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FIOCRUZ

INFECTIOUS DISEASES DATA OBSERVATORY



PANAFTOSA Pan American Center for Foot-and-Mouth Disease and Veterinary Public Health



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Content

1.	WELCOME TO THE WORLDLEISH7	7
2.	GENERAL SCHEDULE)
3.	SYMPOSIUMS	L
	S1. ROLE OF ASYMPTOMATICS IN THE TRANSMISSION OF LEISHMANIASIS, SLEEPING SICKNESS AND CHAGAS DISEASE	<u>)</u>
	S2. NEW VACCINES AND IMMUNOTHERAPIES FOR CANINE LEISHMANIASIS	;
	S3. EMERGING FOCI AND CHANGING EPIDEMIOLOGY OF LEISHMANIASIS	L
	S4. ELIMINATING VL AS A PUBLIC HEALTH PROBLEM IN THE WHO SOUTH-EAST ASIA REGION: THE LAST MILE CHALLENGES AND OPPORTUNITIES THROUGH THE NEW REGIONAL STRATEGY	8
	S5. INFLAMASOMES AND Leishmania	, }
	S6. PATHOGENESIS OF KALA-AZAR	ł
	S7. INNOVATION IN R&D TO CONTRIBUTE TO VL ELIMINATION	ł
	S8. SAND FLY SALIVA AND IMMUNE RESPONSE OF BITTEN HOSTS)
	S9. ELIMINATING VL IN INDIA: THE LAST MILE CHALLENGES AND OPPORTUNITIES 66	
	S10. NEW TRENDS IN THE DIAGNOSIS OF CHAGAS DISEASE	;
	S11. NEW INSIGHTS IN POSTTRANSCRIPTIONAL REGULATION IN Leishmania: IMPLICATIONS IN THE PARASITE DEVELOPMENT AND DISEASE CONTROL	ł
	S12. VL-HIV COINFECTION	ŀ
	S13. "ATYPICAL" CUTANEOUS LEISHMANIASIS)
	S14. EPIDEMIOLOGY OF LEISHMANIASIS IN AMERICA)
	S15. ANIMAL MODELS FOR VISCERAL LEISHMANIASIS: SUITABILITY AND APPLICATIONS)
	S16. DRUG RESISTANCE AND TREATMENT FAILURE IN LEISHMANIASIS: A 21ST CENTURY CHALLENGE)
	S17. VL ELIMINATION AS A PUBLIC HEALTH PROBLEM IN INDIA	;

0

C

S18. VECTOR COMPETENCE AND Leishmania-SAND FLY INTERACTIONS
S19. DRUG TARGET IDENTIFICATION
S20. LEISHMANIASIS VACCINE: PAST, PRESENT AND FUTURE
S21. NEW GUIDELINE FOR THE TREATMENT OF LEISHMANIASIS IN THE AMERICAS: WHAT HAS CHANGED?
S22. MOLECULAR PATHOLOGY AND STRATIFICATION OF LEISHMANIASIS
S23. FUTURE PROSPECTS IN THE TREATMENT OF CUTANEOUS LEISHMANIASIS FORM
S24. LEISHMANIASIS AND MOVEMENT: IMPORTED LEISHMANIASIS BY TRAVELERS AND MIGRANTS
S25. BIOMARKERS FOR DIAGNOSIS OF LEISHMANIASIS
S26. CELL BIOLOGY AND Leishmania INFECTION
S27. Leishmania EXTRACELLULAR VESICLES: IMPACT ON DISEASE PROGRESSION204
S28. VECTOR SURVEILLANCE AND CONTROL FOR VISCERAL LEISHMANIASIS ELIMINATION
S29. A GLOBAL VISCERAL LEISHMANIASIS DATA PLATFORM
S30. IMMUNOPATHOGENESIS AND HOST-DIRECTED THERAPIES IN LEISHMANIASIS
S31. RESERVOIRS OF LEISHMANIASIS
S32. GENOMICS AND EPIDEMIOLOGICAL SURVEILLANCE
S33. EXPERIENCE WITH mHEALTH AND LEISHMANIASIS
S34. EMPOWERING PEOPLE WITH CUTANEOUS LEISHMANIASIS THROUGH INTERDISCIPLINARY RESEARCH AND COMMUNITY-BASED INTERVENTIONS (ECLIPSE) 254
S35. DATA FOR DECISION MAKING FOR VL ELIMINATION
S36. LEISHWANIASIS AND IMMUNUSUPPRESSION
S37. LEISHVE I: ANIMAL LEISHMANIOSIS: IS A CHANGE OF MIND NEEDED?
S38. THE CUTANEOUS LEISHMANIASIS IN THE MAGHREB REGION

	S39. DRUG RESISTANCE & QUIESCENCE: UNRAVELLING MECHANISMS AND EXPLOITATION FOR BETTER/NEW DRUGS	296
	S40. IMMUNOLOGICAL PERSPECTIVES OF LEISHMANIASIS: BEYOND THE TH1/TH2 PARADIGM	<u>9</u> 302
	S41. WHAT CAN SOCIAL SCIENCES CONTRIBUTE TO UNDERSTANDING AND ADDRESSING LEISHMANIASIS?: EXAMPLES FROM THE FIELD	307
	S42. MUCOCUTANEOUS LEISHMANIASIS	315
	S43. BRASILEISH. ANIMAL LEISHMANIOSIS: IS A CHANGE OF MIND NEEDED?	325
	S44 NEW HOPE FOR LEISHMANIASIS: HOW TO COMMUNICATE TO A BROADER NON-SCIENTIFIC AUDIENCE	334
4.	ORAL COMMUNICATION	336
	4.1 CANINE LEISHMANIASIS	337
	4.2 DIAGNOSIS - TREATMENT AND RESISTANCE - CLINIC	359
	4.3 DRUG DISCOVERY & DEVELOPMENT	118
	4.4 EPIDEMIOLGY/ECOEPIDEMIOLOGY/MOLECULAR EPIDEMIOLOGY/PREVENTION AND CONTROL	۱ 178
	4.5 IMMUNOLOGY - CELL BIOLOGY – PATHOGENESIS - VACCINES	547
	4.6 OMICS - MOLECULAR BIOLOGY – BIOCHEMISTRY - OTHERS	533
	4.7 SOCIAL INNOVATION - IMPLEMENTATION RESEARCH - OPERATIVE RESEARCH	701
	4.8 VECTORS & RESERVOIRS	727
5.	POSTER	753
	5.1 CANINE LEISHMANIASIS	754
	5.2. DIAGNOSIS-TREATMENT AND RESISTANCE-CLINIC	327
	5.3. DRUG DISCOVERY & DEVELOPMENT	962
	5.4. EPIDEMIOLOGY – ECOEPIDEMIOLOGY - MOLECULAR EPIDEMIOLOGY - PREVENTION AND CONTROL)35
	5.5. IMMUNOLOGY - CELL BIOLOGY – PATHOGENESIS - VACCINES	088



5.6 OMICS - MOLECULAR BIOLOGY – BIOCHEMISTRY - OTHERS 1207
5.7. SOCIAL INNOVATION - IMPLEMENTATION RESEARCH - OPERATIVE RESEARCH
5.8 VECTORS & RESERVOIRS
6. LIST OF CHAIR, CO-CHAIR & SPEAKERS1470
7. LIST OF PARTICIPANTS



1. WELCOME TO THE WORLDLEISH7

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Every four years, leishmaniacs from around the world gather in WorldLeish to discuss the latest advancements around these neglected tropical diseases and the seventh version was not an exception. In 2022, we had the participation of around 700 people, from 47 countries. Also, we had a great response from 536 students and professionals from around the world who sent us their abstracts to be part of the event as a poster or oral communications presentation and we are glad to say that we counted 195 oral presentations and 341 posters.

The experience and knowledge of the 210 speakers enriched the 44 Symposia, 8 Round Tables, 4 Special Meetings, 5 Plenary talks and 4 Successful stories that took place in those 6 days.

For Colombia and specifically the University of Antioquia, it was an honor to be the host of this Congress. And, for PECET, is a recognition for its almost 40 years of effort, research and hard work to treat leishmaniasis.

I would like to express my gratitude for your participation in this seventh version of the congress. Thanks to the knowledge and contributions, of all participants, it has been a complete success.

We know that it was not easy at all, however seeing all of you in Cartagena filled us with deep pride for the great challenge undertaken and the achievement reached.

May these events strengthen our "leishmaniac" spirit and recharge us to continue working in favor of this NTD.

Thank you very much.

With the expression of my admiration and respect.

Ivan Dario Vélez Chair WorldLeish7







2. GENERAL SCHEDULE



SATURDAY August 6th	PLENARY TALK #5	COFEE BREAK	SPECIAL MEETING #4		and a lot of	SUMANA		CLOSING LECTURE	CLOSING REMARKS						
Time		Time 8:30 - 9:30 9:30 - 10:00 10:00 - 11:30			11:30 - 12:90.			12:00 - 13:10	13:10 - 13:30						
FRIDAY 27 August 5th	REGISTRATION	F# XIVL ANVELL	SUCCESSFUL STORY #4		SATELITE SYMPOSIUMS (sessions 33 - 38)	SPECIAL MEETING #3	SATELLTE SYMPOSIUMS (sessions 39 - 44)		LUNCH	ROUND TABLE (5 · 8)	0RAL COMMUNICATIONS (sessions 29 - 35)	POSTER PRESENTATION Session 4	COFFE BREAK	ORAL COMMUNICATIONS	(sessions 36 - 41)
THURSDAY August 4th	REGISTRATION	PLENARY TALK#3	SUCCESSFUL STORY #3	REAK	SATELLTE SYMPOSIUMS	ATELITE SYMPOSIUMS (sessions 23-27) ATELITE SYMPOSIUMS (sessions 28 - 44)		SPECIAL MEETING #2	POSTER PRESENTATION Session 3				LUNCH/ FREE AFTERNOON		
WEDNESDAY August 3rd	REGISTRATION	PLENARY TALK #2	SUCCESSFUL STORY #2	COFEE B	ATELITE SYMPOSIUMS : (sessions 12-16)		SATELITE SYMPOSIUMS	(77. / t elinieese)	LUNCH	ROUND TABLE (1 - 4)	ORAL COMMUNICATIONS (sessions 15 · 21)	POSTER PRESENTATION Session 2	REAK	0RAL COMMUNICATIONS (sessions 22 - 28)	
TUESDAY August 2nd	REGISTRATION	PLENARY TALK #1	SUCCESSFUL STORY #1		SMUISOURS SAMPOSIUMS	(c . f supress)	SATELITE SYMPOSIUMS	SATELITE SYMPOSIUMS (sessions 6 -11)		SPECIAL MEETING #1	ORAL COMMUNICATIONS (sessions 1 - 7)	POSTER PRESENTATION Session 1	COFEE	ORAL COMMUNICATIONS (sessions 8 - 14)	
Time	7:00 - 8:00	00:6 - 00:8	05:0 - 9:30	$9.30 \cdot 10.00$	10:00 - 11:30		11:30 - 13:00		13:00 - 14:00	14:00 - 15:30	15:30 - 16:30	16:30 - 17:30	17:30 - 18:00	18:00 - 19:00	
	MDAY st1st									REGISTRATION OPENING SESSION INAUGURAL LECTURE				WELCOME RECEPTION	
MG							(4:00 - 19:00 7:30 - 18:00 8:00 - 19:00				19:00 - 20:30				







5. POSTER

P4-011: BACTERIAL CELLULOSE BIOCURATIVES FOR THE TOPICAL TREATMENT OF CUTANEOUS LEISHMANIASIS

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In Brazil, cutaneous leishmaniasis (CL) is mainly caused by Leishmania braziliensis. Pentavalent antimonials (Sb^v) remain the first-line drug on treatment for CL despite the limitations regarding toxicity and increasing reports of therapeutic failure. Therefore, the search for alternative options for treatment that are safe, efficient and of easy application remains necessary. We have show that DETC, a SOD1 inhibitior, in association with a bacterial cellulose (BC) biocurative, reduced parasite burden and inhibited lesion development in a pre clinical model of CL caused by L. braziliensis. We thus hypothesized that BC biocuratives in association with DETC (BC-DETC) could act in conjuction with pentavalent antimonials to reduce the burden of disease in CL patients. To this end, we performed physicochemical characterization of BC-DETC employing scanning electron microscopy (SEM) and x-ray diffraction (XRD). In addition, we performed an *in vitro* release assay by spectrophotometry and evaluated the stability of DETC onto BC by spectrophotometry and thermogravimetry. SEM images of BC-DETC showed DETC aggregates across the entire surface. The absence of crystallographic peaks, seen by XRD analysis, indicated that DETC was succesfully incorporated onto BC biocuratives. In vitro release experiments showed a accumulative mass release of 22% and 14%, at 5 minutes and 24 indicating possible degradation hours, respectively. of DETC. Thermogravimetry analysis complemented our findings that strongly indicating that DETC is not stable when incorporated onto BC. Despite our



results showing that DETC is short lived when incorportated onto BC, as suggested by degradation experiments, we performed an initial a pilot, proof-of-concept trial, to evaluate the efficacy of topical application of BC in CL patients. A total of 20 patients were randomized in two groups assigned to receive either parenteral Sb^v alone or parenteral Sb^v plus topically applied BC bio-curatives. CL patients treated with Sb^v + topical BC bio-curatives had a significantly higher cure rate at 60 days post initiation of treatment compared to CL patients treated with Sb^v alone (P=0.01). At day 90 post initiation of treatment, cure rate was similar in the two groups as was overall healing time. Adverse effects or local reactions to topical BC application were not observed. This pilot trial shows that the potential use of a combined therapy consisting of topical BC bio-curatives and parenteral Sb^v in favoring healing of CL lesions caused by *L. braziliensis*, at an early time point.

Keywords CHEMOTHERAPY; TOPICAL TREATMENT; BIODRESSING

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