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A Rare Case of Disseminated Cysticercosis

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ABSTRACT *This is the report of a case of disseminated cysticercosis,with simultaneous involvement of the brain,muscles and subcutaneous tissues.Such an extensive involvement of cysticercosis is extremely rare and has been reported less frequently.A 40years old male presented with recurrent seizures,headache and multiple subcutaneous nodules all over the body.Ultrasound examination of subcutaneous nodules showed cyst with scolex.ct brain showed small multiple ring enhancing lesions with eccentric calcifications and perilesional edema.MRI showed multiple cysts in different stages in the brain.A larval cyst was seen on microscopic examination of an excised nodule. Serological test for cysticercal antibodies was positive.*

Introduction:
Human cysticercosis is an important cause of epilepsy and neurological morbidity in many developing coutries. cysts occur especially in striated muscles,subcutaneous tissues,the nervous system and the eye.central nervous system involvement with T.solium cysts,neurocysticercosis ,is a pleomorphic disease whose clinical manifestations vary with the number,size,location and stage of cysticerci as well as the intensity of the host's immune response.common manifestations include epilepsy,focal neurological signs,intracranial hypertension,cognitive decline,cerebellar ataxia,symptoms of hydrocephalus and psychiatric disorders.

A set of diagnostic criteria based on neuroimaging studies,serological tests,clinical presentation and exposure history has been proposed by Del Brutto et al.(2)CT and MRI remain the effective means of diagnosis.

Simultaneous and extensive involvement of the brain,spinalcord,eyes,muscles and subcutaneous tissues is extremely rare and has not been much reported previously in review of literature. This the report of a case of disseminated cysticercosis from Kurnool,south India.

Case report:
A 40years male,resident of a village near Athmakur Kurnool district of Andhrapradesh,farmer by proffesion,presented with history of recurrent seizures for 3years,headache and swellings all over body for 2years.There was no history of recurrent fever,chronic cough,chronic diarrhea,weight loss,decreased appetite,joint pain and past history suggestive of diabetes and tuberculosis.on examination,he was afebrile,with normal blood pressure.he has multiple asymptomatic pea sized sub cutaneous nodules all over the body,especially over the trunk,neck and extremities.neurological examination was normal.Routine laboratory tests was normal. fundoscopy was normal.ultrasonography of swellings showed cysts with scolex in chestwall and rectus muscle. CT scan of brain plain and contrast showed multiple small ring like enhancing lesions with eccentric calcifications and perifocal edema both cerebral hemispheres.on MRI examination,multiple hyperintense lesions and some focal enhancing lesions with surrounding edema were seen in the brain.microscopic examination from the arm revealed a larval cyst.ELISA for cysticercal antibodies was positive.

The patient was treated with albendazole,steroids and oxcarbamazepine and was discharged after a week.At follow up after a month,there was marked reduction in the sizes and numbers of subcutaneous nodules and significant resolution of neuroradiological abnormalities with the patient remaining seizure free.

DISCUSSION:
This patient has fulfilled the diagnostic criteria for human cysticercosis. Presence of 2major criteria out of 4 and 1 minor criteria out of four is required for definitive diagnosis as proposed by DeBrutto et etal(2),where as this patient has 2major criteria,intracranial lesions highly suggestive of neurocysticercosis and serum elisa positive for cysticercosis antibodies,1 minor criteria of clinical manifestations consistent with neurocysticercosis,1 epidemiological criteria of resident in endemic area of cysticercosis.

Cerebral cysts usually number 7-10 per patient(3)but these and subcutaneous nodules were in numerable in our patient.a case of human cysticercosis with such extensive dissemination,virtually involving all possible sites like brain,extra ocular muscles,muscles and subcuateneous tissues simultaneously is indeed very rare,previously only one casereported(4).This case is thus most unusual.

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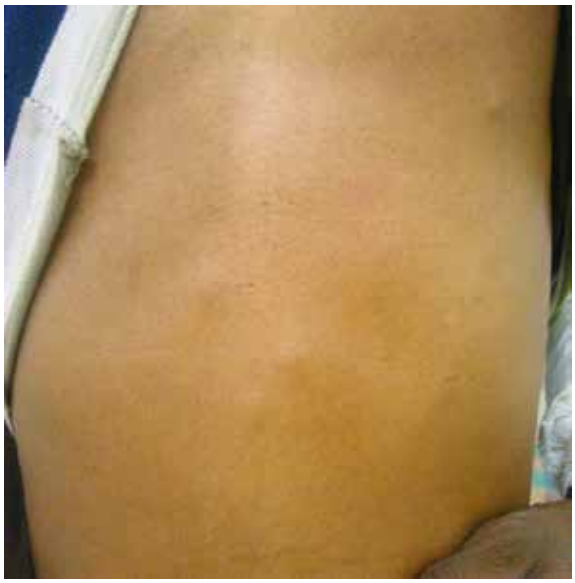

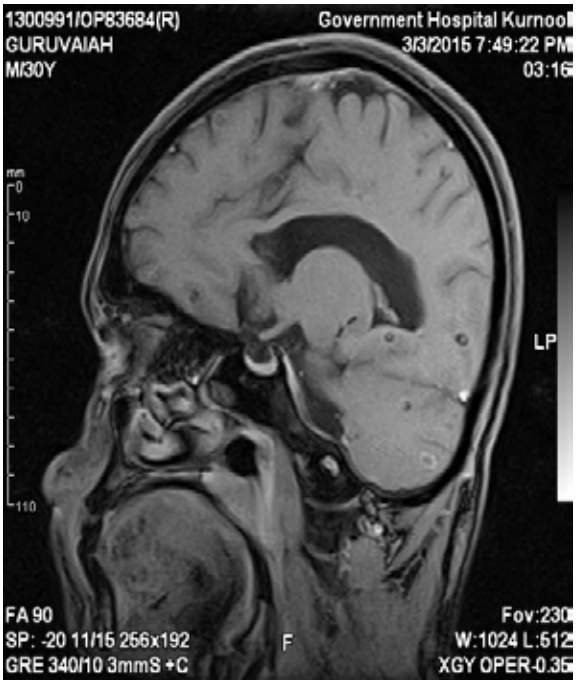

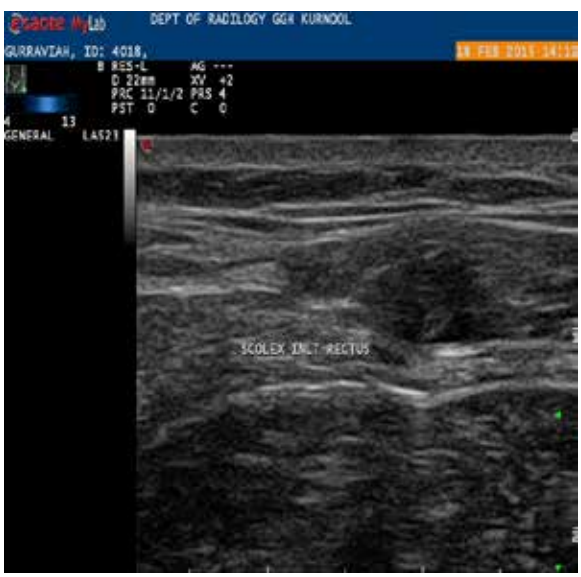

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