



HUMANITARIAN DERMATOLOGY/MIGRANT HEALTH

AUSTRALIAN ABORIGINAL AND TORRES STRAIT ISLANDER DERMATOLOGY

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The Aboriginal and Torres Strait Islander peoples are the Indigenous population of Australia. The health inequalities facing Aboriginal Australians is well recognised, with a lower standard of health and a shorter life expectancy than non-Indigenous Australians. The burden of dermatological disease has been less well characterised. Certainly, the burden of several cutaneous infections such as scabies, dermatophytes, virulent forms of Staphylococcus and Streptococcus, HTLV-1 and Strongyloides is over-represented amongst Aboriginal Australians. Aboriginal patients are also at higher risk of specific complications such as rheumatic fever and glomerulonephritis as immunological sequelae from minor cutaneous infections. In comparison to the broader Australian population, Aboriginal Australians seem to have a low prevalence of several immunological diseases such as vitiligo, psoriasis and atopic dermatitis. They also appear to have a reduced prevalence of type 1 hypersensitivity reactions and skin cancer. In contrast, there is a higher incidence of lupus erythematosus, kava dermatopathy and vitamin D deficiency amongst the Aboriginal Australian population. It has been proposed that polymorphisms of MHC and other genes involved in immunological defence may account for heightened susceptibility to newly encountered infection and protection against many immunological and allergic pathologies. Overlaid upon these variances are psychosociocultural and financial barriers to health on a milieu of other comorbidities which are overrepresented in the Aboriginal community accounting for disparities in health outcomes.

A summary of the burden of cutaneous disease amongst the Aboriginal and Torres Strait Islander population is presented as well as the unique challenges facing this community. A case series of Aboriginal patients encountered in a rural dermatology practice in outback Australia is described.

