



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

CUTANEOUS LEISHMANIASIS SUCCESSFULLY TREATED WITH INTRALESIONAL INJECTION OF PENTAVALENT ANTIMONIAL AGENT

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Background: Leishmaniasis is a chronic disease caused by the protozoan *Leishmania* that is transmitted through infected mosquito bites. Host immune response and *Leishmania* species involved determine the clinical subtype of the disease (cutaneous, mucocutaneous, visceral).

Observation: We report the case of a cutaneous leishmaniasis in a previously healthy, 10-year-old child, presented with a 2-years history of an erythematous, depressed-center and bosselated surface frontal nodular lesion, approximate dimensions of 2 × 1 cm.

The child reported a local stinging sensation prior to the cutaneous lesion appear without identification of the agent.

An incisional biopsy demonstrated a dense dermal infiltrate consisting of lymphocytes and monocytes, abundant epithelioid cells forming occasional granulomas, and Leishman bodies (large mononuclear elements with numerous markedly basophilic granules).

A cryotherapy cycle (3 cycles of 10 seconds) was performed in combination with 8 weeks of itraconazole (5mg / kg). However, after this treatment, the patient maintained the lesion with only very slight improvement.

Owing to the absence of clinical response to treatment research of *Leishmania* DNA was conducted in the cutaneous fragment of the biopsy, and it was positive to *Leishmania tropica* / *major* / *aethiopica*.

Intralesional injection of meglumine antimoniate - 2 injections with a 15-day interval was used as a second line therapy with complete resolution after 2 months.

At the 6-month follow-up only mildly scarred lesion was evident and no pharmacological side effects, such as analytical changes, were observed.

Key message: Since cutaneous leishmaniasis is not a potentially fatal condition and progression to mucosal forms of the disease is rare, the risk-benefit of therapy should be considered, giving preference to local treatments. The present case demonstrates the therapeutic benefit of a simple, effective and safe technique in the treatment of cutaneous





leishmaniasis.

