Efficacy of paromomycin and gentamicin patches in the treatment of cutaneous leishmaniasis

Sir

In spite of many different treatments used for cutaneous leishmaniasis [1-10], there is no single effective drug treatment. In 2001-02 we studied the effect of topical paromomycin and gentamicin applied to leishmanial lesions using adhesive patches at the Leishmaniasis Research Centre of Sedigheh Hospital in Isfahan, Islamic Republic of Iran.

Eligible patients (n = 100) were all those attending the centre with smear-confirmed leishmaniasis for up to 4 months. The diameter of lesions was less than 5 cm and the lesions were at least 3 cm away from the eyes. Exclusion criteria were pregnancy, nursing, history of previous treatment and history of allergy to aminoglycosides.

After cleansing the lesions, plasters were applied containing 0.1% gentamicin sulfate and 10% paromomycin enclosed in a polypropylene adhesive plaster with inert characteristics (Isfahan Faculty of Pharmacy). The dressings were changed every 4 days by the researcher, and the patients were asked about their compliance.

Patients were followed clinically and parasitologically about monthly at 28, 56 and 88 days after treatment and if the patient...
had any recurrences, another treatment was used. The maximum duration of treatment was 28 days but if the lesion was cured clinically and parasitologically, treatment was discontinued and the patient was followed up. To determine the efficacy of treatment, lesions were examined clinically and parasitologically. Complete cure of lesions was defined as return to normal texture of the lesion and epithelialization of the surface with a negative parasitological smear. Partial cure of lesions was defined as a decrease in the size and height of the lesion with or without a negative parasitological smear.

At the end of treatment, on day 28 of the study, 86 out of 100 patients (86.0%) in the showed complete cure of lesions and 8 (8.0%) showed partial cure (Table 1).

The results of this study are very encouraging and show topical paromomycin and gentamicin sulfate therapy is effective in about 80% of the patients, with a cosmetically acceptable scar. Applying paromomycin as a plaster is likely to decrease the rate of adverse reactions, enhance penetration and is easy to apply. The main disadvantage is allergy to plasters that can be avoided by using anti-allergy plasters. It is hoped that new plasters will be developed that release the drug slowly and absorb exudates in order to improve the topical treatment of cutaneous leishmaniasis.

<table>
<thead>
<tr>
<th>Days of treatment</th>
<th>No. of smear-negative patients (n = 100)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day 28, full cure</td>
<td>86</td>
<td>86.0</td>
</tr>
<tr>
<td>Day 28, partial cure</td>
<td>8</td>
<td>8.0</td>
</tr>
<tr>
<td>Day 58, full cure</td>
<td>80</td>
<td>80.0</td>
</tr>
<tr>
<td>Day 88, full cure</td>
<td>AN</td>
<td>AN</td>
</tr>
</tbody>
</table>

References


Encouraging letters to the editor in EMHJ

Sir

Being an author in and a reader of peer-reviewed medical journals, I am always interested to express my views freely. Scientific discourse occurs in many forms: among colleagues, at scientific meetings, during peer review and after publication. Such discourse is essential to interpreting studies and guiding future research. Thus the letter section of a scientific journal is an essential part of post-publication peer review [1]. Through the letters section, scientific articles published in a peer-reviewed journal are subject to continuing scrutiny. This section is therefore a forum for scientific discourse and essential in interpreting studies and guiding future research. Moreover, it helps make a journal accountable to the medical community [2].

Because of the aforementioned and my wish to play a role in improving the quality of articles published in the journals of our Region, I made a PubMed search of 5 medical journals on the total number of publications and the proportion which were letters. PubMed is not only a simple search engine for biomedical citations, but also a powerful tool to conduct certain statistical analyses [3]. A search strategy with a one-hour limit (11 December 2005) was performed including the names of the British medical journal, Journal of the American Medical Association, Saudi medical journal, Singapore medical journal and Eastern Mediterranean health journal. The search was limited to the last 5 years (01/01/2000

A. Asilian, G. Faghihi
Department of Dermatology, Al-Zahra Hospital, Isfahan University of Medical Sciences, Isfahan, Islamic Republic of Iran (Correspondence to G. Faghihi: g_faghihi@med.mui.ac.ir)

A.H. Siadat, H. Hejazi
Sedigheh Tahereh Skin Research Centre, Isfahan University of Medical Science, Isfahan, Islamic Republic of Iran

M. Shahtalebi, G. Sadeghian
Faculty of Pharmacy, Isfahan University of Medical Science, Isfahan, Islamic Republic of Iran

M. Mostaghim, M.R. Radan
Private general practitioner office, Isfahan, Islamic Republic of Iran