INFECTIOUS DISEASES (BACTERIAL, FUNGAL, VIRAL, PARASITIC, INFESTATIONS)

A RARE PRESENTATION OF MUCOSAL LEISHMANIASIS

J Lóss [1] - L Muratori [1] - K Peruzini [1] - J Dutra [2] - L Lionello [3] - E Villar [4] - R Estrella [1] - P Dadalti [1] - Mf Gavazzoni [1]

Universidade Federal Fluminense, Dermatology, Niteroi, Brazil [1] - Universidade Federal Fluminense, Otolaryngology, Niteroi, Brazil [2] - London School Of Economic And Political Science, Economic And Political Science, London, United Kingdom [3] - Universidade Federal Fluminense, Dermatopathology, Niteroi, Brazil [4]

Background: Tegumentary Leishmaniasis (TL) is one of the major endemic diseases in Brazil and Latin America, with registered cases in all Brazilian regions. It is a non-contagious infectious disease, caused by Leishmania protozoa, which is transmitted by sandflies of Phlebotomus and Lutzomya species, affecting mainly the skin and mucosa. Mucosal leishmaniasis (ML) is a form of TL that affects mostly the mucosa of superior respiratory tracts. It is considered the most severe presentation of TL, due to its capacity to cause wide destruction and deformities if not diagnosed early. We present a case of ML in a 65-old-woman, with important destructions of nasal structures.

Observation: The patient presented destruction of the nasal architecture, absence of anterior septal cartilage and an ulcerate lesion, with granulomatous aspect and hemorrhagic spots, localized at the base of the vestibules. She reported epistaxis episodes and nasal obstruction, but denied pain in the lesion. At the nasoendoscopic examination, the mucosa of right and left nasal cavities was hyperemic, with adhered crusts and thick yellow-green secretion. Ulcerated lesion was observed in the upper third of the rhinopharynx. Histological analyses revealed mucosal epithelium with a chronic granulomatous inflammatory process Montenegro Skin Test (MST) was positive. Imprint for amastigotes forms was negative. Polymerase Chain Reaction assays were not available.

Key Message: The delay in Mucosal Leishmaniasis diagnosis can lead to aggravation of the disease, with severe deformities. The clinical diagnostic may be difficult, and only histopathological study sometimes is not conclusive. As seen in this case, Montenegro Skin Test might be essential for diagnostic conclusion.