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## Molecular Diagnosis of Leishmaniasis, Species Identification and Phylogenetic Analysis

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#### 1. Introduction

Leishmaniases are vector-borne infections caused by protozoa of genus *Leishmania*, affecting various mammals, mainly carnivores and humans. Clinical patent disease is relatively easy to be diagnosed and laboratory-confirmed by direct detection of the parasite in clinical samples. However, in subclinical cases detection of the causative agent is possible by highly sensitive diagnostic techniques such as molecular assays. Different molecular methods have been developed and evaluated including multilocus enzyme electrophoresis, conventional polymerase chain reaction (PCR) based assays, quantitative Real Time PCR as well as simplified PCR methods.

More than 30 *Leishmania* species have been recognized, of which 20 are considered infective for humans and animals. The ability to distinguish between *Leishmania* species is crucial for differentiation of various forms of disease (visceral, cutaneous, mucocutaneus) at least in humans in order to establish correct diagnosis and prognosis of the disease as well as to support decision-making regarding application of the appropriate treatment protocols.

Available tools for species identification and phylogenetic analysis include DNA sequencing analysis, restriction fragment length polymorphism (RFLP) analysis, and PCR-fingerprinting techniques as well as novel methods such as multilocus sequence typing (MLST) and multilocus microsatellite typing (MLMT). MLST is regarded as the most powerful phylogenetic approach and will be a better alternative to Multilocus Enzyme Electrophoresis (MLEE) in the future. Various studies showed that the same target genomic regions can be used to compare distances among species but also to evaluate genetic diversity within species.



This review aims to critically present current molecular approaches for leishmaniasis diagnosis, species identification and phylogenetic analysis.

#### 2. Molecular diagnosis

PCR is being used for the diagnosis of parasitic diseases, including leishmaniasis. PCR is considered to be the most sensitive and specific technique among the methods applied so far for the direct detection and identification of the causative agent. The procedure is rapid and can be applied to a variety of clinical samples. Regarding the efficacy of the assay, it depends on the target selected for amplification (conserved or variable target region), the number of the target copies, the extraction technique used, the biological sample tested and the PCR protocol adapted or developed [1,2].

The PCR-based assays are advantageous over immunological techniques such as enzyme linked immunosorbent assay (ELISA) and immunofluorescence antibody test (IFAT) as host species specific reagents are not required. The increased PCR sensitivity over serology for the detection of infection is of great interest in certain cases such as in patients with cutaneous, muco-cutaneous leishmaniasis (CL or MCL) and the immunocompromised ones (e.g. coinfected with HIV, under chemotherapy etc). The former have low or no concentrations of antibodies against *Leishmania* due to the localized character of the disease while the latter present limited antibody production both resulting in negative serological tests [3]. In particular, in chronic CL patients, who constitute the greater diagnostic challenge due to their low parasite density, PCR assays for the detection of *Leishmania* DNA presented 100% sensitivity. Moreover, the fact that antibodies remain detectable for years after successful treatment makes the application of PCR a necessity[4].

PCR has been also proved to be valuable in the diagnosis of post-kala-azar dermal leishmaniasis (PKDL) [5]. Additionally, the detection of parasite DNA has been shown to be a useful prognostic marker for the disease relapse or the development of PKDL even after successful treatment outcome. [6]. Furthermore, persistent infection has been found in apparently healed scars from MCL patients [7], the presence of *Leishmania braziliensis* was reported in patients previously treated by immunotherapy or patients being at different stages of treatment and in subjects who had never presented clinical manifestations but they had lived in endemic areas and migrated to nonendemic regions [8].

Moreover, several studies reported that PCR detects parasitaemia a few weeks before the appearance of clinical manifestations. The detection of asymptomatic infected humans contributes to the prevention of the sand fly infection and the transfusion-transmitted kala-azar especially for the patients that require multiple transfusions, at least in endemic areas [3,9].

Regarding canine leishmaniasis, PCR assays constitute useful tools in cases of clinically healthy dogs which harbour infection but may never develop clinical disease. As the PCR positive results indicate infection, these assays could contribute to the prevention of the importation of infected clinically healthy dogs to nonendemic areas where infection may spread via local sand fly vectors and the transmission via blood transfusion [10]. Finally, the parasite detection is crucial in case of negative results obtained by serology. This discrepancy may be attributed

to the gap between infection and seroconversion, the transient presence of specific antibodies and the possibility for some infected dogs never to be seroconverted. In contrast, false positive results may be obtained due to the existence of anti-*Leishmania* antibodies for a considerable time after convalescence [11]. On the other hand, a positive PCR result in asymptomatic dogs cannot support decision-making regarding treatment as the parasite DNA may be present for a long time after the parasite has been cleared while also a single negative PCR result in a clinically suspected dog cannot rule out infection. Along with the need for PCR assays simplification, there is also a demand for standardization and optimization due to the lack of a universal PCR assay for the diagnosis of leishmaniasis [12]. Most laboratories perform "inhouse" PCR assays using different primer pairs, DNA targets and PCR protocols [13].

A variety of clinical samples have been used for the detection of *Leishmania* DNA such as whole blood, buffy coat, bone marrow, lymph node, spleen, conjunctival swabs [14,15] and other biological samples such liver, lung, heart, penis, vagina, testis, semen, uterus, placenta, kidney, intestine, milk and urine [16] and more recently nasal, ear and oral swabs [17,18]. Bone marrow, lymph node, spleen and skin are the tissues presenting the highest sensitivity for the diagnosis of canine leishmaniasis [11,19]. The same holds true for the non invasive sampling techniques using conjunctival swabs [15,17]. Whole blood, buffy coat, urine and the other biological samples mentioned above have been shown to be less sensitive.

Several target sequences and different PCR protocols have been described for the detection of *Leishmania* DNA. The most frequently used amplification targets are the Kinetoplast DNA minicircle (kDNA) [20–25] and the small subunit ribosomal RNA (SSU rRNA) [26–29]. There are various gene targets which are also commonly used such as the ribosomal internal transcriped spacer (ITS) [15,30–34], the mini-exon gene (spliced leader) [32,35–40] and a repetitive genomic sequence [41,42].

It is worth mentioning that variable and sometimes conflicting results have been reported by several studies evaluating PCR using different target sequences in different host tissues. These results have been mostly obtained from asymptomatic infected hosts and they may vary depending on the sampling technique, storage method and the PCR protocol employed [1]. Some indicative studies evaluating the most frequently used PCR targets in different tissues are summarized in Table 1.

Target	PCR product size (bp)	Tissue tested	Sensitivity %	Specificity %	References
kDNA	120,297,790,792	WB,BM	68.8-100	100	[21] [22] [24] [25]
ssurRNA	358, 603	WB,BM	72.2-97	100	[27] [43][29] [28]
ITS1	300-350	BM,WB,SB,SS,DS,CS,CB,SA	68-100	100	[44] [33] [30] [32] [31]
Mini-exon	378-450	BM,WB,SB,LA,DB,GB	53.8-89.7	100	[37] [38] [35] [32]

BM: Bone marrow, WB: whole blood, SB: Skin biopsy, SS: Skin scrapings, DS: Dermal smear, SA: Skin aspirates LA: Lesion aspirates CS: Conjunctival swab, CB: Cultured biopsies, DB: Duodenal biopsy, GB: Gastric biopsy

Table 1. Evaluation of the most frequently used PCR targets in different tissues

Real time PCR (or quantitative PCR-qPCR), a molecular technique which has revolutionized the pathogen diagnosis, is considered to be the future reference method for molecular diagnosis. In recent years, qPCR assays based either on SYBR Green or TaqMan chemistries have been developed and evaluated for the detection, quantification and even species differentiation of *Leishmania spp* in a variety of clinical samples showing high sensitivity and reproducibility [45,46]. qPCR is considered to be a helpful tool for *Leishmania* diagnosis, monitoring during therapy, development of new drugs and diagnostic tools, comparison of drug efficacy or prophylactic schemes, and for epidemiological studies. Regarding diagnosis of leishmaniasis, the kinetic study of parasitemia in the immunocompromised hosts, the diagnosis of relapses and the quantification of the low parasitic load in asymptomatic patients are of great interest [47].

qPCR is highly sensitive especially at the lower parasite loads [48,49], specific and reproducible offering the ability to monitor therapy and to prevent relapses. The applications mentioned above make qPCR an attractive alternative to conventional PCR in routine diagnosis [47,49]. Some of the studies carried out so far and their findings regarding the detection threshold, sensitivity and specificity are summarized in Table 2.

Target	Tissue tested	Detection threshold	Sensitivity %	Specificity %	References
kDNA	BM, WB	0.001 p/ r			[50]
kDNA	WB	0.07 p/ r	100	83.33	[51]
kDNA	BM, WB, LN, CS, S, L, LU,K, BC	0.03 p/ r			[52]
kDNA	WB	0.004 p/ r			[53]
TRYP	BS		98.7	59.8	[54]
ITS1	WB, SB, S	0.25 p/s			[55]

BM: Bone marrow, WB: whole blood, SB: Skin biopsy, CS: Conjunctival swab, LN: Lymph node, S: Spleen, L: Liver, LU: Lung, K: Kidney, BC: Buffy coat, BS: Biopsy specimen, p/r:parasites/reaction, p/s: parasite/sample TRYP: tryparedoxin peroxidase gene

Table 2. Detection threshold, sensitivity and specificity of qPCR using various targets in different tissues

Given that PCR is restricted to well equiped laboratory settings, and that there is a need for simplification of the PCR assay and a demand for standardization and optimization [56], the described tools below may represent a good alternative for rapid and simple diagnosis of leishmaniasis in endemic areas and epidemiological studies [12,57].

Quantitative nucleic acid sequence-based amplification (QT-NASBA) has proven to be a very sensitive and specific assay in diagnostic microbiology which is based on the amplification of single-stranded RNA sequences. In fact, this technique detects RNA in a background of DNA [13]. Several QT-NASBA assays have been developed for the detection of *Leishmania* parasites including QT-NASBA combined with electro-chemiluminescence (ECL) [57,58] and QT-NASBA combined with oligochromatographic technology (OC) [12,59] for the detection of NASBA products. The QT-NASBA assays developed, are commonly based on amplification

of single-stranded 18S ribosomal RNA sequences [12,57,58,60,61]. This target is considered to be highly efficient for the diagnosis of leishmaniasis as each parasite contains a large number of copies of the 18SrRNA gene [62] while also the cytoplasm is assumed to contain approximately 104 rRNA copies [62]. Moreover the target is present in all Leishmania species and it does not vary between different species allowing high sensitivity and quantification of all species in a similar manner [12,57,58]. However, this target shows high similarity with the 18S rRNA gene sequence of Endotrypanum, Crithidia, Wallaceina, and Leptomonas organisms which may result in false positive results especially in the case of immunocompromised patients [12]. The fact that NASBA detects RNA, makes it a molecular tool of great importance for the measurement of viable parasites. As a consequence, its application makes possible the assessment of the efficacy of drug therapies, the prediction of treatment outcome and the monitoring of the emergence of drug resistance. As it is well known, the DNA is still detected for a long time after parasite death, thus making RNA a preferable amplification target for the demonstration of parasite viability [13,56,58]. Moreover, when targeting RNA, the starting number of the template molecules is much higher resulting in increased assay sensitivity and decreased sample volume required [56]. The latter, makes also QT-NASBA a highly sensitive assay as it is able to detect very low target levels on clinical samples.

Loop-mediated isothermal amplification (LAMP), a novel method of DNA amplification under isothermal condition [63], has been developed to detect *Trypanosoma spp*, *Plasmodium spp*, *Mycobacterium spp and Filaria spp* [64]. Recently a reverse transcriptase step has been developed to specifically amplify RNA so as to amplify RNA viruses such as HIV and avian influenza viruses and to increase the assay sensitivity [65]. The recently developed LAMP seems to be a promising diagnostic tool. The results obtained from several studies are encouraging as this assay is much faster than conventional or nested PCR, it may be applied in field conditions, it shows high specificity and sensitivity [63,64,66–69].

In the context of a generalized effort for simplification of the parasite detection, assays including PCR-ELISA and PCR-OC have been developed and evaluated. Several studies reported that PCR-ELISA showed high sensitivity. In a study, PCR-ELISA in blood samples from HIV negative VL patients was evaluated and presented higher sensitivity (83.9% and 73.2%) and specificity (100% and 87.2%) than conventional PCR [70]. Other investigators have also evaluated the use of the assay in blood samples from HIV co-infected VL patients and PCR-ELISA found to be highly sensitive [23,71,72]. Basiye et al, reported that PCR-OC is highly sensitive for *Leishmania* diagnosis on blood samples from VL patients (sensitivity 96,4% and specificity 88.8%) compared to NASBA-OC which was shown to be more specific (specificity 100%) [60]. In another study the repeatability and reproducibility of the assay was studied and found to be 95.9% and 98.1% in purified nucleic acid specimens and 87.1% and 91.7% in blood specimens spiked with parasites respectively [73].

#### 3. Species identification

The species identification is useful in areas with various sympatric *Leishmania* species such as the southern Mediterranean Basin where CL is caused by *L. major*, *L. tropica* or *L.infantum* and South America where CL may be caused by *L.mexicana* and *L.amazonensis* as well as the species

of the subgenus *L.(Viannia)*. Regarding the areas where only one species is considered to be responsible for the disease, the species identification is an important tool for the differentiation between *Leishmania* species and lower trypanosomatids related to the monoxenous parasites of insects of the genera *Leptomonas* or *Herpetomonas* which are also considered to cause VL in Southern Europe, South America and in the Indian subcontinent. As far as it concerns the non-endemic areas, they seem to be at risk for parasite importation due to the increasing international travel and population migration [74].

In recent years, there has been great scientific interest in the development of molecular tools, based on PCR or other amplification techniques, for *Leishmania* parasites identification at species and even strain level. The molecular tools used, range from amplification and subsequent RFLP or DNA sequence analysis of multicopy targets or multigene families, including coding and non-coding regions, and PCR-fingerprinting techniques to the recently developed MLST and MLMT with different discriminatory power, sensitivity and specificity while also each one has its specific advantages and drawbacks [74]. Additionally, in most cases, the level of polymorphism found with coding or repeated non-coding PCR-amplified sequences is not refined enough to distinguish between closely related strains while application of MLST and MLMT approaches may reveal important strain polymorphisms.

PCR assays amplifying the conserved region of kinetoplast minicircle DNA or SSU rDNA have been shown to be the most sensitive, but they are able to identify *Leishmania* parasites only to the generic and/or subgeneric level [34,35,41,62]. However, the kDNA PCR-RFLP assay has been used as a molecular marker for *Leishmania* identification at strain level and found to be discriminative between closely related organisms such as *L.infantum* MON-1. In this case, PCR-RFLP of whole minicircle DNA, a highly polymorphic assay, has been applied for differentiation between recrudescence and re-infection [75,76] and for *L.infantum* strain typing [77]. However, the interpretation of the RFLP patterns is difficult as well as the comparison of the results obtained between laboratories [74,77].

The targets used for species identification include the ribosomal internal transcribed spacer (ITS) [34,78,79]; the mini-exon gene [38,39]; repetitive nuclear DNA sequences [80]; the glucose-6-phosphate dehydrogenase gene [81]; gp63 genes [82]; hsp70 genes[83,84]; cyto-chrome b gene [85], 7SL RNA gene sequences [86].

Other PCR-based approaches used for *Leishmania* parasites identification at strain level include the sequences of cysteine protease B (cpb) gene [87–90], the gp63 [87,91], the ITS1 [33,92–94], the mini-exon [95] and the kinetoplast minicircles [76,96–99].

The digestion of ITS1 PCR product with the restriction enzyme HaeIII can distinguish all medically relevant *Leishmania* species. However, almost identical RFLP patterns arise for the representatives of the *L. donovani* complex (*L. donovani* and *L.infantum*) or *L. braziliensis* complex (*L. braziliensis*, *L. guyanensis*, *L. panamensis*, *L. peruviana* etc.) with a great variety of restriction enzymes [34]. According to Schönian et al, in such a case, the sequencing of the ITS1 PCR product will allow the species differentiation [74]. Nasereddin et al developed a simple reverse line blot hybridization (RLB) assay based on ITS1 sequences, which could distinguish all Old World *Leishmania* species, even *L. donovani* from *L.infantum*. This approach was found to be

highly sensitive, approximately 10- to100-fold more sensitive than ITS1 PCR while the results obtained were comparable to those found by kDNA PCR [79]. Moreover, Talmi-Frank et al, described a new application of high resolution melt (HRM) analysis of a real time PCR product from the ITS1 region in samples from human, reservoir hosts and sand flies for rapid detection, quantification and speciation of Old World *Leishmania* species. In this assay, different characteristic high resolution melt analysis patterns were exhibited by *L.major*, *L.tropica*, *L. aethiopica*, and *L.infantum* making this approach able to distinguish all Old World *Leishmania* species causing human disease, except *L. donovani* from *L.infantum* [55]. Recently, an alternative technique, PCR-fluorescent fragment length analysis (PCR-FFL), has been developed by Tomás-Pérez et al, for use in *Leishmania* while its use has been reported previously for species identification in Trypanosoma [100,101]. In this study the fluorescently tagged primers used, were designed in the rRNA fragment ITS1 and 7SL region. The amplified fragments were digested and their sizes were determined by an automated DNA sequencer. PCR-FFL was found to be accurate and more sensitive than PCR-RFLP analysis [101].

Regarding the hsp70 PCR-RFLP approach, it is considered to be useful for the *L.(Viannia)* species discrimination while its sensitivity is poor for *L.(Leishmania)* species. Diagnostic RFLP patterns for the *L.guyanensis* species complex as well as for *L. lainsoni* and *L. shawi* are produced after restriction with the enzyme HaeIII [84,102]. However, this assay was not able to discriminate between *L. braziliensis* and *L. peruviana* as well as *L. naiffi*, requiring a second restriction enzyme for the differentiation [102] while also *L. guyanensis* and *L. panamensis* both belonging to the *L. guyanensis* complex share identical RFLP pattern [83]. The discrimination of the species mentioned above is of great significance due to the fact that even if *L. braziliensis* is considered to be the main causative agent of MCL [103] other *L.(Viannia)* species are also suspected of causing MCL. Additionally, a differential response to antimonial treatment has been documented [104–106]. This assay was suggested to be applicable on clinical samples [107,108].

Montalvo et al, extended the use of the hsp70 PCR-RFLP for identification of Old World and additional New World species and improved resolution within New World species complexes [108]. Recently, they developed an adequate and flexible toolbox which consists of one improved and three new PCR approaches based on hsp70 target amplification and subsequent RFLP, able to diagnose and identify the most medically relevant New and Old World *Leishmania* species. The new PCR variants were highly sensitive and specific and they presented improved amplification efficiency in clinical samples compared to hsp70 PCR described previously by Garcia et al [84]. The choice of the most suitable PCR among the four described, depends on factors like the origin of infection, the sympatry of species, the imported versus endemic pathology, the clinical presentation and the clinical sample [109].

Fernandes et al first developed a PCR approach based on mini-exon gene [36] which was later adapted by Mauricio et al. In this study the mini-exon PCR-RFLP was compared with ITS1 PCR-RFLP. Both targets were shown to be able to identify the strains studied but mini-exon was found to be more polymorphic than ITS1 whereas neither ITS1 nor mini -exon produced as many robust groups as gp63 based restriction analyses published before [91,95]. Marfurt et al also developed a mini-exon PCR-RFLP assay [39]. The pair of primers deriving from the conserved region was able to amplify DNA from Old and New World *Leishmania* species while

the diversity detected in the non transcribed spacers represented an informative phylogenetic marker. The digestion of the PCR products with one or two different restriction enzymes resulted in species-specific patterns allowing the species differentiation. Thus, they designed a mini-exon PCR-RFLP genotyping scheme, using different restriction enzymes. However, a single EaeI digest was informative enough for the speciation needed in clinical setting [39]. Furthermore, the repetitive character of this template made it highly sensitive even when applied to clinical samples [38]. On the other hand, when Bensoussan et al compared three PCR assays (kDNA,ITS1 and mini-exon used as targets) found that mini-exon presented the lowest sensitivity (53.8%) and suggested that this discrepancy may be attributed to the examination of stored clinical samples collected on filter papers instead of fresh samples, the extraction or the purification technique [110]. Rocha et al also adapted the PCR approach of Fernades et al and compared four PCR assays (kDNA and mini-exon used as targets) for the evaluation of New World Leishmania strains typing. Species belonging to the subgenus Leishmania were not amplified with the mini-exon target and the author suggested that this difference probably resulted from intraspecific variation [111]. Recently, in another study, ITS1 and mini-exon targets were compared with 18SrRNA in terms of sensitivity and discriminatory power in clinical samples, under routine laboratory settings. A new pair of primers for miniexon target was designed due to the inability of the previous published primers to amplify the target in all clinical samples while also the protocol was slightly modified in order to achieve better diagnostic sensitivity. However, ITS1 was found to be more sensitive and practical than mini-exon. In contrast, mini-exon was again more polymorphic and revealed a great discriminatory power in *L.*(*Viannia*) subgenus [32].

The L.donovani complex is the causative agent of visceral leishmaniasis, the most severe form of the disease. The discrimination between the representatives of L.donovani complex, L.infantum and L.donovani, is important as they are morphologically indistinguishable while also they are associated with different epidemiology, ecology and pathology as L.donovani is anthroponotic and L.infantum is anthropozoonotic. Moreover, there are not discriminative markers to identify certain strains which status is questioned. Thus, the development of molecular tools capable of identifying diagnostic markers and allowing a better understanding of phylogenetic relationships is of great importance. In a study a PCR assay based on cysteine proteinase B (cpb) was developed which was able to differentiate between the two species. The cathepsin-1 proteases CPB which belong to the papain-like superfamily, clan CA and family C1, play an important role in the host protein destruction and evasion of the host immune response [88,112]. CPB enzymes are encoded by a tandem array located in a single locus. Mundodi et al, have compared a L. donovani strain and a L.chagasi(syn L.infantum) strain and revealed at least five tandemly arranged genes [113]. Hide and Banuls, used the last repeats of the cluster (cpbE for L.infantum and cpbF for L.donovani) and designed a PCR assay able to differentiate the two species by their fragment length as L.donovani strains were characterized by a 741-bp product and L.infantum strains by a 702-bp product. This PCR assay did not generate amplification for other Leishmania species nor trypanosomatids. Although sensitive and specific in cultured parasites, the assay is not sensitive enough for diagnosis on clinical samples [88]. The fact that the species discrimination is based on 39 bp difference in PCR product may cause problems in species identification when using normal agarose gel electrophoresis and where both species are not available for comparison. Thus, another cpb PCR assay was developed with subsequent digestion with DraIII which cuts the 741-bp amplicon of *L.donovani* into 400 and 341 bp and a PCR using a species-specific primer pair capable of amplifying a 317 bp of *L. donovani* whereas it did not amplify *L.infantum* [89]. Two cpb PCR-RFLP and one fluorogenic PCR assay for the molecular typing of *L.donovani* complex have been also developed and it was reported that the assays described were valid and informative for *Leishmania* typing in clinical samples [90,114]. Furthermore, a multilocus approach, using new and previously reported targets including cpb genes, was applied to neotropical isolates (*L.braziliensis*, *L.peruviana*, *L.guyanensis*, *L.lainsoni* and *L.* amazonensis) and was shown to be a highly robust method of distinguishing different strains [87].

Real-time PCR is considered to be a useful, sensitive, accurate and rapid tool for detection, quantification and even genetic characterization of *Leishmania* parasites. A LightCycler RT-PCR assay based on fluorescence melting curve analysis of PCR products generated from the minicircles of kDNA was developed. This assay was able to detect and differentiate four Old World Leishmania species ( L. major was differentiated from L. donovani and from L. tropica and L.infantum) [45]. In another study, a qPCR based on glucosephosphate isomerase (GPI) gene was able to discriminate between subgenus Viannia and the complexes L.mexicana, L.donovani/ infantum and L.major [115]. A qPCR based on glucose-6-phosphate dehydrogenase (g6pd) using either SYBR-Green or TaqMan probes has also been described. This assay was able to differentiate *L.braziliensis* from other *L.* (*Viannia*) species and from those of *L.*(*Leishmania*) [116]. Weirather et al used a set of primers and probes for serial qPCR assays based on kDNA which was able to detect and differentiate Leishmania species in clinical samples due to different melt temperature of the amplicon or by observing the presence or absence of some amplicons [117]. Recently, tryparedoxine peroxidase gene was used as amplification target in a qPCR assay able to identify Old-World Leishmania species causing CL [54]. An alternative 18S rDNA based qPCR using fluorescence resonance energy transfer probes (FRET) was able to discriminate the L.donovani complex, the L.brasiliensis complex, and species other than these based on the distinct melting temperature obtained [46]. Finally, a new qPCR assay based on FRET technology and melting curve analysis was designed based on mannose phosphate isomerase (MPI) and 6-phosphogluconate dehydrogenase (6PGD) genes which found to be highly sensitive and discriminative for the five species of Leishmania being evaluated (L.braziliensis, L.panamensis, L.guyanensis, L.peruviana and L.lainsoni) [118].

MLEE, the technique which is regarded as the 'gold standard' for the identification of *Leishmania* parasites to species and subspecific levels and for genetic diversity studies, has been widely used since its introduction [119]. MLEE detects different alleles of housekeeping genes indirectly by scoring the electrophoretic mobility of the enzymes they encode. The nucleotide differences in the genes encoding the enzymes are reflected by their mobility differences. Thus, the parasites are identified by their enzymatic profile and are grouped in taxonomic units termed zymodemes, each one of whom consists of all the strains showing exactly the same profiles for all the enzymatic systems under study. Distinct combinations of isoenzyme mobilities for up to 15 enzymes have been assigned zymodeme numbers (MON-1–MON-274) [120].

However, this molecular method presents several disadvantages including the need for mass culture of *Leishmania* parasites and large amount of protein, it is timeconsuming, labour-

intensive, costly and technically demanding. It is also worth mentioning that the MLEE methods used in Europe and in South America are based on different enzyme panels and cannot be compared directly [74,93,119]. As far as it concerns its discriminatory power, it is considered to be poor due to its inability to detect nucleotide substitutions that do not change the amino acid composition and changes in the amino acid composition that does not modify the electrophoretic mobility. The discriminatory power of MLEE for classifications below species level is limited. For instance, the L.infantum zymodeme MON-1, the causative agent of the majority of visceral leishmaniasis cases around the Mediterranean basin and South America, has been shown to be genetically heterogeneous and polyphyletic with molecular markers presenting higher resolution level [121,122]. Moreover, other molecular studies do not always agree with the classification of Leishmania parasites by MLEE. For instance, the differentiation between the representatives of L.donovani complex, L.donovani and L.infantum, is based on only one enzymatic system (glutamate-oxaloacetate transaminase-GOT) making the species distinction poor. In fact, the zymodeme MON-30 which was regarded as L.infantum, has recently shown to be L.donovani [123,124]. Furthermore, the existence of L.archibaldi as a distinct species belonging to *L.donovani* complex was supported by MLEE but it was not in agreement with the results of many different molecular markers [125] while also L.killicki was not confirmed to be a separate species [94,126] and L.donovani zymodeme MON-37 was assigned to strains of different genetic background [74,120,127]. However, the codominant character of this molecular tool is advantageous as it is able to identify heterozygous profiles and thus potential hybrids while also if the proteins are highly polymeric, the distinction can be made between a heterozygous profile and a mixed infection [120].

Randomly Amplified Polymorphic DNA (RAPD), a simple process, distinct from the PCR, based in the amplification of genomic DNA with short oligonucleotides of arbitrary nucleotide sequence used as primers, has been also applied for Leishmania spp. The primers are designed and used for the detection of polymorphisms without relying on prior knowledge of the DNA sequence to be amplified [128]. From the advent of RAPD technique [128,129] numerous studies, only a few of them can be cited here, have been published reporting the use of RAPD as a molecular tool for Leishmania species identification and strain characterization. RAPD has been used for the investigation of the genomic diversity of *L. braziliensis* strains [130,131], *L. major* isolates [132], L.donovani complex [124,133,134] and L.infantum [77,121,135]. Regarding the use of RAPD in species identification, it has been applied for the differentiation between the species L.braziliensis, L.mexicana, L.infantum, L.tropica, L.chagasi, L.amazonensis and L.major [136], the identification and differentiation of Old World species at complex level [137] and recently for the characterization of clinical isolates responsible for kala-azar in India [138]. The main disadvantages of this technique are the need for parasite culture due to the use of non Leishmania specific primers and the poor reproducibility of the assay. Moreover, the bands of equal electrophoretic mobility may not be homologous and it is impossible to distinguish homozygous from heterozygous genotypes at specific loci because it is difficult to recognize allelic variants of randomly amplified polymorphic DNA markers in the absence of crossing data [74,120]

PCR hybridization is one of the first molecular methods for species identification and genotyping. DNA probes have been designed for *Leishmania* species identification. The most

common target used for *Leishmania spp* identification is kDNA. DNA probes targeting kDNA have been applied for *L.major* [139], *L.infantum* [140], *L.aethiopica* [141], *L.mexicana* and *L.braziliensis* [142], and *L.mexicana*, *L.donovani* and *L.braziliensis* complexes [143]. Other specific probes developed include a cDNA probe, designed from a repetitive degenerate sequence isolated from *L.donovani*, which specifically hybridized only with isolates of the *L.donovani* complex [144] and two probes, the pDK10 and the pDK20, which were able to differentiate between the Old World *Leishmania* species belonging to *L.donovani* complex and between all Old World *Leishmania* species respectively [145,146]. DNA probes generated from mini-exon genes have also been developed [147]. Other probes developed so far include a *L.braziliensis* specific probe [148] and *L.guyanensis* specific one [149].

MLEE has been recently modified in a direct sequencing allele detection method at each locus, called MLST. Partial sequences of approximately 700 bp in size, belonging to a defined set of housekeeping genes, are directly compared; the alleles are scored as identical or not and the same allele combinations are referred as sequence types. Alternatively, data analysis by sequencing of the alleles may be implemented. This technique was first used for bacterial pathogens whereas in Leishmania, steps have been taken to develop a MLST system [150]. The L. donovani complex has been studied by 2 sets of 5 loci for genes coding for enzymes used in MLEE [151,152]. These 10 targets in combination should be a complete MLST system for application in L. donovani complex. These studies showed that results from MLST are in agreement with results from MLEE whereas some discrepancies were found and MLST presented higher resolution level such as a silent Single Nucleotide Polymorphism (SNP) in gpi that distinguishes between strains of *L.infantum* [151]. Moreover, SNPs resulting in amino acid changes were also found in genes coding for enzymes giving indistinguishable electrophoretic profiles such as in nh2, which has the same protein band size for all L.donovani complex strains. These authors reported that MLST could be applied directly to clinical samples or to small-volume cultures. Furthermore, it can be used to detect recombination indirectly and for population genetics studies [151]. Tsukayama et al investigated the intraspecific and interspecific variation in the coding sequences of four enzymes (gpi, mdh, mpi and 6pgd), used in the MLEE typing method, in order to identify SNPs able to discriminate among closely related species. The assay was applied to clinical samples and successfully identified the species of Leishmania responsible for the clinical disease [153]. However, the analysis did not include sufficient diversity of strains for each species [74]. Recently, in another study a combination of the previous published enzyme-coding genes (fh, g6pdh, icd, mpi and pgd) was used so as to differentiate the Chinese Leishmania isolates and to investigate their phylogenetic relationships [154]. MLST is likely to become the gold standard basis for taxonomy and identification of Leishmania.

MLMT is based on the amplification of microsatellites sequences, tandem repeats of a simple nucleotide motif, 1-6 nucleotides, which are distributed abundantly in the eukaryotic and prokaryotic genomes and may reveal important strain polymorphisms. These markers are very useful for studying genetic variation between closely related organisms. Length polymorphisms in microsatellites sequences result from gain and loss of single repeat units which can be detected after amplification with specific to their flanking regions primers. MLMT ap-

proaches developed so far for Leishmania spp, make use of sets of 14–20 unlinked microsatellite loci. Microsatellite loci with high discriminatory power and being suitable for characterizing closely related strains have been published for the L.donovani complex [155–158], L.donovani strains [127] L.major [159], L.tropica [126,160] and for species of the subgenus L. (Viannia) [161]. Moreover, as the genetic diversity of *L.infantum* strains has been the subject of intense interest, several studies used MLMT approaches for the evaluation of the genomic variation in L.infantum strains [122,135]. It is worth mentioning that when MLMT was compared with other molecular markers for strain typing of L.infantum, the results obtained with kDNA PCR-RFLP were comparable to MLMT. kDNA and MLMT presented the highest discriminatory power especially for the MON-1 strains discrimination and appeared to be the most adequate for strain fingerprinting. However, MLMT is advantageous over kDNA PCR-RFLP because of its better reproducibility and feasibility of inter-lab comparisons and the co-dominant character of the markers used, making MLMT suitable for population genetic studies [77]. MLMT is suitable for high-throughput analysis and the data obtained are reproducible and exchangeable between laboratories. Moreover, accurate, quality controlled microsatellite profiles can be stored in databases and compared between different laboratories. In contrast to MLEE, selection does not seem to act on polymorphisms in microsatellite length while also the codominant nature of these markers permits the detection of the allelic variants. MLMT can be used directly on biological samples without prior culture of the parasite. DNA extracted from specimens spotted on filter paper or glass slides or from old Giemsa stained microscope slides was successfully applied in MLMT approaches [155]. It is recommended to use a panel of 10-20 unlinked microsatellite markers in all studies for nearly every species because microsatellite sequences are prone to homoplasy. Additionally, polymorphic repeats are not conserved between different species of *Leishmania* [74,122,157].

#### 4. Phylogenetic analysis

Phylogenetics is the study of evolutionary relationships among various groups of organisms (e.g., species or populations). Their relatedness is evaluated through morphological and molecular sequencing data. This analysis leads to a hypothesis about the evolutionary history of taxonomic groups, their phylogeny. Regarding evolution, it is considered to be a branching process. Populations are altered with time and may split into separate branches, hybridize or be eliminated. The order in which evolutionary events are assumed to have occurred is revealed and may be visualized in a phylogenetic tree.

As mentioned before, MLEE is still regarded as the reference technique for the identification of *Leishmania* species and subspecies. The data obtained from MLEE were analyzed by phenetic and cladistic techniques and led to the construction of the first phylogenetic tree of the genus *Leishmania* [162]. The latter, revealed the monophyletic origin of the genus *Leishmania* and its subdivision into two subgenera, the *L.(Leishmania)* and the *L.(Viannia)* subgenus. *L.(Leishmania)* included the Old World species and *L.mexicana* and complexes from the New World. *L. (Viannia)* subgenus was composed from the other New World species. As *Sauroleishmania* was considered to be a separate genus, the lizard species were not included in these studies. MLEE

has been applied to a great variety and amount of isolates in comparison to other molecular methods in the past 25 years, resulting in the current classification system [93,162]. Phylogenetics based on different molecular methods, has confirmed the previous suggested taxonomy of the genus *Leishmania* by MLEE. However, the existence of a larger number of species has been proposed.

PCR-based methods with subsequent RFLP or DNA sequence analysis of multicopy targets or multigene families, to the recently developed MLST and MLMT, have been applied for the identification of the *Leishmania* species being responsible for the disease and for epidemiological studies in different endemic regions, as well as for taxonomic, phylogenetic, and population genetic studies. These tools except from their enhanced sensitivity they are also able to distinguish *Leishmania* parasites at species and intraspecies level. As for phylogenetic studies, the sequence analysis of single-copy gene targets is preferred while also the recombination and the different mutation rates between lineages make the use of one gene less suitable for the phylogenic analysis of the Trypanosomatidae or its subgroups[163].

Several DNA targets have been used to reveal the phylogeny of the *Leishmania* genus including single-copy genes encoding the catalytic polypeptide of DNA polymerase a (polA), the largest subunit of RNA polymerase II (rpoIILS) [164] and 7SL RNA [86], the ITS [165,166], the Nacetylglucosamine-1-phosphate transferase (NAGT) gene [167], the mitochondrial cytochrome b gene (cytb) [168], and most recently, sequences of the hsp70 subfamily [83]. Sequence analysis of these targets led to the conclusion that the subgenera L. (*Leishmania*) and *L. (Viannia*) constitute distinct monophyletic clades and that species of the Old and New World are segregated within the *L. (Leishmania*) subgenus. *Sauroleishmania* species branched off between the *L.(Leishmania*) and *L.(Viannia*) subgenera as an independent taxon suggesting that lizard *Leishmania* might be derived from mammalian parasites [164] and that they should be regarded as a subgenus of *Leishmania* rather than an independent genus [99]. However, the fact that RNA and DNA polymerase genes presented higher evolution rate in the lizard *Leishmania* than in the mammalian *Leishmania* species set into question the exact taxonomic position of lizard parasites [164].

In another study, Cupolillo et al. based on various molecular criteria, suggested the division of the genus *Leishmania* into two sections, *Euleishmania* and *Paraleishmania*. *Euleishmania* consisted of the subgenera *L.(Leishmania)*, *L.(Sauroleishmania)*, and *L.(Viannia)*. *Paraleishmania* included *L. hertigi*, *L.deanei*, *L.colombiensis*, *L.equatorensis*, *L.herreri*, and strains of *Endotrypanum*. In the latter section, the parasites of hystricomorph rodents, *L.hertigi* and *L.deanei* and the remaining species that are mainly parasites of sloths were genetically different while strains of *Endotrypanum* formed a paraphyletic group [169].

More recently Fraga et al. analyzed the phylogeny of the genus *Leishmania* based on the hsp70 gene. In this study the isolates and strains used, were of different geographic origins. The resulting phylogeny supported that the monophyletic genus *Leishmania* consisted of three distinct subgenera, the *L.(Leishmania)*, *L.(Viannia)*, and *L.(Sauroleishmania)*. The obtained phylogeny supported the following eight species: *L.donovani*, *L.major*, *L.tropica*, *L.mexicana*, *L.lainsoni*, *L.naiffi*, *L.guyanensis* and *L.braziliensis*. In some of these species, subspecies were recognized including *L.donovani* infantum, *L.guyanensis* panamensis, and *L.braziliensis* peruvi-

ana. The so far recognized species *L.aethiopica*, *L.garnhami*, and *L.amazonensis* did not form monophyletic clusters [83].

Several discrepancies were reported for the taxonomic status of species obtained by MLEE compared to DNA based sequences. It is worth mentioning that the existence of L.chagasi and L. archibaldi as distinct species, was not supported by any molecular analyses as L.chagasi cannot be distinguished from strains of L.infantum and should therefore be regarded as South American strains of *L.infantum* [170,171] whereas *L. archibaldi* is not a valid species [125,159]. Numerous molecular studies did not even support the monophyly of the two remaining species, L.donovani and L.infantum [83,164,168]. Therefore, it was proposed that L.donovani is the only species of the L.donovani complex [83] while L.donovani infantum was recognized as subspecies. Regarding other geographically defined genetic groups within L.donovani, it was suggested that they could be delimited. Furthermore, the status of *L.killicki* has been debated. MLEE analysis supported the classification of L.killicki as a separate species while other molecular methods proposed that it was identical to L.tropica [94,126,168]. At the same time, L.tropica clusters to a single branch with L.aethiopica, making it difficult to be distinguished by the most of the DNA-based phylogenies [83,86,168]. It was suggested that they may represent different subspecies of the species L.tropica which is however needed to be investigated with a larger number of strains. Another discrepancy concerns the existence of the L.mexicana complex species. The strains of *L. mexicana* and *L. amazonensis* species are overpresented in DNA based phylogenies while only one L. garnhami strain was analysed in the hsp70 trees. In the latter study, none of these species could be distinguished as a monophyletic clade and L.mexicana was the only recognized species [83]. These results are in agreement with previous published studies [164,172,173] whereas they are in contrast to others [86,165,168]. Thus, the L.mexicana complex should be investigated, including L.venezuelensis and L.aristidesi strains, in order to evaluate the species and subspecies constituting this complex. The same holds true for the L.braziliensis complex species. Several molecular phylogenies including hsp70, RAPD and MLEE, supported the distinction of *L. peruviana* from other strains of *L. braziliensis* [83,174] and it was recognized as a subspecies in the *L.braziliensis* complex. However, this classification was questioned by a study using monoclonal antibodies [175] and another one analyzing the microsatellite variation [161] which suggested that strains of L.peruviana were grouped together with strains of L.braziliensis from Peru and from the Acre State, a Brazilian region bordering Peru. The use of a sufficiently large number of strains from different areas of distribution is needed so as the taxonomic status of the repsesentatives of the L.braziliensis complex to be evaluated. Moreover, in different phylogenetic trees, strains of *L. guyanensis* and L. panamensis formed a monophyletic cluster which was then divided into two monophyletic subclusters. Thus, the existence of two subspecies within the species L.guyanensis was proposed. A possible explanation for these discrepancies reported in different studies regarding the taxonomic status of both L.peruviana and L.panamensis, is the application of different molecular markers and the analysis of different strains.

Several molecular methods including MLEE [93], PCR-RFLP of ITSrDNA [78] and PCR-RFLP and sequence analysis of the hsp70 gene [102], were also suggested the inclusion of *L.shawi* in

the *L. guyanensis* group. The same applies for *L.naiffi* whereas *L.lainsoni* was confirmed to be the most divergent species inside the *L.(Viannia)* subgenus [83,102].

Noyes et al. (2002) identified a parasite isolated from human cutaneous lesions. Both stains were analysed by MLEE and found to be identical to each other and distantly related to all other Leishmania species. The application of other molecular methods revealed a low support for both its position basal to all *Euleishmania* and its clustering with *L.enriettii*. Thus, it was suggested that this strain may cluster with L.(Leishmania) or L.(Viannia) or form a novel clade within the Euleishmania either with or without L.enriettii [176]. Recently Leishmania species isolated from clinical samples from immunocompetent and immunosuppressed patients in Thailand [177,178] and a focal CL outbreak in Ghana [179] were identified and named as L. siamensis. Furthermore, novel Leishmania species, genetically indistinguishable, were isolated from kangaroos, wallaroos, and wallabies, living in captivity in the Northern Territory of Australia, a region that was considered free of Leishmania parasites [180]. Additionally, autochthonous cases of CL in German and Swiss horses and in a Swiss cow could not be classified neither as Old World nor New World Leishmania species while they were found to be most closely related to L.siamensis [181,182]. Finally, two new L.(Viannia) species were described and named *L.lindenbergi* [183] and *L.utingensis*. The last one was represented by only one sample isolated from a Lutzomyia tuberculata sand fly. Although the sequence analysis of single-copy gene targets has shown to be informative, the use of several independent genes displaying different evolutionary histories is preferable [184]. Such genes have applied in MLST and provided new insights on taxonomy and evolutionary history of Leishmania. MLST is currently considered the most powerful phylogenetic approach, it has been shown to have high discriminatory power, reproducibility and transportability of results between laboratories. Thus far, there are 10 published MLST targets available for the L.donovani complex [151,152], most of which are also applicable to other Old World Leishmania [185] and 4 targets for the sub-genus Leishmania (Viannia) [153]. This should form a complete MLST system applicable to Leishmania parasites.

#### 5. Conclusion

Molecular methods have revolutionised the diagnosis of leishmaniasis. A variety of target sequences has been used and evaluated in different clinical samples of parasite hosts. Regarding PCR based assays, they were found to be rapid, sensitive and discriminative at species or even strain level. However the diagnosis of leishmaniasis remains a scientific challenge. There is a gap between the scientific advances, diagnostics and management of *Leishmania* infections in the field which should be decreased and an urgent need for standardization, optimization and simplification of PCR based applications. In this context, there is a generalized effort to make these assays available mainly in endemic areas around the world which will have an impact in disease control.

The great scientific interest for species identification may be attributed to its significance in prompt diagnosis and prognosis of the disease, decision making regarding treatment and

control measures. Despite the abundance of the studies carried out and the molecular markers used so far, the species discrimination is still tough in several closely related species. Thus, molecular tools with high discriminatory power are currently under development, optimization and evaluation.

Many molecular tools have been used for the *Leishmania* phylogeny and the definition of its taxonomy. However, evaluation of the phylogenetic relationships of *Leishmania* species is not an easy task. Moreover, there is a need for simplification of the classification and a meaningful nomenclature of *Leishmania* genus particularly for the clinicians.

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#### References

[1] Baneth G, Aroch I. Canine leishmaniasis: a diagnostic and clinical challenge. Veterinary Journal (London, England: 1997) 2008;175:14–5.

- [2] Cortes S, Rolão N, Ramada J, Campino L. PCR as a rapid and sensitive tool in the diagnosis of human and canine leishmaniasis using *Leishmania donovani* s.l.-specific kinetoplastid primers. Transactions of the Royal Society of Tropical Medicine and Hygiene 2004;98:12–7.
- [3] Singh S. New developments in diagnosis of leishmaniasis. The Indian Journal of Medical Research 2006;123:311–30.
- [4] De Almeida Silva L, Romero HD, Prata A, Costa RT, Nascimento E, Carvalho SFG, et al. Immunologic tests in patients after clinical cure of visceral leishmaniasis. The American Journal of Tropical Medicine and Hygiene
- [5] Osman OF, Oskam L, Kroon NC, Schoone GJ, Khalil ET, El-Hassan AM, et al. Use of PCR for diagnosis of post-kala-azar dermal leishmaniasis. Journal of Clinical Microbiology 1998;36:1621–4.
- [6] Osman OF, Oskam L, Zijlstra EE, el-Hassan AM, el-Naeim DA, Kager PA. Use of the polymerase chain reaction to assess the success of visceral leishmaniasis treatment. Transactions of the Royal Society of Tropical Medicine and Hygiene
- [7] Schubach A, Marzochi MC, Cuzzi-Maya T, Oliveira AV, Araujo ML, Oliveira AL, et al. Cutaneous scars in American tegumentary leishmaniasis patients: a site of *Leishmania* (Viannia) braziliensis persistence and viability eleven years after antimonial therapy and clinical cure. The American Journal of Tropical Medicine and Hygiene 1998;58:824–7.
- [8] Guevara P, Ramírez JL, Rojas E, Scorza JV, González N, Añez N. *Leishmania braziliensis* in blood 30 years after cure. Lancet 1993;341:1341.
- [9] Martín-Sánchez J, Pineda JA, Morillas-Márquez F, García-García JA, Acedo C, Macías J. Detection of *Leishmania infantum* kinetoplast DNA in peripheral blood from asymptomatic individuals at risk for parenterally transmitted infections: relationship between polymerase chain reaction results and other *Leishmania* infection markers. The American Journal of Tropical Medicine and Hygiene 2004;70:545–8.
- [10] Solano-Gallego L, Koutinas A, Miró G, Cardoso L, Pennisi MG, Ferrer L, et al. Directions for the diagnosis, clinical staging, treatment and prevention of canine leishmaniosis. Veterinary Parasitology 2009;165:1–18.
- [11] Maia C, Ramada J, Cristóvão JM, Gonçalves L, Campino L. Diagnosis of canine leishmaniasis: conventional and molecular techniques using different tissues. Veterinary Journal (London, England: 1997) 2009;179:142–4.
- [12] Deborggraeve S, Laurent T, Espinosa D, Van der Auwera G, Mbuchi M, Wasunna M, et al. A simplified and standardized polymerase chain reaction format for the diagnosis of leishmaniasis. The Journal of Infectious Diseases 2008;198:1565–72.

- [13] Schallig HDFH, Oskam L. Molecular biological applications in the diagnosis and control of leishmaniasis and parasite identification. Tropical Medicine & International Health TM IH 2002;7:641–51.
- [14] Ferreira S de A, Ituassu LT, de Melo MN, de Andrade ASR. Evaluation of the conjunctival swab for canine visceral leishmaniasis diagnosis by PCR-hybridization in Minas Gerais State, Brazil. Veterinary Parasitology 2008;152:257–63.
- [15] Strauss-Ayali D, Jaffe CL, Burshtain O, Gonen L, Baneth G. Polymerase chain reaction using noninvasively obtained samples, for the detection of *Leishmania infantum* DNA in dogs. The Journal of Infectious Diseases 2004;189:1729–33.
- [16] Maia C, Campino L. Methods for diagnosis of canine leishmaniasis and immune response to infection. Veterinary Parasitology 2008;158:274–87.
- [17] Ferreira S de A, Almeida GG, Silva S de O, Vogas GP, Fujiwara RT, de Andrade ASR, et al. Nasal, oral and ear swabs for canine visceral leishmaniasis diagnosis: new practical approaches for detection of *Leishmania infantum* DNA. PLoS Neglected Tropical Diseases 2013;7:e2150.
- [18] Lombardo G, Pennisi MG, Lupo T, Migliazzo A, Caprì A, Solano-Gallego L. Detection of *Leishmania infantum* DNA by real-time PCR in canine oral and conjunctival swabs and comparison with other diagnostic techniques. Veterinary Parasitology 2012;184:10–7.
- [19] Manna L, Reale S, Vitale F, Picillo E, Pavone LM, Gravino AE. Real-time PCR assay in *Leishmania*-infected dogs treated with meglumine antimoniate and allopurinol. Veterinary Journal (London, England: 1997) 2008;177:279–82.
- [20] Andresen K, Gasim S, Elhassan AM, Khalil EA, Barker DC, Theander TG, et al. Diagnosis of visceral leishmaniasis by the polymerase chain reaction using blood, bone marrow and lymph node samples from patients from the Sudan. Tropical Medicine & International Health TM IH 1997;2:440–4.
- [21] Da Silva ES, Gontijo CMF, Pacheco R da S, Brazil RP. Diagnosis of human visceral leishmaniasis by PCR using blood samples spotted on filter paper. Genetics and Molecular Research GMR 2004;3:251–7.
- [22] Hu XS, Yang WT, Lu HG, Yan HP, Cheng JP, Ma Y, et al. Sequencing a specific kinetoplast DNA fragment of *Leishmania donovani* for polymerase chain reaction amplification in diagnosis of leishmaniasis in bone marrow and blood samples. The Journal of Parasitology 2000;86:822–6.
- [23] Martín-Sánchez J, Pineda JA, Andreu-Lopez M, Delgado J, Macías J, De La Rosa R, et al. The high sensitivity of a PCR-ELISA in the diagnosis of cutaneous and visceral leishmaniasis caused by *Leishmania infantum*. Annals of Tropical Medicine and Parasitology 2002;96:669–77.
- [24] Pal S, Aggarwal G, Haldar A, Majumdar A, Majumdar HK, Duttagupta S. Diagnosis of symptomatic kala-azar by polymerase chain reaction using patient's blood. Medi-

- cal Science Monitor: International Medical Journal of Experimental and Clinical Research 2004;10:MT1–5.
- [25] Salotra P, Sreenivas G, Pogue GP, Lee N, Nakhasi HL, Ramesh V, et al. Development of a species-specific PCR assay for detection of *Leishmania donovani* in clinical samples from patients with kala-azar and post-kala-azar dermal leishmaniasis. Journal of Clinical Microbiology 2001;39:849–54.
- [26] Cruz I, Chicharro C, Nieto J, Bailo B, Canavate C, Figueras M-C, et al. Comparison of New Diagnostic Tools for Management of Pediatric Mediterranean Visceral Leishmaniasis. Journal of Clinical Microbiology 2006;44:2343–7.
- [27] Cruz I, Cañavate C, Rubio JM, Morales MA, Chicharro C, Laguna F, et al. A nested polymerase chain reaction (Ln-PCR) for diagnosing and monitoring *Leishmania infantum* infection in patients co-infected with human immunodeficiency virus. Transactions of the Royal Society of Tropical Medicine and Hygiene 2002;96 Suppl 1:S185–189.
- [28] Lachaud L, Dereure J, Chabbert E, Reynes J, Mauboussin JM, Oziol E, et al. Optimized PCR using patient blood samples for diagnosis and follow-up of visceral leishmaniasis, with special reference to AIDS patients. Journal of Clinical Microbiology 2000;38:236–40.
- [29] Mathis A, Deplazes P. PCR and in vitro cultivation for detection of *Leishmania* spp. in diagnostic samples from humans and dogs. Journal of Clinical Microbiology 1995;33:1145–9.
- [30] Azmi K, Nasereddin A, Ereqat S, Schnur L, Schonian G, Abdeen Z. Methods incorporating a polymerase chain reaction and restriction fragment length polymorphism and their use as a "gold standard" in diagnosing Old World cutaneous leishmaniasis. Diagnostic Microbiology and Infectious Disease 2011;71:151–5.
- [31] Leite RS, Ferreira S de A, Ituassu LT, de Melo MN, de Andrade ASR. PCR diagnosis of visceral leishmaniasis in asymptomatic dogs using conjunctival swab samples. Veterinary Parasitology 2010;170:201–6.
- [32] Roelfsema JH, Nozari N, Herremans T, Kortbeek LM, Pinelli E. Evaluation and improvement of two PCR targets in molecular typing of clinical samples of *Leishmania* patients. Experimental Parasitology 2011;127:36–41.
- [33] Rotureau B, Ravel C, Couppie P, Pratlong F, Nacher M, Dedet J-P, et al. Use of PCR-Restriction Fragment Length Polymorphism Analysis To Identify the Main New World *Leishmania* Species and Analyze Their Taxonomic Properties and Polymorphism by Application of the Assay to Clinical Samples. Journal of Clinical Microbiology 2006;44:459–67.

- [34] Schönian G, Nasereddin A, Dinse N, Schweynoch C, Schallig HDF., Presber W, et al. PCR diagnosis and characterization of *Leishmania* in local and imported clinical samples. Diagnostic Microbiology and Infectious Disease 2003;47:349–58.
- [35] Bensoussan E, Nasereddin A, Jonas F, Schnur LF, Jaffe CL. Comparison of PCR Assays for Diagnosis of Cutaneous Leishmaniasis. Journal of Clinical Microbiology 2006;44:1435–9.
- [36] Fernandes O, Murthy VK, Kurath U, Degrave WM, Campbell DA. Mini-exon gene variation in human pathogenic *Leishmania* species. Molecular and Biochemical Parasitology 1994;66:261–71.
- [37] Katakura K, Kawazu S, Naya T, Nagakura K, Ito M, Aikawa M, et al. Diagnosis of kala-azar by nested PCR based on amplification of the *Leishmania* mini-exon gene. Journal of Clinical Microbiology 1998;36:2173–7.
- [38] Marfurt J, Nasereddin A, Niederwieser I, Jaffe CL, Beck H-P, Felger I. Identification and Differentiation of *Leishmania* Species in Clinical Samples by PCR Amplification of the Miniexon Sequence and Subsequent Restriction Fragment Length Polymorphism Analysis. Journal of Clinical Microbiology 2003;41:3147–53.
- [39] Marfurt J, Niederwieser I, Makia ND, Beck H-P, Felger I. Diagnostic genotyping of Old and New World *Leishmania* species by PCR-RFLP. Diagnostic Microbiology and Infectious Disease 2003;46:115–24.
- [40] Serin MS, Waki K, Chang K-P, Aslan G, Direkel S, Otag F, et al. Consistence of miniexon polymerase chain reaction–restriction fragment length polymorphism and single-copy gene sequence analyses in discriminating *Leishmania* genotypes. Diagnostic Microbiology and Infectious Disease 2007;57:295–9.
- [41] Lachaud L, Marchergui-Hammami S, Chabbert E, Dereure J, Dedet JP, Bastien P. Comparison of Six PCR Methods Using Peripheral Blood for Detection of Canine Visceral Leishmaniasis. Journal of Clinical Microbiology 2002;40:210–5.
- [42] Minodier P, Piarroux R, Gambarelli F, Joblet C, Dumon H. Rapid identification of causative species in patients with Old World leishmaniasis. Journal of Clinical Microbiology 1997;35:2551–5.
- [43] Cruz I, Chicharro C, Nieto J, Bailo B, Canavate C, Figueras M-C, et al. Comparison of New Diagnostic Tools for Management of Pediatric Mediterranean Visceral Leishmaniasis. Journal of Clinical Microbiology 2006;44:2343–7.
- [44] Schönian G, Nasereddin A, Dinse N, Schweynoch C, Schallig HDF., Presber W, et al. PCR diagnosis and characterization of *Leishmania* in local and imported clinical samples. Diagnostic Microbiology and Infectious Disease 2003;47:349–58.
- [45] Nicolas L, Milon G, Prina E. Rapid differentiation of Old World *Leishmania* species by LightCycler polymerase chain reaction and melting curve analysis. Journal of Microbiological Methods 2002;51:295–9.

- [46] Schulz A, Mellenthin K, Schonian G, Fleischer B, Drosten C. Detection, Differentiation, and Quantitation of Pathogenic *Leishmania* Organisms by a Fluorescence Resonance Energy Transfer-Based Real-Time PCR Assay. Journal of Clinical Microbiology 2003;41:1529–35.
- [47] Paiva-Cavalcanti M, Regis-da-Silva C, Gomes Y. Comparison of real-time PCR and conventional PCR for detection of *Leishmania (Leishmania infantum)* infection: a minireview. Journal of Venomous Animals and Toxins Including Tropical Diseases 2010;16:537–42.
- [48] Mary C, Faraut F, Lascombe L, Dumon H. Quantification of *Leishmania infantum* DNA by a Real-Time PCR Assay with High Sensitivity. Journal of Clinical Microbiology 2004;42:5249–55.
- [49] Vitale F, Reale S, Vitale M, Petrotta E, Torina A, Caracappa S. TaqMan-based detection of *Leishmania infantum* DNA using canine samples. Annals of the New York Academy of Sciences 2004;1026:139–43.
- [50] Francino O, Altet L, Sánchez-Robert E, Rodriguez A, Solano-Gallego L, Alberola J, et al. Advantages of real-time PCR assay for diagnosis and monitoring of canine leishmaniosis. Veterinary Parasitology 2006;137:214–21.
- [51] De Paiva Cavalcanti M, Felinto de Brito ME, de Souza WV, de Miranda Gomes Y, Abath FGC. The development of a real-time PCR assay for the quantification of *Leishmania infantum* DNA in canine blood. Veterinary Journal (London, England: 1997) 2009;182:356–8.
- [52] Galletti E, Bonilauri P, Bardasi L, Fontana MC, Ramini M, Renzi M, et al. Development of a minor groove binding probe based real-time PCR for the diagnosis and quantification of *Leishmania infantum* in dog specimens. Research in Veterinary Science 2011;91:243–5.
- [53] Abbasi I, Aramin S, Hailu A, Shiferaw W, Kassahun A, Belay S, et al. Evaluation of PCR procedures for detecting and quantifying *Leishmania donovani* DNA in large numbers of dried human blood samples from a visceral leishmaniasis focus in Northern Ethiopia. BMC Infectious Diseases 2013;13:153.
- [54] Khosravi S, Hejazi SH, Hashemzadeh M, Eslami G, Darani HY. Molecular diagnosis of Old World leishmaniasis: real-time PCR based on tryparedoxin peroxidase gene for the detection and identification of *Leishmania* spp. Journal of Vector Borne Diseases 2012;49:15–8.
- [55] Talmi-Frank D, Nasereddin A, Schnur LF, Schönian G, Töz SO, Jaffe CL, et al. Detection and identification of old world *Leishmania* by high resolution melt analysis. PLoS Neglected Tropical Diseases 2010;4:e581.
- [56] Reithinger R, Dujardin J-C. Molecular Diagnosis of Leishmaniasis: Current Status and Future Applications. Journal of Clinical Microbiology 2006;45:21–5.

- [57] Van der Meide W, Guerra J, Schoone G, Farenhorst M, Coelho L, Faber W, et al. Comparison between quantitative nucleic acid sequence-based amplification, real-time reverse transcriptase PCR, and real-time PCR for quantification of *Leishmania* parasites. Journal of Clinical Microbiology 2008;46:73–8.
- [58] Van der Meide WF, Schoone GJ, Faber WR, Zeegelaar JE, de Vries HJC, Ozbel Y, et al. Quantitative nucleic acid sequence-based assay as a new molecular tool for detection and quantification of *Leishmania* parasites in skin biopsy samples. Journal of Clinical Microbiology 2005;43:5560–6.
- [59] Mugasa CM, Laurent T, Schoone GJ, Basiye FL, Saad AA, El Safi S, et al. Simplified molecular detection of *Leishmania* parasites in various clinical samples from patients with leishmaniasis. Parasites & Vectors 2010;3:13.
- [60] Basiye FL, Mbuchi M, Magiri C, Kirigi G, Deborggraeve S, Schoone GJ, et al. Sensitivity and specificity of the *Leishmania* OligoC-TesT and NASBA-oligochromatography for diagnosis of visceral leishmaniasis in Kenya. Tropical Medicine & International Health TM IH 2010;15:806–10.
- [61] Saad AA, Ahmed NG, Osman OS, Al-Basheer AA, Hamad A, Deborggraeve S, et al. Diagnostic Accuracy of the *Leishmania* OligoC-TesT and NASBA-Oligochromatography for Diagnosis of Leishmaniasis in Sudan. PLoS Neglected Tropical Diseases 2010;4:e776.
- [62] Van Eys GJ, Schoone GJ, Kroon NC, Ebeling SB. Sequence analysis of small subunit ribosomal RNA genes and its use for detection and identification of *Leishmania* parasites. Molecular and Biochemical Parasitology 1992;51:133–42.
- [63] Notomi T, Okayama H, Masubuchi H, Yonekawa T, Watanabe K, Amino N, et al. Loop-mediated isothermal amplification of DNA. Nucleic Acids Research 2000;28:E63.
- [64] Khan MGM, Bhaskar KRH, Salam MA, Akther T, Pluschke G, Mondal D. Diagnostic accuracy of loop-mediated isothermal amplification (LAMP) for detection of *Leishmania* DNA in buffy coat from visceral leishmaniasis patients. Parasites & Vectors 2012;5:280.
- [65] Adams ER, Schoone GJ, Ageed AF, Safi SE, Schallig HDFH. Development of a reverse transcriptase loop-mediated isothermal amplification (LAMP) assay for the sensitive detection of *Leishmania* parasites in clinical samples. The American Journal of Tropical Medicine and Hygiene 2010;82:591–6.
- [66] Mori Y, Notomi T. Loop-mediated isothermal amplification (LAMP): a rapid, accurate, and cost-effective diagnostic method for infectious diseases. Journal of Infection and Chemotherapy: Official Journal of the Japan Society of Chemotherapy 2009;15:62–9.

- [67] Nagamine K, Hase T, Notomi T. Accelerated reaction by loop-mediated isothermal amplification using loop primers. Molecular and Cellular Probes 2002;16:223–9.
- [68] Takagi H, Itoh M, Islam MZ, Razzaque A, Ekram ARMS, Hashighuchi Y, et al. Sensitive, specific, and rapid detection of *Leishmania donovani* DNA by loop-mediated isothermal amplification. The American Journal of Tropical Medicine and Hygiene 2009;81:578–82.
- [69] Verma S, Avishek K, Sharma V, Negi NS, Ramesh V, Salotra P. Application of loop-mediated isothermal amplification assay for the sensitive and rapid diagnosis of visceral leishmaniasis and post-kala-azar dermal leishmaniasis. Diagnostic Microbiology and Infectious Disease 2013;75:390–5.
- [70] De Doncker S, Hutse V, Abdellati S, Rijal S, Singh Karki BM, Decuypere S, et al. A new PCR-ELISA for diagnosis of visceral leishmaniasis in blood of HIV-negative subjects. Transactions of the Royal Society of Tropical Medicine and Hygiene 2005;99:25–31.
- [71] Costa JM, Durand R, Deniau M, Rivollet D, Izri M, Houin R, et al. PCR enzymelinked immunosorbent assay for diagnosis of leishmaniasis in human immunodeficiency virus-infected patients. Journal of Clinical Microbiology 1996;34:1831–3.
- [72] Martin-Sanchez J, Lopez-Lopez MC, Acedo-Sanchez C, Castro-Fajardo JJ, Pineda JA, Morillas-Marquez F. Diagnosis of infections with *Leishmania infantum* using PCR-ELI-SA. Parasitology 2001;122:607–15.
- [73] Mugasa CM, Deborggraeve S, Schoone GJ, Laurent T, Leeflang MM, Ekangu RA, et al. Accordance and concordance of PCR and NASBA followed by oligochromatography for the molecular diagnosis of Trypanosoma brucei and *Leishmania*. Tropical Medicine & International Health TM IH 2010;15:800–5.
- [74] SchöNian G, Kuhls K, Mauricio IL. Molecular approaches for a better understanding of the epidemiology and population genetics of *Leishmania*. Parasitology 2010;138:405–25.
- [75] Morales MA, Cruz I, Rubio JM, Chicharro C, Cañavate C, Laguna F, et al. Relapses versus reinfections in patients coinfected with *Leishmania infantum* and human immunodeficiency virus type 1. The Journal of Infectious Diseases 2002;185:1533–7.
- [76] Morales MA, Chicharro C, Ares M, Cañavate C, Barker DC, Alvar J. Molecular tracking of infections by *Leishmania infantum*. Transactions of the Royal Society of Tropical Medicine and Hygiene 2001;95:104–7.
- [77] Botilde Y, Laurent T, Quispe Tintaya W, Chicharro C, Cañavate C, Cruz I, et al. Comparison of molecular markers for strain typing of *Leishmania infantum*. Infection, Genetics and Evolution: Journal of Molecular Epidemiology and Evolutionary Genetics in Infectious Diseases 2006;6:440–6.

- [78] Cupolillo E, Grimaldi Júnior G, Momen H, Beverley SM. Intergenic region typing (IRT): a rapid molecular approach to the characterization and evolution of *Leishmania*. Molecular and Biochemical Parasitology 1995;73:145–55.
- [79] Nasereddin A, Bensoussan-Hermano E, Schönian G, Baneth G, Jaffe CL. Molecular diagnosis of Old World cutaneous leishmaniasis and species identification by use of a reverse line blot hybridization assay. Journal of Clinical Microbiology 2008;46:2848–55.
- [80] Piarroux R, Azaiez R, Lossi AM, Reynier P, Muscatelli F, Gambarelli F, et al. Isolation and characterization of a repetitive DNA sequence from *Leishmania infantum*: development of a visceral leishmaniasis polymerase chain reaction. The American Journal of Tropical Medicine and Hygiene 1993;49:364–9.
- [81] Castilho TM, Shaw JJ, Floeter-Winter LM. New PCR assay using glucose-6-phosphate dehydrogenase for identification of *Leishmania* species. Journal of Clinical Microbiology 2003;41:540–6.
- [82] Victoir K, Bañuls AL, Arevalo J, Llanos-Cuentas A, Hamers R, Noël S, et al. The gp63 gene locus, a target for genetic characterization of *Leishmania* belonging to subgenus Viannia. Parasitology 1998;117 ( Pt 1):1–13.
- [83] Fraga J, Montalvo AM, De Doncker S, Dujardin J-C, Van der Auwera G. Phylogeny of *Leishmania* species based on the heat-shock protein 70 gene. Infection, Genetics and Evolution 2010;10:238–45.
- [84] Garcia L, Kindt A, Bermudez H, Llanos-Cuentas A, De Doncker S, Arevalo J, et al. Culture-Independent Species Typing of Neotropical *Leishmania* for Clinical Validation of a PCR-Based Assay Targeting Heat Shock Protein 70 Genes. Journal of Clinical Microbiology 2004;42:2294–7.
- [85] Kato H, Uezato H, Katakura K, Calvopiña M, Marco JD, Barroso PA, et al. Detection and identification of *Leishmania* species within naturally infected sand flies in the andean areas of ecuador by a polymerase chain reaction. The American Journal of Tropical Medicine and Hygiene 2005;72:87–93.
- [86] Zelazny AM, Fedorko DP, Li L, Neva FA, Fischer SH. Evaluation of 7SL RNA gene sequences for the identification of *Leishmania* spp. The American Journal of Tropical Medicine and Hygiene 2005;72:415–20.
- [87] Garcia AL, Kindt A, Quispe-Tintaya KW, Bermudez H, Llanos A, Arevalo J, et al. American tegumentary leishmaniasis: antigen-gene polymorphism, taxonomy and clinical pleomorphism. Infection, Genetics and Evolution: Journal of Molecular Epidemiology and Evolutionary Genetics in Infectious Diseases 2005;5:109–16.
- [88] Hide M, Bañuls A-L. Species-specific PCR assay for L. infantum/L. donovani discrimination. Acta Tropica 2006;100:241–5.
- [89] Oshaghi MA, Ravasan NM, Hide M, Javadian E-A, Rassi Y, Sedaghat MM, et al. Development of species-specific PCR and PCR-restriction fragment length polymor-

- phism assays for L.infantum/L.donovani discrimination. Experimental Parasitology 2009;122:61–5.
- [90] Quispe-Tintaya KW, Laurent T, Decuypere S, Hide M, Bañuls A-L, De Doncker S, et al. Fluorogenic assay for molecular typing of the *Leishmania donovani* complex: taxonomic and clinical applications. The Journal of Infectious Diseases 2005;192:685–92.
- [91] Mauricio IL, Gaunt MW, Stothard JR, Miles MA. Genetic typing and phylogeny of the *Leishmania donovani* complex by restriction analysis of PCR amplified gp63 intergenic regions. Parasitology 2001;122:393–403.
- [92] Cupolillo E, Brahim LR, Toaldo CB, de Oliveira-Neto MP, de Brito MEF, Falqueto A, et al. Genetic Polymorphism and Molecular Epidemiology of *Leishmania (Viannia) braziliensis* from Different Hosts and Geographic Areas in Brazil. Journal of Clinical Microbiology 2003;41:3126–32.
- [93] Cupolillo E, Grimaldi G Jr, Momen H. A general classification of New World *Leishmania* using numerical zymotaxonomy. The American Journal of Tropical Medicine and Hygiene 1994;50:296–311.
- [94] Schönian G, Schnur L, el Fari M, Oskam L, Kolesnikov AA, Sokolowska-Köhler W, et al. Genetic heterogeneity in the species *Leishmania tropica* revealed by different PCR-based methods. Transactions of the Royal Society of Tropical Medicine and Hygiene 2001;95:217–24.
- [95] Mauricio IL, Stothard JR, Miles MA. *Leishmania donovani* complex: genotyping with the ribosomal internal transcribed spacer and the mini-exon. Parasitology 2004;128:263–7.
- [96] Chicharro C, Morales MA, Serra T, Ares M, Salas A, Alvar J. Molecular epidemiology of *Leishmania infantum* on the island of Majorca: a comparison of phenotypic and genotypic tools. Transactions of the Royal Society of Tropical Medicine and Hygiene 2002;96 Suppl 1:S93–99.
- [97] Cortes S, Mauricio I, Almeida A, Cristovão JM, Pratlong F, Dedet JP, et al. Application of kDNA as a molecular marker to analyse *Leishmania infantum* diversity in Portugal. Parasitology International 2006;55:277–83.
- [98] Laurent T, Rijal S, Yardley V, Croft S, De Doncker S, Decuypere S, et al. Epidemiological dynamics of antimonial resistance in *Leishmania donovani*: genotyping reveals a polyclonal population structure among naturally-resistant clinical isolates from Nepal.Infection, Genetics and Evolution: Journal of Molecular Epidemiology and Evolutionary Genetics in Infectious Diseases 2007;7:206–12.
- [99] Noyes HA, Reyburn H, Bailey JW, Smith D. A nested-PCR-based schizodeme method for identifying *Leishmania* kinetoplast minicircle classes directly from clinical samples and its application to the study of the epidemiology of *Leishmania tropica* in Pakistan. Journal of Clinical Microbiology 1998;36:2877–81.

- [100] Hamilton PB, Adams ER, Malele II, Gibson WC. A novel, high-throughput technique for species identification reveals a new species of tsetse-transmitted trypanosome related to the Trypanosoma brucei subgenus, Trypanozoon. Infection, Genetics and Evolution 2008;8:26–33.
- [101] Tomas-Perez M, Fisa R, Riera C. The Use of Fluorescent Fragment Length Analysis (PCR-FFL) in the Direct Diagnosis and Identification of Cutaneous *Leishmania* Species. The American Journal of Tropical Medicine and Hygiene 2013;88:586–91.
- [102] Da Silva LA, de Sousa CDS, da Graça GC, Porrozzi R, Cupolillo E. Sequence analysis and PCR-RFLP profiling of the hsp70 gene as a valuable tool for identifying *Leishmania* species associated with human leishmaniasis in Brazil.Infection, Genetics and Evolution: Journal of Molecular Epidemiology and Evolutionary Genetics in Infectious Diseases 2010;10:77–83.
- [103] Lessa MM, Lessa HA, Castro TWN, Oliveira A, Scherifer A, Machado P, et al. Mucosal leishmaniasis: epidemiological and clinical aspects. Brazilian Journal of Otorhinolaryngology 2007;73:843–7.
- [104] Arevalo J, Ramirez L, Adaui V, Zimic M, Tulliano G, Miranda-Verástegui C, et al. Influence of *Leishmania* (*Viannia*) species on the response to antimonial treatment in patients with American tegumentary leishmaniasis. The Journal of Infectious Diseases 2007;195:1846–51.
- [105] Llanos-Cuentas A, Tulliano G, Araujo-Castillo R, Miranda-Verastegui C, Santamaria-Castrellon G, Ramirez L, et al. Clinical and parasite species risk factors for pentavalent antimonial treatment failure in cutaneous leishmaniasis in Peru.Clinical Infectious Diseases: An Official Publication of the Infectious Diseases Society of America 2008;46:223–31.
- [106] Thomaz-Soccol V, Velez ID, Pratlong F, Agudelos S, Lanotte G, Rioux JA. Enzymatic polymorphism and phylogenetic relationships in *Leishmania* Ross, 1903 (Sarcomastigophora: Kinetoplastida): a case study in Colombia. Systematic Parasitolog 2000;46:59–68.
- [107] Garcia AL, Parrado R, De Doncker S, Bermudez H, Dujardin J-C. American tegumentary leishmaniasis: direct species identification of *Leishmania* in non-invasive clinical samples. Transactions of the Royal Society of Tropical Medicine and Hygiene 2007;101:368–71.
- [108] Montalvo AM, Fraga J, Monzote L, Montano I, De Doncker S, Dujardin JC, et al. Heat-shock protein 70 PCR-RFLP: a universal simple tool for *Leishmania* species discrimination in the New and Old World. Parasitology 2010;137:1159–68.
- [109] Montalvo AM, Fraga J, Maes I, Dujardin J-C, Van der Auwera G. Three new sensitive and specific heat-shock protein 70 PCRs for global *Leishmania* species identification. European Journal of Clinical Microbiology & Infectious Diseases 2011;31:1453–61.

- [110] Bensoussan E, Nasereddin A, Jonas F, Schnur LF, Jaffe CL. Comparison of PCR assays for diagnosis of cutaneous leishmaniasis. Journal of Clinical Microbiology 2006;44:1435–9.
- [111] Rocha MN, Margonari C, Presot IM, Soares RP. Evaluation of 4 polymerase chain reaction protocols for cultured *Leishmania* spp. typing. Diagnostic Microbiology and Infectious Disease 2010;68:401–9.
- [112] Alexander J, Coombs GH, Mottram JC. *Leishmania mexicana* cysteine proteinase-deficient mutants have attenuated virulence for mice and potentiate a Th1 response. Journal of Immunology (Baltimore, Md.: 1950) 1950 1998;161:6794–801.
- [113] Mundodi V, Somanna A, Farrell PJ, Gedamu L. Genomic organization and functional expression of differentially regulated cysteine protease genes of *Leishmania donovani* complex. Gene 2002;282:257–65.
- [114] Quispe Tintaya KW, Ying X, Dedet J-P, Rijal S, De Bolle X, Dujardin J-C. Antigen genes for molecular epidemiology of leishmaniasis: polymorphism of cysteine proteinase B and surface metalloprotease glycoprotein 63 in the *Leishmania donovani* complex. The Journal of Infectious Diseases 2004;189:1035–43.
- [115] Wortmann G, Hochberg L, Houng H-H, Sweeney C, Zapor M, Aronson N, et al. Rapid identification of *Leishmania* complexes by a real-time PCR assay. The American Journal of Tropical Medicine and Hygiene 2005;73:999–1004.
- [116] Castilho TM, Camargo LMA, McMahon-Pratt D, Shaw JJ, Floeter-Winter LM. A real-time polymerase chain reaction assay for the identification and quantification of American *Leishmania* species on the basis of glucose-6-phosphate dehydrogenase. The American Journal of Tropical Medicine and Hygiene 2008;78:122–32.
- [117] Weirather JL, Jeronimo SMB, Gautam S, Sundar S, Kang M, Kurtz MA, et al. Serial quantitative PCR assay for detection, species discrimination, and quantification of *Leishmania* spp. in human samples. Journal of Clinical Microbiology 2011;49:3892–904.
- [118] Tsukayama P, Núñez JH, De Los Santos M, Soberón V, Lucas CM, Matlashewski G, et al. A FRET-based real-time PCR assay to identify the main causal agents of New World tegumentary leishmaniasis. PLoS Neglected Tropical Diseases 2013;7:e1956.
- [119] Rioux JA, Lanotte G, Serres E, Pratlong F, Bastien P, Perieres J. Taxonomy of *Leishmania*. Use of isoenzymes. Suggestions for a new classification. Annales de Parasitologie Humaine et Comparée 1990;65:111–25.
- [120] Bañuls A-L, Hide M, Prugnolle F. *Leishmania* and the Leishmaniases: A Parasite Genetic Update and Advances in Taxonomy, Epidemiology and Pathogenicity in Humans. Advances in Parasitology., vol. 64, Elsevier; 2007, p. 1–458.

- [121] Hide M, Bañuls AL, Tibayrenc M. Genetic heterogeneity and phylogenetic status of *Leishmania (Leishmania) infantum* zymodeme MON-1: epidemiological implications. Parasitology 2001;123:425–32.
- [122] Ochsenreither S, Kuhls K, Schaar M, Presber W, Schönian G. Multilocus microsatellite typing as a new tool for discrimination of *Leishmania infantum* MON-1 strains.

  Journal of Clinical Microbiology 2006;44:495–503.
- [123] Jamjoom MB, Ashford RW, Bates PA, Chance ML, Kemp SJ, Watts PC, et al. *Leishmania donovani* is the only cause of visceral leishmaniasis in East Africa; previous descriptions of *L. infantum* and "*L. archibaldi*" from this region are a consequence of convergent evolution in the isoenzyme data. Parasitology 2004;129:399–409.
- [124] Zemanová E, Jirků M, Mauricio IL, Miles MA, Lukes J. Genetic polymorphism within the *Leishmania donovani* complex: correlation with geographic origin. The American Journal of Tropical Medicine and Hygiene 2004;70:613–7.
- [125] Lukes J, Mauricio IL, Schönian G, Dujardin J-C, Soteriadou K, Dedet J-P, et al. Evolutionary and geographical history of the *Leishmania donovani* complex with a revision of current taxonomy. Proceedings of the National Academy of Sciences of the United States of America 2007;104:9375–80.
- [126] Schwenkenbecher JM, Wirth T, Schnur LF, Jaffe CL, Schallig H, Al-Jawabreh A, et al. Microsatellite analysis reveals genetic structure of *Leishmania tropica*. International Journal for Parasitology 2006;36:237–46.
- [127] Alam MZ, Haralambous C, Kuhls K, Gouzelou E, Sgouras D, Soteriadou K, et al. The paraphyletic composition of *Leishmania donovani* zymodeme MON-37 revealed by multilocus microsatellite typing. Microbes and Infection / Institut Pasteur 2009;11:707–15.
- [128] Williams JG, Kubelik AR, Livak KJ, Rafalski JA, Tingey SV. DNA polymorphisms amplified by arbitrary primers are useful as genetic markers. Nucleic Acids Research 1990;18:6531–5.
- [129] Welsh J, McClelland M. Fingerprinting genomes using PCR with arbitrary primers. Nucleic Acids Research 1990;18:7213–8.
- [130] Baptista C, Schubach AO, Madeira MF, Leal CA, Pires MQ, Oliveira FS, et al. *Leishmania (Viannia) braziliensis* genotypes identified in lesions of patients with atypical or typical manifestations of tegumentary leishmaniasis: Evaluation by two molecular markers. Experimental Parasitology 2009;121:317–22.
- [131] Gomes RF, Macedo AM, Pena SD, Melo MN. *Leishmania (Viannia) braziliensis*: genetic relationships between strains isolated from different areas of Brazil as revealed by DNA fingerprinting and RAPD. Experimental Parasitology 1995;80:681–7.
- [132] Mahmoudzadeh-Niknam H, Ajdary S, Riazi-Rad F, Mirzadegan E, Rezaeian A, Khaze V, et al. Molecular epidemiology of cutaneous leishmaniasis and heterogenei-

- ty of *Leishmania major* strains in Iran: Molecular epidemiology of cutaneous leishmaniasis. Tropical Medicine & International Health 2012;17:1335–44.
- [133] Hamad SH, Khalil EAG, Musa AM, Ibrahim ME, Younis BM, Elfaki MEE, et al. *Leishmania donovani*: genetic diversity of isolates from Sudan characterized by PCR-based RAPD. Experimental Parasitology 2010;125:389–93.
- [134] Mauricio IL, Howard MK, Stothard JR, Miles MA. Genomic diversity in the *Leishmania donovani* complex. Parasitology 1999;119 ( Pt 3):237–46.
- [135] Segatto M, Ribeiro LS, Costa DL, Costa CHN, Oliveira MR de, Carvalho SFG, et al. Genetic diversity of *Leishmania infantum* field populations from Brazil. Memórias Do Instituto Oswaldo Cruz 2012;107:39–47.
- [136] Martinez E, Alonso V, Quispe A, Thomas MC, Alonso R, Piero JE, et al. RAPD method useful for distinguishing *Leishmania* species: design of specific primers for *L. braziliensis*. Parasitology 2003;127:513–7.
- [137] Ikram G, Dellagi K, Ismaïl RB. Random amplified polymorphic DNA technique for identification and differentiation of old world *Leishmania* species. The American Journal of Tropical Medicine and Hygiene 2002;66:152–6.
- [138] Khanra S, Bandopadhyay SK, Chakraborty P, Datta S, Mondal D, Chatterjee M, et al. Characterization of the recent clinical isolates of Indian Kala-azar patients by RAPD-PCR method. Journal of Parasitic Diseases: Official Organ of the Indian Society for Parasitology 2011;35:116–22.
- [139] Smith DF, Searle S, Ready PD, Gramiccia M, Ben-Ismail R. A kinetoplast DNA probe diagnostic for *Leishmania major*: sequence homologies between regions of *Leishmania* minicircles. Molecular and Biochemical Parasitology 1989;37:213–23.
- [140] Gramiccia M, Smith DF, Angelici MC, Ready PD, Gradoni L. A kinetoplast DNA probe diagnostic for *Leishmania infantum*. Parasitology 1992;105 ( Pt 1):29–34.
- [141] Laskay T, Kiessling R, Rinke deWit TF, Wirth DF. Generation of species-specific DNA probes for *Leishmania aethiopica*. Molecular and Biochemical Parasitology 1991;44:279–86.
- [142] Rodríguez N, Guzman B, Rodas A, Takiff H, Bloom BR, Convit J. Diagnosis of cutaneous leishmaniasis and species discrimination of parasites by PCR and hybridization. Journal of Clinical Microbiology 1994;32:2246–52.
- [143] Brenière SF, Telleria J, Bosseno MF, Buitrago R, Bastrenta B, Cuny G, et al. Polymerase chain reaction-based identification of New World *Leishmania* species complexes by specific kDNA probes. Acta Tropica 1999;73:283–93.
- [144] Howard MK, Kelly JM, Lane RP, Miles MA. A sensitive repetitive DNA probe that is specific to the *Leishmania donovani* complex and its use as an epidemiological and diagnostic reagent. Molecular and Biochemical Parasitology 1991;44:63–72.

- [145] Van Eys GJ, Guizani I, Ligthart GS, Dellagi K. A nuclear DNA probe for the identification of strains within the *Leishmania donovani* complex. Experimental Parasitology 1991;72:459–63.
- [146] Van Eys GJ, Schoone GJ, Ligthart GS, Alvar J, Evans DA, Terpstra WJ. Identification of "Old World" *Leishmania* by DNA recombinant probes. Molecular and Biochemical Parasitology 1989;34:53–62.
- [147] Grisard EC, Steindel M, Shaw JJ, Ishikawa EA, Carvalho-Pinto CJ, Eger-Mangrich I, et al. Characterization of *Leishmania* sp. strains isolated from autochthonous cases of human cutaneous leishmaniasis in Santa Catarina State, southern Brazil. Acta Tropica 2000;74:89–93.
- [148] Rodriguez N, De Lima H, Rodriguez A, Brewster S, Barker DC. Genomic DNA repeat from *Leishmania (Viannia) braziliensis* (Venezuelan strain) containing simple repeats and microsatellites. Parasitology 1997;115 ( Pt 4):349–58.
- [149] Rodriguez N, Rodriguez A, Cardona M, Barrios MA, McCann SH, Barker DC. *Leishmania (Viannia) guyanensis*: a new minicircle class exclusive to this specie isolated from a DNA cosmid library useful for taxonomic purposes. Experimental Parasitology 2000;94:143–9.
- [150] Schönian G, Mauricio I, Gramiccia M, Cañavate C, Boelaert M, Dujardin J-C. Leishmaniases in the Mediterranean in the era of molecular epidemiology. Trends in Parasitology 2008;24:135–42.
- [151] Mauricio IL, Yeo M, Baghaei M, Doto D, Pratlong F, Zemanova E, et al. Towards multilocus sequence typing of the *Leishmania donovani* complex: resolving genotypes and haplotypes for five polymorphic metabolic enzymes (ASAT, GPI, NH1, NH2, PGD).International Journal for Parasitology 2006;36:757–69.
- [152] Zemanová E, Jirků M, Mauricio IL, Horák A, Miles MA, Lukeš J. The *Leishmania donovani* complex: Genotypes of five metabolic enzymes (ICD, ME, MPI, G6PDH, and FH), new targets for multilocus sequence typing. International Journal for Parasitology 2007;37:149–60.
- [153] Tsukayama P, Lucas C, Bacon DJ. Typing of four genetic loci discriminates among closely related species of New World *Leishmania*. International Journal for Parasitology 2009;39:355–62.
- [154] Zhang C-Y, Lu X-J, Du X-Q, Jian J, Shu L, Ma Y. Phylogenetic and Evolutionary Analysis of Chinese *Leishmania* Isolates Based on Multilocus Sequence Typing. PLoS ONE 2013;8:e63124.
- [155] Alam MZ, Kovalenko DA, Kuhls K, Nasyrova RM, Ponomareva VI, Fatullaeva AA, et al. Identification of the agent causing visceral leishmaniasis in Uzbeki and Tajiki foci by analysing parasite DNA extracted from patients' Giemsa-stained tissue preparations. Parasitology 2009;136:981.

- [156] Gouzelou E, Haralambous C, Amro A, Mentis A, Pratlong F, Dedet J-P, et al. Multilocus microsatellite typing (MLMT) of strains from Turkey and Cyprus reveals a novel monophyletic *L. donovani* sensu lato group. PLoS Neglected Tropical Diseases 2012;6:e1507.
- [157] Jamjoom MB, Ashford RW, Bates PA, Kemp SJ, Noyes HA. Towards a standard battery of microsatellite markers for the analysis of the *Leishmania donovani* complex. Annals of Tropical Medicine and Parasitology 2002;96:265–70.
- [158] Kuhls K, Keilonat L, Ochsenreither S, Schaar M, Schweynoch C, Presber W, et al. Multilocus microsatellite typing (MLMT) reveals genetically isolated populations between and within the main endemic regions of visceral leishmaniasis. Microbes and Infection 2007;9:334–43.
- [159] Jamjoom MB, Ashford RW, Bates PA, Kemp SJ, Noyes HA. Polymorphic microsatellite repeats are not conserved between *Leishmania donovani* and *Leishmania major*. Molecular Ecology Notes 2002;2:104–6.
- [160] Azmi K, Schnur L, Schonian G, Nasereddin A, Pratlong F, El Baidouri F, et al. Genetic, serological and biochemical characterization of *Leishmania tropica* from foci in northern Palestine and discovery of zymodeme MON-307. Parasites & Vectors 2012;5:121.
- [161] Oddone R, Schweynoch C, Schönian G, de Sousa C dos S, Cupolillo E, Espinosa D, et al. Development of a multilocus microsatellite typing approach for discriminating strains of *Leishmania (Viannia)* species. Journal of Clinical Microbiology 2009;47:2818–25.
- [162] Rioux JA, Lanotte G, Serres E, Pratlong F, Bastien P, Perieres J. Taxonomy of *Leishmania*. Use of isoenzymes. Suggestions for a new classification. Annales de Parasitologie Humaine et Comparée 1990;65:111–25.
- [163] Schönian G, Cupolillo E, Mauricio I. Molecular Evolution and Phylogeny of *Leishmania*. In: Ponte-Sucre A, Diaz E, Padrón-Nieves M, editors. Drug Resistance in *Leishmania* Parasites,, Vienna: Springer Vienna; 2013, p. 15–44.
- [164] Croan DG, Morrison DA, Ellis JT. Evolution of the genus *Leishmania* revealed by comparison of DNA and RNA polymerase gene sequences. Molecular and Biochemical Parasitology 1997;89:149–59.
- [165] Berzunza-Cruz M, Cabrera N, Crippa-Rossi M, Sosa Cabrera T, Pérez-Montfort R, Becker I. Polymorphism analysis of the internal transcribed spacer and small subunit of ribosomal RNA genes of *Leishmania mexicana*. Parasitology Research 2002;88:918–25.
- [166] Dávila AM, Momen H. Internal-transcribed-spacer (ITS) sequences used to explore phylogenetic relationships within *Leishmania*. Annals of Tropical Medicine and Parasitology 2000;94:651–4.

- [167] Waki K, Dutta S, Ray D, Kolli BK, Akman L, Kawazu S-I, et al. Transmembrane molecules for phylogenetic analyses of pathogenic protists: *Leishmania*-specific informative sites in hydrophilic loops of trans- endoplasmic reticulum N-acetylglucosamine-1-phosphate transferase. Eukaryotic Cell 2007;6:198–210.
- [168] Asato Y, Oshiro M, Myint CK, Yamamoto Y, Kato H, Marco JD, et al. Phylogenic analysis of the genus *Leishmania* by cytochrome b gene sequencing. Experimental Parasitology 2009;121:352–61.
- [169] Cupolillo E, Medina-Acosta E, Noyes H, Momen H, Grimaldi G Jr. A revised classification for *Leishmania* and *Endotrypanum*. Parasitology Today (Personal Ed.) 2000;16:142–4.
- [170] Kuhls K, Alam MZ, Cupolillo E, Ferreira GEM, Mauricio IL, Oddone R, et al. Comparative microsatellite typing of new world *Leishmania infantum* reveals low heterogeneity among populations and its recent old world origin. PLoS Neglected Tropical Diseases 2011;5:e1155.
- [171] Maurício IL, Stothard JR, Miles MA. The strange case of *Leishmania chagasi*. Parasitology Today (Personal Ed.) 2000;16:188–9.
- [172] Spanakos G, Piperaki E-T, Menounos PG, Tegos N, Flemetakis A, Vakalis NC. Detection and species identification of Old World *Leishmania* in clinical samples using a PCR-based method. Transactions of the Royal Society of Tropical Medicine and Hygiene 2008;102:46–53.
- [173] Yurchenko VY, Lukes J, Jirku M, Zeledón R, Maslov DA. Leptomonas costaricensis sp. n. (Kinetoplastea: Trypanosomatidae), a member of the novel phylogenetic group of insect trypanosomatids closely related to the genus *Leishmania*. Parasitology 2006;133:537–46.
- [174] Banuls AL, Hide M, Tibayrenc M. Molecular epidemiology and evolutionary genetics of Leischmania parasites. International Journal for Parasitology 1999;29:1137–47.
- [175] Grimaldi G Jr, Tesh RB. Leishmaniases of the New World: current concepts and implications for future research. Clinical Microbiology Reviews 1993;6:230–50.
- [176] Noyes H, Pratlong F, Chance M, Ellis J, Lanotte G, Dedet JP. A previously unclassified trypanosomatid responsible for human cutaneous lesions in Martinique (French West Indies) is the most divergent member of the genus *Leishmania* sp. Parasitology 2002;124:17–24.
- [177] Suankratay C, Suwanpimolkul G, Wilde H, Siriyasatien P. Autochthonous visceral leishmaniasis in a human immunodeficiency virus (HIV)-infected patient: the first in thailand and review of the literature. The American Journal of Tropical Medicine and Hygiene 2010;82:4–8.

- [178] Sukmee T, Siripattanapipong S, Mungthin M, Worapong J, Rangsin R, Samung Y, et al. A suspected new species of *Leishmania*, the causative agent of visceral leishmaniasis in a Thai patient.International Journal for Parasitology 2008;38:617–22.
- [179] Villinski JT, Klena JD, Abbassy M, Hoel DF, Puplampu N, Mechta S, et al. Evidence for a new species of *Leishmania* associated with a focal disease outbreak in Ghana.Diagnostic Microbiology and Infectious Disease 2008;60:323–7.
- [180] Rose K, Curtis J, Baldwin T, Mathis A, Kumar B, Sakthianandeswaren A, et al. Cutaneous leishmaniasis in red kangaroos: isolation and characterisation of the causative organisms.International Journal for Parasitology 2004;34:655–64.
- [181] Lobsiger L, Müller N, Schweizer T, Frey CF, Wiederkehr D, Zumkehr B, et al. An autochthonous case of cutaneous bovine leishmaniasis in Switzerland. Veterinary Parasitology 2010;169:408–14.
- [182] Müller N, Welle M, Lobsiger L, Stoffel MH, Boghenbor KK, Hilbe M, et al. Occurrence of *Leishmania* sp. in cutaneous lesions of horses in Central Europe. Veterinary Parasitology 2009;166:346–51.
- [183] Silveira FT, Ishikawa EAY, De Souza AAA, Lainson R. An outbreak of cutaneous leishmaniasis among soldiers in Belém, Pará State, Brazil, caused by *Leishmania (Viannia) lindenbergi* n. sp. A new leishmanial parasite of man in the Amazon region. Parasite (Paris, France) 2002;9:43–50.
- [184] Simpson AGB, Stevens JR, Lukeš J. The evolution and diversity of kinetoplastid flagellates. Trends in Parasitology 2006;22:168–74.
- [185] Miles MA, Llewellyn MS, Lewis MD, Yeo M, Baleela R, Fitzpatrick S, et al. The molecular epidemiology and phylogeography of *Trypanosoma cruzi* and parallel research on *Leishmania*: looking back and to the future. Parasitology 2009;136:1509–28.



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