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Cutaneous leishmaniasis

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Abstract

Background: Leishmaniasis is a disease caused by parasites of the *Leishmania* type. Cutaneous leishmaniasis is a neglected worldwide, zoonotic, vector-borne, tropical disease. The clinical spectrum of leishmaniasis ranges from a self-resolving cutaneous ulcer to a mutilating mucocutaneous disease and even to a lethal systemic illness. People who recover from cutaneous leishmaniasis are protected against future infections. The risk of infection is for people of all ages if they live or travel where leishmaniasis is found. Leishmaniasis usually is more common in rural than in urban areas, but it is found in the outskirts of some cities. The transmission risk is highest from dusk to dawn because this is when sand flies generally are the most active. Cutaneous leishmaniasis causes skin lesions, which can persist for months, sometimes years. The skin lesions usually develop within several weeks or months after the exposure but occasionally first appear years later. Presented here is a clinical case of leishmaniasis of the cutaneous form, diagnosed by the microscopic method. The patient was diagnosed, monitored and treated in Clinical Hospital of Infectious Diseases "Toma Ciorba" from 10.01.2018-09.02.2018. The progression of the disease was favorable following the etiotropic treatment with antimony meglumine (Glucantime), requiring careful monitoring due to adverse reactions.

Conclusions: Clinical symptomatology was characteristic for cutaneous leishmaniasis: skin lesions of various pink-cherry sizes, some with ulcers on the body. The first etiotropic treatment with antimony meglumine was effective. Antimonate Meglumine treatment at a dose of 15 ml resulted in adverse reactions: asthenia, fever, myalgia and arthralgia.

Key words: cutaneous leishmaniasis, diagnosis, treatment, adverse reactions.