

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

10 Jun 2026

### Comparative Assessment of Sodium Stibogluconate/Meglumine Intralesional Therapy Versus Combination of Thermal Therapy with Sodium Stibogluconate/Meglumine intralesional Therapy for skin lesions in Cutaneous Leishmaniasis in Pakistan

#### Protocol summary

##### Study aim

1. To compare efficacy and safety of sodium stibogluconate/meglumine intralesional therapy in combination with local-thermal therapy and alone 3. To identify reduction in number of intralesional therapy sessions when combined with thermal therapy.

##### Design

open label, parallel group, randomized control trial

##### Settings and conduct

Public Sector Clinic in endemic area. Patients, fulfilling the criteria will be randomly assigned to treatment or control group after consent process. stratified randomization technique will be used

##### Participants/Inclusion and exclusion criteria

Inclusion Criteria: 02 - 80 years of age, either gender, with diagnosis of cutaneous leishmaniasis ( CL ) by direct examination under microscopy, voluntarily agreeing to participate in the study and complying with study follow-up visits will be enrolled. Exclusion Criteria: • Other forms of Leishmaniasis • Patients already receiving treatment for CL • Known hypersensitivity to sodium stibogluconate/meglumine • Pregnancy/lactation • Comorbidities which affecting follow-up of study

##### Intervention groups

On first visit treatment group will have thermotherapy and control group will receive Meglumine. On subsequent weekly visits both groups will receive meglumine intralesional.

##### Main outcome variables

The primary outcome will be treatment response in randomly assigned participants assessed at 4th,8th & 12th week post-treatment. The appearance, induration and size of skin lesion will be measured (using regular scale/measuring tape) .Complete response means complete re-epithelialization with no signs of inflammation .Partial response means decrease in lesion

size not more than 50%, without appearance of epidermal crease while failure to response meant no re-epithelialization or a positive direct smear at the end of treatment, at 8th or 12th week of treatment. Safety outcome will be observed.

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20220529055013N2**

Registration date: **2024-02-02, 1402/11/13**

Registration timing: **registered\_while\_recruiting**

Last update: **2024-02-02, 1402/11/13**

Update count: **0**

##### Registration date

2024-02-02, 1402/11/13

##### Registrant information

##### Name

Fauzia Gilani

##### Name of organization / entity

National University of Science & Technology

##### Country

Pakistan

##### Phone

+92 51 2300714

##### Email address

fauziagilani@gmail.com

##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2024-02-01, 1402/11/12  
**Expected recruitment end date**  
2025-02-01, 1403/11/13  
**Actual recruitment start date**  
empty  
**Actual recruitment end date**  
empty  
**Trial completion date**  
empty

**Scientific title**  
Comparative Assessment of Sodium Stibogluconate/Meglumine Intralesional Therapy Versus Combination of Thermal Therapy with Sodium Stibogluconate/Meglumine intralesional Therapy for skin lesions in Cutaneous Leishmaniasis in Pakistan

**Public title**  
Comparative Assessment of Standard of Care Intralesional Therapy Versus Combination of Thermal Therapy with Standard of care intralesional Therapy for skin lesions in Cutaneous Leishmaniasis in Pakistan

**Purpose**  
Treatment

**Inclusion/Exclusion criteria**  
**Inclusion criteria:**  
Diagnosis of cutaneous leishmaniasis by direct examination under microscopy voluntarily agreeing to participate in the study and complying with study follow-up visits will be considered for enrollment.  
**Exclusion criteria:**  
• Other forms of Leishmaniasis i.e., mucocutaneous and/or visceral leishmaniasis (clinical exclusion) Patients already receiving treatment for Cutaneous Leishmaniasis • Known hypersensitivity to stibogluconate/meglumine antimoniate  
Pregnancy/lactation Comorbidities or other illness which may hinder the completion and follow-up of study

**Age**  
From **2 years** old to **80 years** old

**Gender**  
Both

**Phase**  
2-3

**Groups that have been masked**  
*No information*

**Sample size**  
Target sample size: **132**  
More than 1 sample in each individual  
Number of samples in each individual: **2**  
In case of failure of response (no re-epithelialization or a positive direct smear at the end of treatment), a second sample will be taken.

**Randomization (investigator's opinion)**  
Randomized

**Randomization description**  
Patients with Cutaneous Leishmaniasis presenting to clinical practice will be invited to participate in the study, after being diagnosed by microscopy. All the patients fulfilling the inclusion/exclusion criteria will be formally consented by data collector for participating in the study. Patients who will voluntarily agree to participate and

comply with study protocol will be randomized to either treatment or control group by data collector. Stratified block randomization method will be used in this study, with patients stratified for number/size of skin lesion (mild to moderate/ severe disease) and age. Only those participants/guardian/parents of participants who will voluntarily consent to participate in the study will be enrolled. In following circumstances, the subjects may be withdrawn from the study prior the expected completion:

- Failure of subject to adhere to the protocol requirements
- Subject consent withdrawal

Randomization sequences will be generated and secured in opaque envelopes and will be kept in lock & key in separate room which will be only opened at the time of consent taking and randomization.

**Blinding (investigator's opinion)**

Not blinded

**Blinding description**

**Placebo**

Not used

**Assignment**

Parallel

**Other design features**

**Secondary Ids**

empty

**Ethics committees**

1

**Ethics committee**

**Name of ethics committee**

National Bioethics Committee

**Street address**

Health Research Institute, Shahrah-e-Jamhuriat, Off Constitution Avenue, Sector G-5/2, Islamabad

**City**

Islamabad

**Postal code**

44000

**Approval date**

2021-12-24, 1400/10/03

**Ethics committee reference number**

Ref: No.4-87/NBC-562/21/962

**Health conditions studied**

1

**Description of health condition studied**

Cutaneous Leishmaniasis

**ICD-10 code**

B55.1

**ICD-10 code description**

Cutaneous leishmaniasis

**Primary outcomes**

## 1

### Description

1. Assessment of treatment efficacy in terms of treatment response among both study groups, assessed after 4-6 therapy sessions

### Timepoint

Week 0, week 4, Week 8, Week 12

### Method of measurement

Treatment Response labelled as: Complete response (complete re-epithelialization, disappearance of edema, induration, and other signs of inflammation), Partial response (decrease in lesion size not more than 50%, without appearance of epidermal crease)• Failure to response (no re-epithelialization).

## Secondary outcomes

## 1

### Description

safety adverse effects

### Timepoint

0week, 4 weeks, 8 weeks, 12 weeks

### Method of measurement

Assessment of treatment safety in terms of occurrence of known/unknown device and drug reactions/side effects at each follow-up visit. Safety assessment is defined as:• Local side effects o Redness, Itching, Burning, Blister formation, Oozing.

## Intervention groups

## 1

### Description

Treatment group: In this group, the skin lesion of patient along with 2 cm border of healthy skin around the lesion will be disinfected with antiseptic, followed by administration of local anesthesia with lignocaine. The skin lesion will then be exposed to thermal therapy((ThermoMed Model 1.8, Chemosurgery Inc. Phoenix-USA), to heat the affected area of the skin. The target temperature of 50°C will be maintained for 30 seconds until whole lesion is covered. The area between the electrodes covers 49-73 mm<sup>2</sup>, therefore, several thermotherapy applications will be given to cover the whole lesion. From second visit onwards, the patients belonging to intervention group will be administered intralesional Meqglumine (1.5gm/5ml equivalent to 81mg of antimony per 01 ml) 1-5ml mixed with 1:1 1% lidocaine, depending on lesion size but not exceeding 5 ml of total in one session.

### Category

Treatment - Devices

## 2

### Description

Control group: Meqglumine intralesional injection will be given as first treatment session, followed by weekly sessions. Treatment sessions will be repeated on a

weekly basis in the same manner for both the groups, where 4-6 sessions will be provided depending on the treatment response. Treatment responses will be assessed in both groups weekly until the treatment ends (maximum of 5 sessions) and follow-up visits at 8th week and 12th week post-treatment will be completed. Acute adverse reactions, adverse events and post-treatment adverse events will also recorded for both the groups.

### Category

N/A

## Recruitment centers

## 1

### Recruitment center

#### Name of recruitment center

Public Sector Clinic in endemic area Shakardara

#### Full name of responsible person

Nafisa Tahir

#### Street address

Naseer Uddin Clinic Shakardara

#### City

Shakardara KPK

#### Postal code

26380

#### Phone

+92 334 8331440

#### Email

dr.nafisa.tahir@gmail.com

## Sponsors / Funding sources

## 1

### Sponsor

#### Name of organization / entity

TDR/EMRO /WHO

#### Full name of responsible person

Nafisa Tahir

#### Street address

Jalan Teknokrat

#### City

Cyberjaya

#### Postal code

63000

#### Phone

+60 12-305 7700

#### Email

gsc-procurement@who.int

#### Grant name

SGS-20-21

#### Grant code / Reference number

2021-1088476-0

#### Is the source of funding the same sponsor organization/entity?

Yes

#### Title of funding source

TDR/EMRO /WHO

#### Proportion provided by this source

100

#### Public or private sector

Public  
**Domestic or foreign origin**  
Foreign  
**Category of foreign source of funding**  
UN agencies and international organizations  
**Country of origin**  
**Type of organization providing the funding**  
Other

## Person responsible for general inquiries

### Contact

**Name of organization / entity**  
National University of Medical Sciences  
**Full name of responsible person**  
Nafisa Tahir  
**Position**  
Professor  
**Latest degree**  
Specialist  
**Other areas of specialty/work**  
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Abid Majeed Road Rawalpindi  
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## Person responsible for scientific inquiries

### Contact

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Saleem Ahmed Khan  
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Professor  
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## Person responsible for updating data

### Contact

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fauziagilani@gmail.com

## Sharing plan

### Deidentified Individual Participant Data Set (IPD)

Yes - There is a plan to make this available

### Study Protocol

Yes - There is a plan to make this available

### Statistical Analysis Plan

Yes - There is a plan to make this available

### Informed Consent Form

Yes - There is a plan to make this available

### Clinical Study Report

No - There is not a plan to make this available

### Analytic Code

No - There is not a plan to make this available

### Data Dictionary

No - There is not a plan to make this available

### Title and more details about the data/document

Results from the study in the form of tables and graphs of primary and secondary will be shared

### When the data will become available and for how long

The data will be kept for 2 years. The results and findings of the study will be available in the form of publication. The data details can be shared with the journal on demand.

### To whom data/document is available

Principal Investigator and co-investigator

### Under which criteria data/document could be used

The data document can be shared with the publishing journal on demand

### From where data/document is obtainable

Can contact the principal investigator.

### What processes are involved for a request to access data/document

Principal investigator can be accessed through email. dr.nafisa.tahir@gmail.com

## Comments