

CUTANEOUS LEISHMANIASIS

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Summary

Twenty patients with cutaneous leishmaniasis were treated with metronidazole. None of the patients showed any improvement.

Oriental sore is a chronic ulcerating granuloma of the skin, which heals with scarring and is usually observed on exposed parts of the body. It is caused by the parasite *leishmania tropica*. The disease is transmitted by sand fly (*Phlebotomus papatasi*). Incubation period for the disease may vary from 2 weeks to a year. Males and females are equally susceptible to the disease. It is more prevalent in tropical countries, particularly North Africa, North India, West Pakistan, West Asia¹ and South America².

Curistofor³ reported cutaneous form of leishmaniasis from India in which the parasite was demonstrated. Dutt and Mathur⁴ stated that the disease is prevalent in many areas of Rajasthan (North India) but is endemic in certain dry and desert areas of the State.

Different modalities of treatment have been tried in this disease namely, systemic antimony salts, local treatment like cryotherapy and radiotherapy. No treatment has so far been found uniformly satisfactory. Other drugs which have

been tried are trimethoprim, Sulfamethoxazole combination and metronidazole. Beltran et al⁵ reported 78% success with metronidazole and Long⁶ in his solo case has also reported excellent result with this drug.

Although Bryceson⁷ recommends that local treatment should not be accepted, our results with berberine citrate locally has been good.

Being encouraged by the reports on metronidazole in cutaneous leishmaniasis, a series of 20 patients were put on a trial with this drug.

Material and Methods

The present study includes 20 patients with oriental sore. The diagnosis was made by demonstration of *leishmania tropica* in tissue smear or in skin-biopsy (Fig. 1). All the patients were in the age group of 8 to 30 years. There were 12 males and 8 females. The duration of the disease in all the patients varied from 1 to 8 months (Table 1) and the number of lesions varied from 1 to 13 (Table 2). Lesions were seen mainly on the exposed parts of the body.

All the patients were put on tab. Metronidazole (200 mg), 1 tab thrice a day for 2 weeks. All were followed up for 2 weeks.

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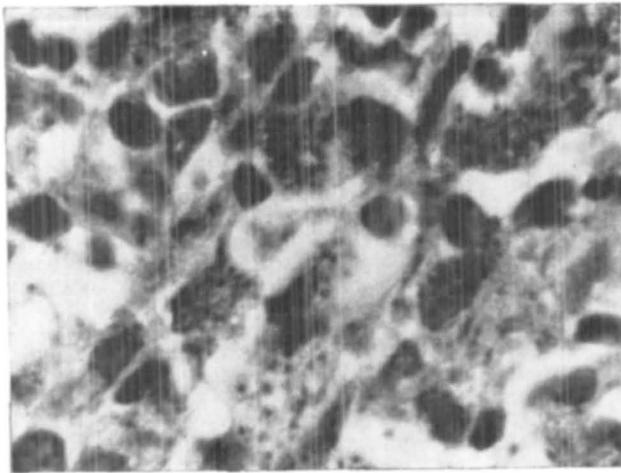
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TABLE 1
Showing duration of the disease and age of the patient

Age in years	Duration of the disease (in months)								Total
	0-1	1-2	2-3	3-4	4-5	5-6	6-7	7-8	
0-5	—	—	—	—	—	—	—	—	—
6-10	1	1	—	—	—	—	—	—	2
11-15	—	1	2	—	—	—	—	—	3
16-20	—	3	3	—	1	1	—	—	8
21-25	—	3	—	1	—	1	—	1	6
26-30	—	—	—	1	—	—	—	—	1
Total :	1	8	5	2	1	2	—	1	20



Showing L. T. Bodies

TABLE 2
Showing number of lesions

Number of cases	Number of lesions		
	1-4	5-8	More than 8
20	17	3	0

Results

In the present series 20 patients with oriental sore were treated with metronidazole 200 mg three times a day for a period of 2 weeks. None of them showed any improvement.

Discussion

Very little is known from the literature regarding the efficacy of metronidazole in the treatment of oriental sore. Long⁶ had successfully treated

his solitary patient with cutaneous leishmaniasis with metronidazole 250 mg three times a day for two 'ten day' periods with an interval of ten days. Beltran et al⁵ observed 78% recovery rate in a series of 30 patients with cutaneous leishmaniasis (Mexican) with 250 mg of metronidazole given every 12 hours for a period of 15 days. Our results with this drug have however been disappointing; none of the patients having shown any improvements. It is possible

that there are different strains of leishmania tropica which exhibit difference in sensitivity and therefore different response to the same therapeutic agent. Perhaps more extensive studies are required to evaluate the efficacy of metronidazole as a therapeutic agent in cutaneous leishmaniasis.

References

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4. Dutt PK and Mathur MP: Treatment of oriental sore by radiotherapy. J Ind Med Ass, 24: 620, 1955.
5. Beltran FH, Gutierrez M and Biagi FF: Utilite du metronidazole dans le traitement de la leishmaniose Cutance Mexiciane Bull
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PRESIDENT'S APPEAL

Dear Members,

I have great pleasure to inform you that in response to the popular wish of the members, we are organising the VIII Annual Conference of the Indian Association of Dermatologists, Venereologists and Leprologists at Goa Medical College from 22nd January to 24th January, 1980. Elsewhere in this journal, you will find announcement by the Organising Secretary Dr. V. L. Rege, regarding the conference.

Invitation along with the detailed information is being sent to all the members by the Organising Secretary.

I, therefore, take this opportunity to appeal to all the members to make it a point to attend the conference and make it a grand success.

With all best wishes,

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Dated: 25th September, 1979

Dr. B. M. S. Bedi,
M.D., M.A.M.S.,
President (IADV & L)