

**ANALYSIS OF CLINICAL FEATURES WITH MICROSCOPY OF CUTANEOUS LEISHMANIASIS SUSPECTED PATIENTS ATTENDING THE DERMATOLOGY CLINIC AT GENERAL HOSPITAL HAMBANTHOTA.**

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**ABSTRACT**

Cutaneous leishmaniasis (CL) is now an endemic disease, caused by *Leishmania donovani* Mon-37 strain in Sri Lanka. CL in Sri Lanka is known to give a clinical spectrum. The parasite burden in different clinical presentations has not been assessed in detail yet. Therefore the aim of this study was to assess the parasite load with the clinical presentation of cutaneous leishmaniasis lesions of patients presenting to dermatology clinic in the Hambanthota General Hospital.

Clinical presentations of the suspected CL lesions of 87 patients were examined and photographed with written informed consent. Clinical diagnosis was confirmed by detecting Leishman Donovan (LD) bodies in slit skin smear (SSS). Parasite count of SSS was obtained in different clinical manifestations in accordance with the WHO grading by double blind method.

A wide range of clinical presentations were observed; Clinical manifestations were categorized as papules, nodules, nodulo-ulcerative lesions, ulcers (dry/wet) and plaques. 49/87 clinically suspected lesions were positive by SSS. Most frequent clinical presentations were nodules (40%) and dry ulcers (34%). Duration of the lesions varied from 1-6 months (83.9%). The sites of the lesions were arm, leg, forearm, face, ear, neck, abdomen, and chest. All lesions were on exposed areas of the body.

Mean parasite grading obtained according to WHO classification was as follows; Dry ulcers (3.5), plaques (3), Satellite lesions (3) nodules (2.25), Papules (2), wet ulcers (2), and Ulcerative nodules (1.25).

Results of this study indicate that, the nodules and ulcers which are rich in LD bodies could be the main human parasite source for transmission in the community.

**KEYWORDS**

Cutaneous leishmaniasis, *Leishmania donovani*, Slit skin smears, clinical presentation

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