



Leishmania can produce permanent disfiguring scars Beirut, 2 October, 2014 – WHO Lebanon has provided 10 000 ampoules of Glucantime to the Lebanese Ministry of Public Health in response to the ongoing outbreak of leishmania.

As of October 2014, the surveillance system at the Ministry of Public Health has detected 1383 cases of cutaneous leishmaniasis in Lebanon. Cutaneous leishmaniasis is a disease rarely seen in Lebanon. Cases have been mostly among displaced Syrians (98%), with almost a third under 5-years of age.

Cutaneous leishmaniasis, caused by *Leishmania tropica* has long been associated with Aleppo in Syria, where it is known as the “Aleppo Evil”, “Aleppo ulcer”, “Aleppo boil”, “Aleppo button” or “habbat halab”.

Although cutaneous leishmaniasis is not a life-threatening disease, the condition can produce permanent disfiguring scars on the face, especially of young people. It typically lasts one or two years before the lesion heals spontaneously. Scars can be particularly stigmatizing.

Cutaneous leishmaniasis is mainly found in areas associated with poor waste disposal. Water shortage, poor sanitation and lack of other public services combine to create ripe conditions for transmission of the disease. It is a vector-borne disease transmitted by infected sandflies (*Phlebotomus papatasi*).

WHO has supported the Ministry in developing a strategic response plan, strengthening the

surveillance system, developing updated national treatment protocols according to WHO guidelines, establishing a referral system, establishing 12 treatment clinics across Lebanon, training dermatologists and internists on biopsy techniques and leishmaniasis treatment protocol, procuring medications and biopsy equipment and producing public awareness and health education material.

The drug Glucantime, which is injected directly into the sores, is the first-line treatment and is not a commercially-available medicine.

The procured medications is part of the EU/IFS project funded by the European Union, procured and distributed by the World Health Organization, in partnership with the United Nations High Commissioner for Refugees in the context of a project led by the Ministry of Public Health.

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