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## CASE REPORT: CUTANEOUS LEISHMANIASIS

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**Abstract: Introduction:** American Cutaneous Leishmaniasis (ACL) is a disease caused by protozoa of the genus Leishmania, and is transmitted to humans by the bite of infected sandfly mosquitoes. It is a non-contagious disease, with chronic evolution, which affects the skin and cartilaginous structures of the oropharynx, in a localized or diffuse way. The incidence of ATL in Brazil is closely related to the proximity of the population to wild places, a factor that makes the region of Maringá-PR an endemic area for the disease. Goal: To report a case of cutaneous leishmaniasis refractory to treatment. Case Report / Experience: V.S, 56 years old, male, resident in Maringá-PR, hypertensive under treatment. He was referred for an outpatient consultation with a complaint of skin lesions in the nasal region and in the left upper limb. It has the habit of fishing in the vicinity of rivers in the region. On physical examination, the presence of ulcerative infiltrative lesions on the nasal dorsum, extending throughout the external nasal wall. She reports a sensation of tingling and itching in the region of the lesions and denies pain. In the etiological investigation, the patient reported previous episodes of cutaneous leishmaniasis at the end of 2019 and 2020, having been treated with Glucantime for 30 days on both occasions, with subsequent reappearance of the lesions in June 2021. In view of the clinical finding and epidemiological correlation, treatment with Liposomal Amphotericin B is instituted, at a dose of 400mg/day, for 10 days, and medical return after 20 days. Conclusions: The present case depicts a form of cutaneous leishmaniasis, and the patient reports sporadic visits to endemic regions, providing us with an important aspect for the diagnosis. Regarding treatment, pentavalent antimonials are the drug of choice, while Amphotericin B is indicated in the most severe cases and in patients who

do not respond to the initial treatment. As reported, the patient used Glucantime in two consecutive episodes, with subsequent recurrence of the disease, thus, treatment with Amphotericin B was instituted. Thus, we conclude the importance of the association of clinical findings, for example the lesion in question. Epidemiological surveillance associated with educational methods with the population becomes valuable tools for controlling the disease.

**Keywords:** Injuries. Leishmaniasis. Skin. Treatment.