Dry type leishmanial lymphadenitis presented as two large parotid and cervical masses.

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Abstract

BACKGROUND:
Cutaneous leishmaniasis (CL) is a common disease in Iran, particularly in Kerman and Bam and Kerman province. Lymphadenitis resulting from leishmania tropica (dry type) with, or without, cutaneous lesion is rare. Localized leishmanial lymphadenitis (LLA) is a specific clinico-pathologic presentation of inflammatory changes caused by leishmanial parasites or antigen within an isolated lymph node without any systemic manifestation.

CASE REPORT:
A 55-year-old Iranian woman presented with two slow growing large nodules (masses) on the left preauricular and the left cervical areas. The nodules were large, painless, mobile, multilobulated, and associated with a small skin papule on the left-side of the cheek distal to themasses.

RESULTS:
Histopathologic examination of both the skin lesion and the lymph nodes suggested the leishmanial etiology of skin papule and lymphadenitis. The Leishman-bodies (amastigotes) were demonstrated in two lymph nodes and a skin lesion. The clinical picture plus pathological finding and the response to meglumine-antimoniate confirmed LLA.

CONCLUSION:
Lymph node involvement is another rare manifestation of dissemination of infection with dermotropic leishmania. This presentation of CL should not be treated with the ordinary local treatments such as curettage, cryotherapy or surgical excision.