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## ENVIRONMENTAL RISK FACTORS RELATED TO CUTANEOUS LEISHMANIASIS IN A DERMATOLOGY CLINIC AT BASE HOSPITAL THABUTHTHEGAMA: A DESCRIPTIVE STUDY

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## **Abstract**

Cutaneous Leishmaniasis (CL) is an endemic disease in Sri Lanka and it is considered to be a notifiable disease from year 2008. It is a vector-borne disease caused by a protozoan parasite and transmitted by an infected female phlebotomine sand fly. Anuradhapura has been one of the areas to show high incidences of Leishmaniasis in Sri Lanka. The purpose of this study was to identify the environmental risk factors related to CL. A quantitative descriptive study was conducted among patients who were diagnosed with CL and visited the dermatology clinic of the Base Hospital, Thabuththegama. Two hundred participants were recruited to the study by using a convenience sampling method. A self-administered questionnaire was used to collect data and Statistical Package for Social Sciences (SPSS) Version 21 was used to analyze the data. Most (41.5%, n=83) infected with Leishmaniasis were living in a residence less than 50m away from a forest and 43% (n=86) of participants had never used insect repellents (the substances applied to skin, clothing, or other surfaces which discourage insects from landing or climbing on the surfaces). Study findings revealed that not using insect repellents (p<0.05), residing near the forest (p<0.05) had a significant association with CL. People living close to paddy fields and forests, not using insect repellents, raring animals (dogs), having open drainage systems and keeping garbage exposed were found to be main environmental risk factors which highly influenced the prevalence and development of CL and contributed to the spread of the disease. Hence, an awareness programme aimed towards environmental risk factors related to CL, identifying reservoir hosts and vector control to be integrated within the community is highly recommended.

*Keywords*: Environmental risk factors, Cutaneous Leishmaniasis, Dermatology, Thabuththegama, Descriptive