

In Tunisia, zoonotic cutaneous leishmaniasis due to *L. major* is considered a major public health problem. The reservoir host rodents include *Psammomys obesus*

,
Meriones shawi

and

Meriones libycus

. The only known vector is

Ph. papatasi

. Sporadic cases of zoonotic cutaneous leishmaniasis due to variants of

L. infantum

occur in the north of the country.

In the last four years a decrease has been observed in the annual incidence after control interventions were implemented. Currently, the annual incidence is approximately 30 per 100 000 people. However, more long-term assessment is needed to confirm this trend. Control activities include passive case detection and treatment of cases and ecological surveillance for the emergence of rodents in areas where chenopods were ploughed and replaced by acacias.

Typical *L. tropica* has not been identified in Tunisia, but a distinctive variant, MON-8, occurs in the arid south-eastern region of Tataouine. Because of its enzymatic distinctiveness this has been named *L. killicki*. Little is known of the epidemiology of this form, which causes about 30 cases annually. *Ph. sergenti* is suspected to be the vector, and there is circumstantial evidence that it is zoonotic.

Leishmania amastigotes have been observed in *Ctenodactylus gondii*, caught in the surroundings of the dwellings of those affected cases. MON-8 isolates have recently been found in sporadic cases from other areas in the southwest and centre of the country. There is a need to develop tools to predict zoonotic cutaneous leishmaniasis epidemics. It is important to integrate clinical/epidemiological research into primary health care and community levels to ensure sustainability, conduct clinical/epidemiological research and further promote current good clinical practices.

Saturday 17th of May 2025 01:22:49 PM