For the most part I was in my hammock.”

“So you slept above the ground?”

“Pretty much.”

“And what bit you?”

“Mosquitoes and ants. And *marihui* – sandflies in English. They were a real bugger. Itched like hell.”

The professor did a quick Google search and established that *marihui* was the local name for one of the species that carries the protozoan parasite leishmania. He hadn’t done a biopsy yet, but he was pretty certain I had leishmaniasis. Basically, sandflies had implanted microscopic parasites into my arm, head and feet, which were systematically eating my flesh. My body’s natural response was to send rings of fighter cells in defence – hence the fact that all my wounds were round like bullet holes.

A biopsy was done in due course, and some blood tests. I was photographed and prodded by hordes of medical students and sent on my way. The professor told me that if I waited long enough, my body would eventually expel it.

So why, after everything I’d been through, did I decide to go fishing on Lake Turkana with my brother? I don’t know, but I went.

We had been planning the trip for months and neither of us would get a chance to catch monster Nile perch again anytime soon.

The trip was rough. It took 36 hours on the back of a truck just to get to the fishing spot and our tent blew down, with us in it, on the first night.

On the way home, in a dump called Maralal in Kenya, my condition worsened. My temperature spiked and a crater opened up on my back. An abscess developed on my cheek, which would later cause a moon-shaped patch of my beard to fall out. Having to push a minibus taxi out of a mudslide didn’t help; neither did spending a night on the floor of Jomo Kenyatta International Airport.

When I got home I immediately booked into the emergency ward at a private hospital in Cape Town. They hooked me up to a drip and I started to feel better. As the nurse sucked syringe after syringe of golden pus from my cheek, she asked with a smirk: “Was it worth it?”

The Kenya episode turned out to be nothing more than a temporary setback. Although my general health wasn’t great (11 courses of antibiotics in five months had set my immune system back 100 years, apparently), the wounds on my arm and head did heal. Slowly. After a few months, only a glistening purple dent about the size of a R5 coin remained on my arm.

Still, the volcano on my baby toe lingered. I tried to wear sandals and expose it to the sun, as advised. But one game of squash would reopen it and send me back to square one.

About a year later, in Peru, I boarded a crowded commuter bus in Lima. While I was trying to pay the fare, a petite woman in six-inch stilettos stormed past, stamping on my toe in the process. She didn’t even look back, but everyone else on the bus watched as a treacherous mixture of blood and pus oozed into my flip-flop.

I went to a chemist and got the hydrogen peroxide and gauze that I knew so well, ate a pizza and plotted retribution. There are 12 million people in Lima, though, so I soon gave up any hope of finding the stiletto-wearing woman.

I travelled onward, to Santiago in Chile, and by the time I got there my toe had miraculously healed. Once again I wanted to find that damn woman, only this time I would have thanked her!

After an 18-month dalliance with a flesh-eating parasite, I was on my own again. Would I miss my intruder? Not a chance.