

KALA-AZAR

(Extracted From National Vector Borne Disease Control Programme : Treatment Kala-Azar)

Introduction: Following drugs are available for treatment of kala -azar in India:

- (a) Sodium StiboGluconate SSG (indigenous manufacture, registered for use)
- (b) Pentamidine Isethionate: (imported, registered for use)
- (c) Amphotericin B: (indigenous manufacture, registered for use and sale)
- (d) Liposomal Amphotericin B: (indigenous manufacture & import, registered for use and sale)
- (e) Miltefosine (imported/ registered for use & sale)

Drug Policy under Kala-azar Elimination Programme

(i) First Line Drugs for treatment of Kala -Azar

A. Short Term

- (a) Areas with SSG sensitivity (>90%) : SSG IM/IV 20mg/kg/day x 30 days
- (b) Areas with SSG sensitivity (<90%) : Amphotericin B 1mg/kg b.w. IV infusion daily or alternate day for 15- 20 infusions. Dose can be increased in patients with incomplete response with 30 injections

B. Long Term

- (a) Areas with high level of SSG resistance (>20%): Miltefosine 100 mg daily x 4 weeks (after phase III studies completed with proven safety & efficacy)
- (b) Areas with SSG sensitivity (>80%): SSG IM/IV 20mg/kg/day x 30 days - Miltefosine 100 mg daily x 4 weeks (after phase III studies completed with proven safety & efficacy)

(ii) Second Line Drugs for treatment of Kala -Azar

A. SSG Failures : Amphotericin B 1mg/kg b.w. IV infusion daily or alternate day for 15-20 infusions. Dose can be increased in patients with incomplete response with 30 injections

B. SSG and Miltefosine Failures : Liposomal Amphotericin B (when final results are available with proven efficacy and safety)

Treatment of Post Kala - Azar Dermal Leishmaniasis : SSG in usual dosages for Kala- azar could be given up to 120 days. Repeated 3-4 courses of Amphotericin B can be given in patients failing SSG treatment.