

EVALUATION OF THE LEISHMANIASIS VISCERAL THERAPEUTIC RESPONSE ACCORDING TO THE DRUGS USED IN THE CONTROL PROGRAM OF VISCERAL LEISHMANIASIS IN THE STATE OF SÃO PAULO, BRAZIL.

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INTRODUCTION AND PURPOSE

Visceral Leishmaniasis (VL) is a severe systemic disease, with a worldwide distribution and Brazil being one of the six countries with highest prevalence of the disease. In the state of São Paulo, the first autochthonous human cases were reported in 1999. The treatment for VL, in São Paulo state is mainly carried out with three drugs: pentavalent antimonial, amphotericin B deoxycholate and liposomal amphotericin B. There are few studies evaluate the effectiveness of these drugs in Latin America. This study aimed to describe the clinical and epidemiological characteristics of patients with VL diagnosis reported in São Paulo state between 2007 and 2015, comparing the cure rates of these patients treated with different therapeutic regimens used in the state, besides evaluate whether there is a relationship between higher lethality, used medicine and age category.

Key words: Visceral leishmaniasis, treatment, relapse, lethality.

METHODS

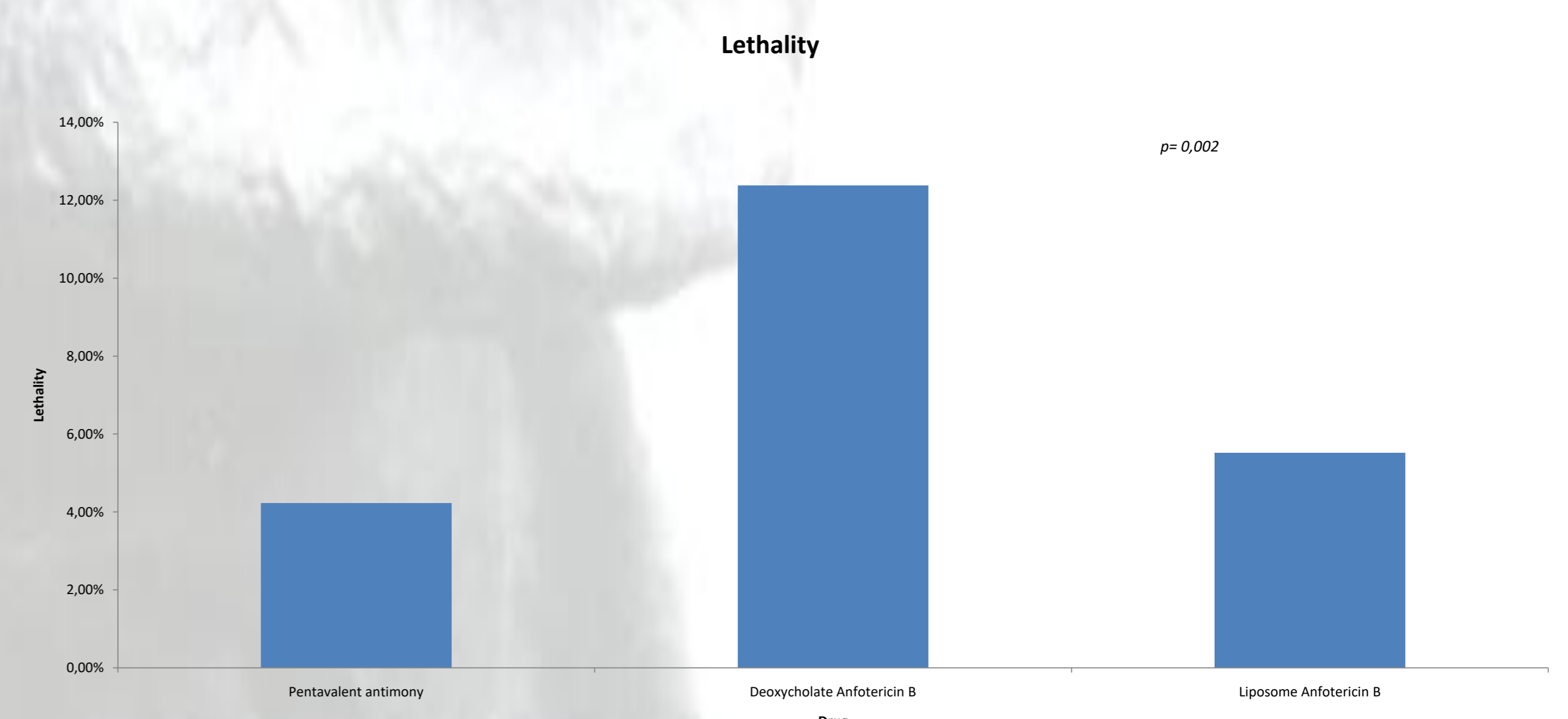
An observational study, descriptive, of retrospective cohort type was performed and carried out a descriptive analysis of all confirmed cases of VL reported in the state of São Paulo between 2007 and 2015. For specific and comparative analysis of the drugs, were excluded the patients co-infected with HIV and that who were diagnosed by a clinical and epidemiological criterion.

References:

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RESULTS

- We reported 3803 suspected cases of VL and of those, 2121 were confirmed parasitologically. The most of these cases were male, living in urban area and aged between 20 and 59 years. About treatment, 402 patients used therapy with pentavalent antimonial, 105 amphotericin B deoxycholate and 906 liposomal amphotericin B. The general lethality was 7.8%. Analyzing these rates for each drug used, the lethality was 12,38% in the group treated with amphotericin B deoxycholate, significantly higher than in the group treated with liposomal amphotericin B (5,52%) and those treated with pentavalent antimonial (4,23%), with a $p = 0,002$. There weren't significant differences between those who used pentavalent antimonial and liposomal amphotericin B, considering all the age groups. The lethality was higher in patients over 60 years old, with difference significant in the group treated with amphotericin B deoxycholate.



CONCLUSION

- The results of this study showed a higher lethality and lower cure rate of amphotericin B deoxycholate compared to pentavalent antimonial and liposomal amphotericin B, especially in age group of over 60 years. However, further studies are required to maintain on causal relationships between the use of certain medication and increase lethality by VL.