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the leishmanin skin test; microscopic identification of amastigotes from skin aspirates, biopsies and scrapings; culture; and molecular assays. We aim to determine optimal methods to accurately and efficiently diagnose TL to improve diagnostic stewardship. We searched five databases from inception to July 16, 2018 including Ovid MEDLINE, Embase, LILACS, Cochrane Library and Scopus with the following search terms: ("cut* leish*" OR "muc* leish*" OR "teg* leish*") AND (diagnosis OR diagnostic accuracy OR sensitivity OR specificity OR stard OR test*) AND NOT (viscer*). All systematic reviews, diagnostic trials and observational studies were included. Titles, abstracts and full-texts are systematically doubled screened by two reviewers with a tertiary arbitrator. Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) and Quality Assessment of Diagnostic Accuracy Studies (QUADAS) will be employed. 6745 papers were identified from the five databases and 1278 papers remained for abstract evaluation (3391 removed) after title screening, where non-human, non-TL, non-diagnostic and case report articles were excluded. Abstract and full-text screening will be conducted. Data will be extracted from full-texts and assessed using QUADAS for selection and information bias. Heterogeneity of the studies will be determined and meta-analysis performed as appropriate. TL cannot be distinguished from competing infectious etiologies clinically, thus necessitating confirmatory diagnostics. A knowledge synthesis of accurate diagnostic assays can provide insight into the optimal approach for TL confirmation and subsequently guide therapy.

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ETHNOPHARMACEUTICALS FOR THE TREATMENT OF OLD WORLD CUTANEOUS LEISHMANIASIS: A SYSTEMATIC REVIEW OF TOPICAL APPLICATION OF TUMERIC

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Toxicity, expense, and accessibility limit treatment success in Old World Cutaneous Leishmaniasis (OWCL), a neglected parasitic disease caused by members of the genus Leishmania found in the Middle East, Mediterranean basin, Arabian Peninsula, Africa as well as the Indian Subcontinent. Better drugs are urgently needed, however, drug discovery is hindered by limited funding given geographic restriction of highly endemic OWCL to LMICs. Plant-based compounds with potential anti-leishmanial effects found in and around local endemic communities present an opportunity to overcome the aforementioned therapeutic challenges, and many such interventions are supported by anecdotal evidence of efficacy. We aim to synthesize existing evidence around available ethnopharmaceuticals to promote drug discovery for the prevention and treatment of OWCL. PubMed (NCBI), Medline (OVID), Embase (OVID), Web of Science (BioSIS) and LILACS (VHL) were searched for from inception to July 26, 2018 using combinations of the search terms "cutaneous leishmaniasis" and "ethnopharmaceuticals". Iterative inclusion and exclusion of search terms was employed to maximize relevant article extraction. The GRADE approach will be used to assess quality of studies reporting therapeutic interventions. 3057 PubMed, 2818 Medline, 4200 Embase, 3183 Web of Science and 490 LILACS articles were retrieved for title and abstract screening; after duplicate removal, 5492 remained, 550 abstracts met inclusion criteria for full-text review, of which, 241 (43.80%) abstracts pertained to Old World species, and 113 (21%) were specific to L. donovani. Curcuma spp. "Turmeric" was identified in 4 articles (0.7%) to date. Synthesizing the current evidence surrounding ethnopharmaceuticals for the treatment of OWCL may contribute to drug discovery pipelines and potentially lead to novel therapeutics in a field that has not seen any new drug development for over half a century, especially in the context of turmeric.

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ETHNOPHARMACEUTICALS FOR THE TREATMENT OF NEW WORLD CUTANEOUS LEISHMANIASIS: A SYSTEMATIC REVIEW OF TOPICAL APPLICATION OF PEPPER AND ALLIUM

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New World Cutaneous Leishmaniasis (NWCL) is a neglected parasitic disease caused by members of the genus Leishmania primarily identified in Central and South America. Better drugs are urgently needed given the toxicity, expense and accessibility limits of first-line treatment options. Plant-based compounds with potential anti-leishmanial effects found in and around local endemic communities, particularly in and around the Amazon basin, present an opportunity to overcome the aforementioned therapeutic challenges, and many such interventions are supported by anecdotal evidence of efficacy. We aim to synthesize existing evidence around available ethnopharmaceuticals to promote drug discovery for the prevention and treatment of NWCL. PubMed (NCBI), Medline (OVID), Embase (OVID), Web of Science (BioSIS) and LILACS (VHL) were searched for from inception to July 26, 2018 using combinations of the search terms "cutaneous leishmaniasis" and "ethnopharmaceuticals". Iterative inclusion and exclusion of search terms was employed to maximize relevant article extraction. For the systematic review, we included molecular, mechanistic, and observational studies, case reports, case series, cohort studies, as well as clinical trials reporting therapeutic outcomes, if possible using the GRADE approach. A total of 13667 abstracts were retrieved, after which 7566 duplicates were removed. Of the remaining abstracts, 550 abstracts were included in the full text review, of which 176 (32%) abstracts highlighted New World species; 116 (66.0%), 33 (18.7%), and 27 (15.3%) abstracts pertained to L. amazonensis, members of Viannia subgenus, and other New World species, respectively. Of all the abstracts included in the full text review, 25 (4.5%) and 6 (1.1%) were identified for Piper spp. "Pepper" and Allium spp. "Garlic", respectively. Synthesizing the current evidence surrounding ethnopharmaceuticals for the treatment of NWCL may contribute to drug discovery pipelines and potentially lead to novel therapeutics, particularly those targeting the Viannia complex, where patients often develop more severe clinical manifestations.

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AN UPDATE ON THE ROLE OF WOUND CARE IN THE MANAGEMENT OF OLD WORLD CUTANEOUS LEISHMANIASIS

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Old world cutaneous leishmaniasis (OWCL) typically presents as one or several chronic, infiltrative lesions on exposed parts of the body, and is treated pharmacologically to accelerate cure, reduce scarring, and to prevent parasite dissemination or relapse. Limited data support the role of local wound care for the management of OWCL, though the scope of such benefit and to which patient populations wound care should be applied remains undetermined due to the absence of synthesized data on the subject. We aim to synthesize the literature around the role of wound care in the management of OWCL to inform treatment guidelines and evidence-based therapeutic strategies. Medline (Ovid), Embase (Ovid), and PubMed (NCBI) were searched from inception to February 2019 without language restriction using combinations of the search terms "leishmania*" and "wound care". The GRADE approach will be used to assess quality of studies reporting specific wound care interventions. 626 articles were identified with the initial search. After screening titles and