Leishmaniasis occurs in 98 countries—most of them developing—in tropical and temperate regions **(Fig. 226-2)**. More than 1.5 million cases occur annually, of which 0.7–1.2 million are CL (and its variations) and 200,000–400,000 are VL. More than 350 million people are at risk, with an overall prevalence of 12 million. The distribution of *Leishmania* is limited by the distribution of sandfly vectors.

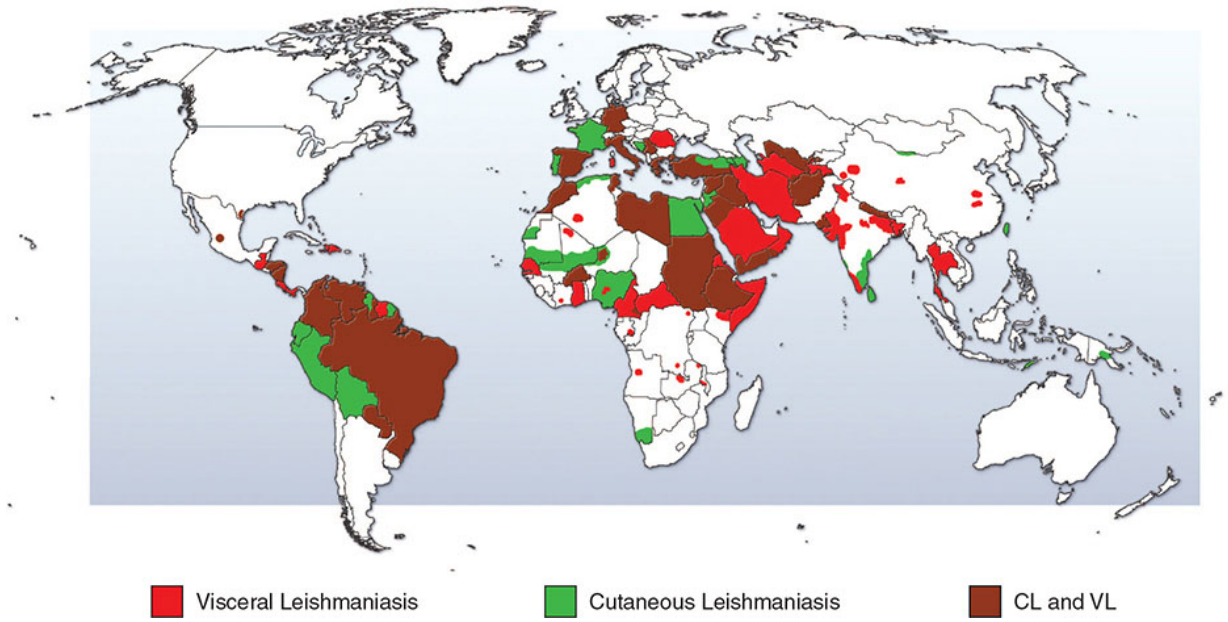

FIGURE 226-2 Worldwide distribution of human leishmaniasis. CL, cutaneous leishmaniasis; VL, visceral leishmaniasis.

VISCERAL LEISHMANIASIS

VL (also known as *kala-azar*, a Hindi term meaning “black fever”) is caused by the *Leishmania donovani* complex, which includes *L. donovani* and *Leishmania infantum* (the latter designated *Leishmania chagasi* in the New World); these species are responsible for anthroponotic and zoonotic transmission, respectively. India and neighboring Bangladesh, Sudan and neighboring South Sudan, Ethiopia, and Brazil are the four largest foci of VL and account for 90% of the world’s VL burden. Human leishmaniasis is on the increase worldwide except on the Indian subcontinent (India, Nepal, and Bangladesh), where a VL elimination program has been implemented, and VL incidence is markedly