



## Warning against increasing cases of cutaneous leishmaniasis and unavailability of meglumine in Pakistan

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Leishmaniasis is a protozoal disease transmitted by sandfly vectors. The disease is endemic in 88 countries, maximally affecting the populations of underdeveloped countries such as Pakistan, India, Brazil, Ethiopia, and Somalia, particularly their rural and mountainous counterparts. The increase in the incidence of leishmaniasis is becoming a global health concern, with 0.7 to 1.2 million new cases annually.<sup>1</sup> According to WHO, 21,000 cases are reported in Pakistan annually, predominantly in Sindh, Dadu, Larkana, and Quetta.<sup>2</sup> A notification alert has been released by the Directorate General of Health Services Punjab on June 5, 2023, raising concern about the alarming increase in cases of cutaneous Leishmaniasis in Punjab. The Communicable Disease and Epidemic Prevention & Control Program (CD&EPC) also highlighted the same issue.<sup>3</sup>

In cutaneous leishmaniasis, the lesions occur on the exposed parts of the body, particularly the face, neck, arms, legs and over bony prominences. The incubation period varies from a few days to a year. Cutaneous leishmaniasis can be treated with intralesional meglumine antimoniate or sodium stibogluconate. Meglumine antimoniate was found to be significantly more effective than intralesional sodium stibogluconate, regardless of any parameter such as age, gender, lesion site and type of lesion ( $p < 0.005$ ).<sup>4</sup> Some acute lesions are self-healing, while most need therapeutic intervention. Injections of 20 mg meglumine antimoniate per kg of body weight are given daily for 28 days. Lesions show resolution in 4 weeks after treatment with post-inflammatory hyperpigmentation and scarring.

According to a study conducted in Bajaur, Pakistan, the incidence of leishmaniasis was found to be very high. Approximately 198 patients were treated with intramuscular and intralesional injections of meglumine antimoniate. Results showed that 48% of them recovered, while the remaining patients left treatment at different stages of therapy.<sup>5</sup>

While meglumine antimoniate is effective, Pakistan faces a significant issue, not just with a shortage of this drug but with its complete unavailability, as no pharmaceutical company manufactures it locally. The unavailability of meglumine antimoniate worsens the disease progression in many suffering patients. Newer drugs are not available, nor are there any other studies regarding them.

So far, public awareness and self prevention is the most reliable resort. As for the treatment and management aspects of the disease, the unfavorable status of the lack of this drug in Pakistan needs to be highlighted and considered by the concerned higher authorities. Intralesional meglumine antimoniate should be approved and registered to facilitate its manufacture in Pakistan locally, so the increasing incidence of this disease can be tackled and everyone can access this drug.

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#### CONFLICT OF INTEREST

Authors declare no conflict of interest, whether financial, personal or otherwise, that could potentially bias or influence the content, perspectives or conclusions presented in this piece.



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