СЕКЦИЯ № 3 «ИНФЕКЦИОННЫЕ И НЕИНФЕКЦИОННЫЕ ДЕРМАТОЗЫ»

DZIAŁANIA NIEPOŻĄDANE PO ZABIEGACH Z ZAKRESU MEDYCYNY KOSMETYCZNEJ

Marek Niczyporuk, Wiaczesław Niczyporuk

Samodzielna Pracownia Medycyny Estetycznej Uniwersytetu Medycznego w Białymstoku Instytut Medyczny Państwowa Wyższa Szkoła Informatyki i Przedsiębiorczości w Łomży.

Zabiegi z zakresu medycyny estetycznej są zabiegami których rolą jest poprawa wyglądu. Niestety jak każda procedura inwazyjna mogą nieść ryzyko wystąpienia działań niepożądanych które niekorzystnie odbiją się na końcowych efektach zabiegu. Wystąpienie tych efektów może być wynikiem reakcji na zastosowaną substancję, efektem wykonania samej procedury bądź też reakcją tkanki na uraz. W przypadku tego typu zabiegów istnieje również ryzyko reaktywacji zakażeń wirusowych. W przypadku wypełniaczy tkankowych dziania niepożądane są opisywane z częstością nawet 3,7%. Ważnym elementem pozwalającym na ograniczenie działań niepożądanych jest staranna kwalifikacja pacjenta do zabiegu co pozwoli na satysfakcję z efektów zarówno dla pacjenta jak i lekarza.

CLINICAL FINDINGS AND MANAGEMENT OF IMPORTED CUTANEOUS LEISHMANIASIS

Romuald Olszański

Department of Maritime and Tropical Medicine of Medicine Military
Institute Gdynia

Leishmaniasis is a frequent parasitic disease in the World, caused by protists of Leishmani genus. Their reservoir consists of over 100 species of mammals – domestic animals (mainly dogs, rarely cats and horses) as well as wild animals (foxes, jackals, sloths, rats, mice).

Leishmania is transmitted by hematophagous females of insects of the Phlebotomus (in Africa, Asia and Europe) or Lutzomyia and Psychodopygus (in Central and Southern America) geni. These are small insects sized 2-4mm, which fly low and poorly. They remain in shaded areas during the day and become active at dusk and at night. Leishmaniaprotist exists in two life cycle forms. In human cells it assumes an aflagellate form (amastigota) of round or oval shape and 2-5

µm diameter. In the vector, it is present in a flagellate, lancet-shaped form (promastigota), 15-20 μm length and 1,5-3,5 μm width. Insect is infected by the amastigota form during feeding on a mammal with leishmaniasis. The amastigota form transforms the itself in the insect's digestive tract into promastigota form which moves to the glandular part of the mouthpart and is introduced into human organism during next phlebotomy. There, promastigota transforms itself into amastigota and passes to the cells of the reticuloendothelial system.

In the location of phlebotomy, usually on uncovered skin areas (e. g. face, upper and lower limbs), an erythematous papule appears after 2-4 weeks. After several weeks or months, the papule gradually enlarges itself and transforms into a hard, dark-red nodule and a shallow ulceration is formed in the center of it, covered by crust. If no superinfection occurs, skin lesions are usually painless. They usually heal spontaneously after 6-18 months, leaving ugly scar. This form of leishmaniais is called "dry" or "urban".

Other form of the disease is "wet" leishmaniasis with bacterial superinfection, called "rural" or "forestal". It is characterized by faster course with creation of a big ulceration, and usually resolves no sooner than after 24 months and is followed by a deep scar. Local lymphadenopathy is usually present.

Differential diagnosis should include: bacterial infections, blastomycosis, fungal infections, leprosy, lues, M. marinum infections, myiasis, papillomatous lesions, psoriasis, sarcoidosis, skin cancer, sporotrichosis, systemic erythematous lupus, tuberculosis, yaws.

The most effective treatment consists of pentavalent antimonials (Pentostam, Glucantime). In the initial phase of the disease, cryotherapy is a safe and effective option.

In all of our cases, cutaneous manifestations were diagnosed by physicians in Poland as furuncles or ulcerations and were unsuccessfully treated for few weeks with antibiotics, antifungals or anti-allergic agents. The problem of misdiagnosis and, as a consequence, inappropriate treatment of cutaneous leishmaniasis persists also in other European countries as well as in Canada and the USA. According to the literature, almost every case of leishmaniasis was initially treated inappropriately and time to definite diagnosis was usually several weeks.

Leishmaniasis is one of the most prevalent parasitic diseases in the World. It isendemic to 101 countries on 5 continents.