



## **Three students exposed to *Uraba lugens* (gum leaf skeletoniser) caterpillars in a West Auckland school**

José G B Derraik

Recently, Derraik has discussed in detail the public health issues regarding *Uraba lugens* Walker (Lepidoptera: Nolidae).<sup>1</sup> Commonly known as gum leaf skeletoniser, the caterpillars of this Australian moth feed on the foliage of gum trees (*Eucalyptus*) and other closely related plants.<sup>2</sup> *Uraba lugens* is firmly established in the greater Auckland region of New Zealand and, as a result, eradication is deemed to be not feasible.<sup>1</sup>

Most cases of harmful exposure to caterpillars seem to occur in young children, as these creatures are a source of curiosity to children due to their easy accessibility and slow mobility, and also the caterpillars' generally bright colours.<sup>1,3</sup> It is therefore not surprising that cases of exposure of school children to *U. lugens* are emerging in New Zealand.

This case report describes a recent incident in a West Auckland school.

### **Case report**

The cases were observed at a school in Avondale in mid-February 2007. Three girls of approximately 10 years of age were climbing a *Eucalyptus* tree within school grounds. Girl #1 allowed a caterpillar to crawl onto her arm, which she eventually shook off. Shortly afterwards the girl described feeling a "sting" on her arm.

Girls #2 and #3 do not appear to have handled the caterpillars intentionally but were exposed to them while playing on the tree. They account that a short time after the initial stinging sensation, this turned into an itch.

Approximately 15 minutes later they were taken to the principal's office where they exhibited some distress as a result of the intense itching they described as "horrible". Although the girls appeared to be in considerable discomfort, once reassured, they were relatively calm. Note, however, that the itching did not appear to be localised, but instead seemed to have been experienced throughout the girls' bodies.

The principal observed that Girls #2 and #3 had welts (a couple of millimetres in diameter) on their skin: Girl #2 on the back of the ankles, and Girl #3 on her forearm and thigh. Girl #1 also had welts, which were located on the on the back of her hands and lower arm. The latter welt was larger than all others that were observed and it was elongated, in the approximate shape and size of the caterpillar itself. Several skin rashes were also observed, but it is not clear whether these were a result of the girls scratching themselves, or the exposure itself.

A topical antihistamine was administered to the girls, which apparently offered them some relief. Once released from school their parents seem to have offered the girls some extra care, with one girl being bathed in Dettol<sup>®</sup> (antiseptic solution) and other being treated with a traditional Pacific Island herbal concoction.

The following day all the girls appeared to have no lingering itchiness or any form of discomfort. At least Girl #1 had visible welts on her wrists after 5 days, although these were slight.

The number of cases of child exposure to *U. lugens* in the Auckland region is unknown. Based on the information currently held by MAF Biosecurity New Zealand these appear to be rare, although there has been at least one previous case of exposure of kindergarten children in Manukau City. It seems that there have also been a few incidents of children exposed while on private properties.

It should be noted that no severe adverse reactions have yet been observed, as previously pointed out by Derraik.<sup>1</sup> Although exposure to *U. lugens* may still cause considerable discomfort, the reactions seem to be relatively minor.

### **Further information on *Uraba lugens***

*Uraba lugens* has been the focus of a long-term management programme aimed particularly at filling current knowledge gaps and controlling the existing population.<sup>4</sup> Although MAF Biosecurity New Zealand is no longer directly involved in the management of *U. lugens*, further information on this pest can be obtained from the organisation's website: [www.biosecurity.govt.nz/pest-and-disease-response/pests-and-diseases-watchlist/gum-leaf-skeletoniser](http://www.biosecurity.govt.nz/pest-and-disease-response/pests-and-diseases-watchlist/gum-leaf-skeletoniser)

Finally, the author would be interested to receive information from health professionals on any reports of exposure to gum leaf skeletoniser in New Zealand.

**Author information:** José G B Derraik, Senior Adviser (Human Health), MAF Biosecurity New Zealand, Ministry of Agriculture and Forestry, Wellington.

**Acknowledgements:** I thank Annie Wright and Mark Ross (MAF Biosecurity New Zealand), and John Fountain (National Poisons Centre, University of Otago) for their input and for revising this manuscript.

**Correspondence:** Dr José G B Derraik, MAF Biosecurity New Zealand, Ministry of Agriculture and Forestry, PO Box 2526, Wellington. Fax: (04) 894 0733; email: [jose.derraik@maf.govt.nz](mailto:jose.derraik@maf.govt.nz)

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