

Microbial perils of the jungle: A case of cutaneous leishmaniasis in an immigrant from South America

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Background: Cutaneous leishmaniasis (CL) is an important cause of nonhealing lesions in those who have recently immigrated to the United States from endemic areas, such as South and Central America. We present a case of CL caused by *Leishmania panamensis* in an immigrant originally from Chile.

Case Description: A 36-year-old male presented to the emergency department with nonhealing lesions on his left arm and forearm. The lesions first appeared about two months prior while the patient was traveling through a jungle between Columbia and Panama during his migration to the United States. He was treated with various antibiotics in the past month without any improvement in the lesions. Clinically, he was hemodynamically stable and afebrile, and the skin exam showed dry appearing, chronic ulcers with heaped border and erythematous base on the left lateral forearm and the left bicep. Tissue biopsy was obtained; histopathology and culture did not reveal a causative organism, but polymerase chain reaction (PCR) testing of the sample revealed *Leishmania panamensis*. He was eventually treated with miltefosine 50 mg orally three times daily for 28 days, with subsequent cure of his lesions.

Conclusion: Cutaneous leishmaniasis should be considered in the differential diagnosis of chronic skin lesions in patients who have traveled to endemic areas. Several testing modalities, including PCR, should be performed to help diagnose and identify the causative *Leishmania* species, which is important for determining optimal treatment.