

Re: Chagas Disease (American Trypanosomiasis)

Alejandro Marcel Hasslocher-Moreno¹, André Luiz Land Curi¹,
Maria Clara Gutierrez Galhardo¹

¹ Evandro Chagas National Institute of Infectious Diseases, Oswaldo Cruz Foundation, Rio de Janeiro, Brazil

Citation: Hasslocher-Moreno AM, Land Curi AL, Gutierrez Galhardo MC. Re: Chagas Disease (American Trypanosomiasis). *Dermatol Pract Concept*. 2025;15(1):4770. DOI: <https://doi.org/10.5826/dpc.1501a4770>

Accepted: September 5, 2024; **Published:** January 2025

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Funding: None.

Competing Interests: None.

Authorship: All authors have contributed significantly to this publication.

Corresponding Author: Dr. Alejandro Marcel Hasslocher-Moreno, Evandro Chagas National Institute of Infectious Diseases, Oswaldo Cruz Foundation, Rio de Janeiro, RJ, Brazil. E-mail: alejandro.hasslocher@gmail.com

Dear Editor,

We read with interest the recent article by Stefano Veraldi and Gianluca Nazzaro entitled “Chagas Disease (American Trypanosomiasis)” [1]. The authors present a case involving dermatological and ocular symptoms attributed to acute Chagas disease (CD). The diagnosis was based on positive serology for *Trypanosoma cruzi* (T. cruzi) using indirect immunofluorescence and ELISA tests. The patient was treated with benznidazole, leading to regression of the lesions.

We would like to offer some comments on this case. First, the dermatological lesions shown in the patient’s facial photograph do not seem consistent with acute chagoma from CD inoculation but, more likely, with acute bacterial infection by staphylococci or streptococci, which would better explain the patient’s systemic symptoms. A chagoma is a painless, hardened swelling at the inoculation site, typically appearing in a single location, that develops within weeks of T. cruzi entry through the skin breach caused by a triatomine

bite and that persists for several weeks [2]. As for the involvement of the eyelid, this also does not seem compatible with the ophthalmological signs described by Romaña [3]. Second, the diagnosis of the acute phase of CD must be confirmed exclusively by identifying T. cruzi through a blood smear, as conventional serology for IgG antibodies is not sufficient for diagnosing acute CD unless seroconversion is demonstrated [4,5].

It is possible that the patient already had chronic CD before the clinical episode reported by the authors. Due to the lack of detailed information about the patient’s epidemiological history - such as whether the patient was born or lived in an area endemic for CD before moving to Italy, whether the patient had received a blood transfusion in recent years, or whether the patient’s mother is from an endemic area for CD - we cannot determine the likely mechanism of transmission. Therefore, we request that the authors provide this information and reconsider the diagnosis of acute CD.

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