

Leishmaniasis

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Leishmaniasis Objectives



- **★** Define Leishmaniasis
- **★** Describe the clinical presentation
- **★** Describe diagnostic procedures
- ★ Discuss available treatments for Leishmaniasis

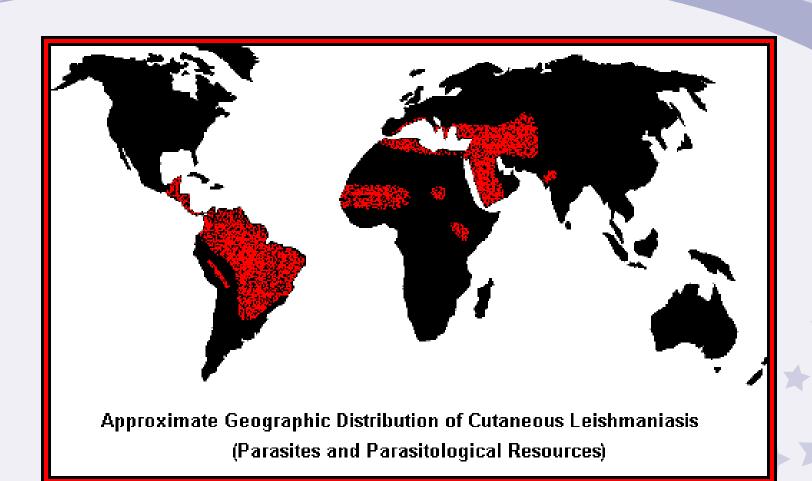
Leishmaniasis



- ★ Group of diseases caused by infection with one of the protozoan parasites of the genus Leishmania
- ★ Designated one of the five most important diseases worldwide by the World Health Organization
- ★ 20 million people infected worldwide

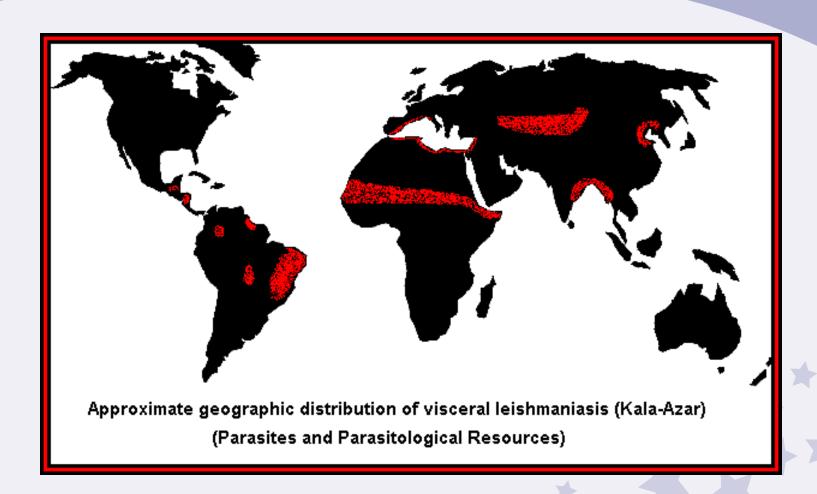
Geographic Distribution Cutaneous Disease





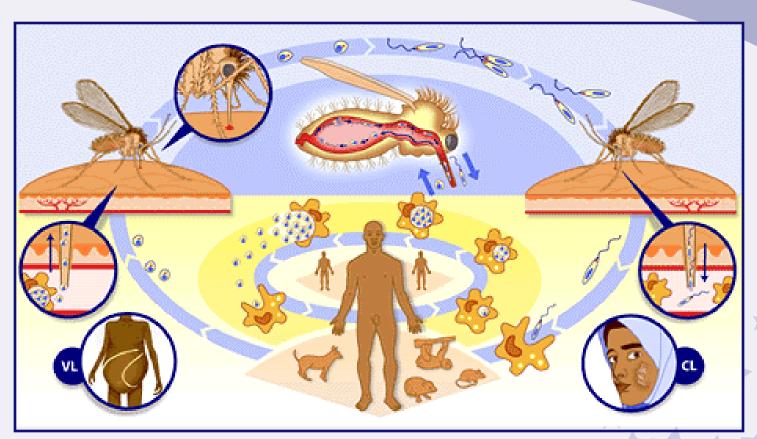
Geographic Distribution Visceral Disease





Life Cycle





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The Vector





Courtesy of Dr. Ed Rowton, WRAIR

Clinical Presentation



- ★ Cutaneous disease
- ★ Mucocutaneous leishmaniasis (Espundia)
- ★ Visceral disease (Kala-azar)

Localized Cutaneous Leishmaniasis



- ★ Baghdad boil, Aleppo evil, Chiclero's ulcer
- ★ Commonly presents as a non-healing ulcer
- ★ Incubation period ~40 days, but can range from days to a year

Cutaneous Leishmaniasis

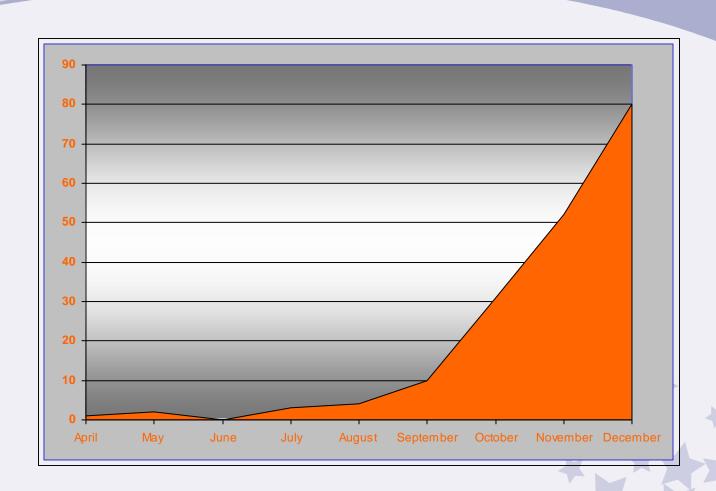


"In some cities infection is so common and so inevitable that normal children are expected to have the disease soon after they begin playing outdoors, and visitors seldom escape a sore as a souvenir. Since one attack gives immunity, Oriental sores appearing on an adult person in Baghdad brands him as a new arrival..."

Introduction to Parasitology, 1944

Number of OEF/OIF Patients





Localized Cutaneous Leishmaniasis





Localized Cutaneous Leishmaniasis (cont.)





Localized Cutaneous Leishmaniasis (cont.)





Localized Cutaneous Leishmaniasis (cont.)





Mucocutaneous Leishmaniasis



- **★** Espundia
- ★ Most commonly reported in the New World with L. braziliensis and L. panamensis
- ★ 1-3% of patients of all infected patients

Espundia





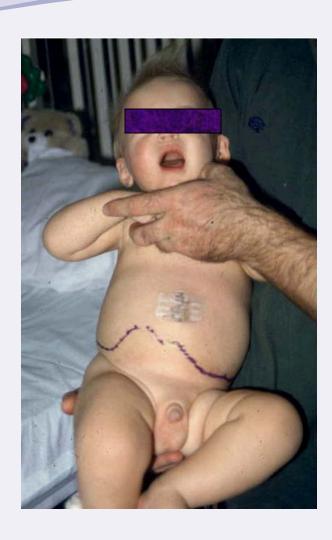
Visceral Leishmaniasis



- ★ Kala-azar (Hindi for black sickness)
- **★** Fever
- ★ Enlarged liver and spleen
- **★** Anemia
- ★ Usually affects children
- ★ Increasingly reported in HIV patients

Visceral Leishmaniasis (cont.)







Diagnosis



- **★** Cutaneous Disease
 - Tissue sample (scraping, aspirate or punch biopsy) for smear and culture
 - Sensitivity 75-90%
 - PCR
- **★** Visceral Disease
 - Bone marrow biopsy or splenic aspirate for smear and culture
 - Serology (rk39, various ELISAs)
 - PCR

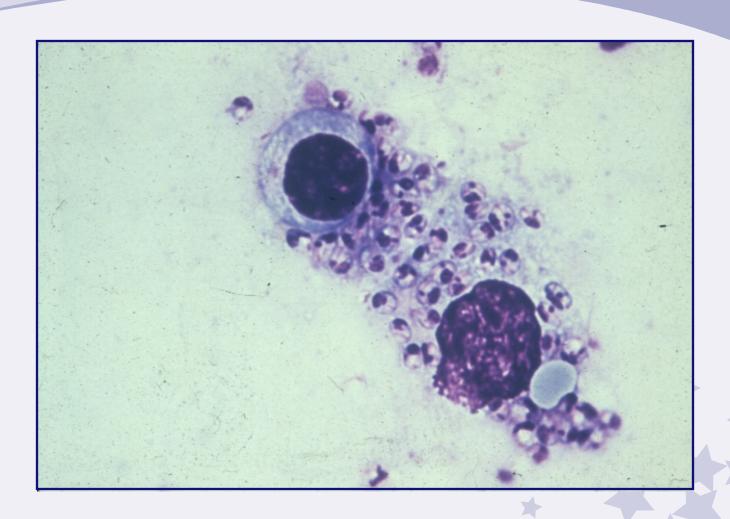
Diagnosis Histopathology





Diagnosis Histopathology (cont.)





Diagnosis Culture





Treatment-Cutaneous Disease



- ★ Most lesions go away in 5-6 months even without therapy
- ★ Local therapy (freezing, burning) for small lesions
- ★ Fluconazole once a day for 6 weeks
 - ~80% effective at 3 months (versus 34% in the placebo group)

Treatment-Cutaneous Disease (cont.)



- **★** Sodium stibogluconate (Pentostam)
 - Not licensed by the FDA
 - Extensively used in other countries
 - 20mg/kg/d IV for 10-20 days
 - >90% cure
 - Elevations in pancreas enzymes (97%), joint pains (58%) and liver irritation (67%)

Treatment-Visceral Disease



- **★** AmBisome (liposomal amphotericin)
 - 3mg/kg/d on days 1-5, 14 and 21
 - Only drug approved by the FDA
- ★ Pentostam
 - 20mg/kg/d for 28 days

Summary



- ★ Most likely presentation of leishmaniasis in a returning soldier would be cutaneous leishmaniasis
- ★ Chief complaint: non-healing skin lesion

Summary (cont.)



- ★ Suggest empiric routine care (antibiotics, wound care)
- ★ If no improvement after 2 weeks, then refer to WRAMC for evaluation
- ★ WRAMC assets:
 - Diagnosis
 - AFIP (Geographic Infections Branch)
 - WRAIR (Leishmania culture and PCR)
 - Treatment
 - IND for Pentostam
 - Infectious Disease Clinic, WRAMC 202-782-6740

Questions, Information, Assistance



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