Second reported case of multilocularis hydatid disease in Iraq

A.K. Zeki Benyan*, N.K. Mahdi, F. Abdul-Amir, O. Ubaid
Department of Microbiology, College of Medicine University of Basrah Basrah, Iraq.
Department of Surgery Al-Sadar Teaching Hospital College of Medicine University of Basrah Basrah, Iraq.

*Corresponding author; Department of Microbiology, College of Medicine University of Basrah Basrah, Iraq.

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ABSTRACT

Hydatid disease is an important zoonotic disease with a world wide distribution. In Middle East as well as in some other parts of the world, it has always been a serious economic and public health problem. The disease is endemic and enzootic in Iraq. In Iraq, the disease is caused by Echinococcus granulosus but a multilocular hydatid cyst of E.multilocularis has been recovered from the liver of a woman in Erbil (North Iraq).

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1. Introduction

Hydatid disease is an important zoonotic disease with a world wide distribution. In Middle East as well as in some other parts of the world, it has always been a serious economic and public health problem. The disease is endemic and enzootic in Iraq (Mahmoud 1980; Benyan & Mahdi, 1987; Mahdi & Benyan, 1990). In Iraq, the disease is caused by Echinococcus granulosus but a multilocular hydatid cyst of E.multilocularis has been recovered from the liver of a woman in Erbil (North Iraq) (Al-Attar, 1981). However, this is the second case of hydatid disease caused by E.multilocularis but this time in Basrah, Southern of Iraq.

2. Case report

A 55 years old Iraqi woman, married with 4 children living in a rural areas (Al-Hartha) of Basrah, southern Iraq. She was in contact with sheep and dogs. Rodents are present in the area. She was admitted to the Al-Sadar Teaching Hospital complaining of epigastric and right hypochondrial pain and heaviness.
Chest X-ray and CT for chest and abdomen showed one cyst in the left lung and another one in the right subdiaphragmatic liver. Surgical operation was done and these two cysts were resected completely and sent for pathological and parasitological examinations. They consist of many small vesicles embedded in a dense connective tissue stroma. They proved to be a multilocular hydatid cysts (Figure 1).

**Fig. 1.** A cystic lesion ... Cm in diameter revealed by computed tomography of the left lung. It consists of many small vesicles situated in a dense connective tissue stroma.

3. Discussion

Echinococcus granulosus is rare but is the most virulent species. The life cycle involves two hosts, one definitive and the other intermediate. Humans act as an incidental intermediate host. The disease has been reported in Alaska, Canada, Russia, Siberia, China, Japan as well as Central Europe into Germany and in India (John & Petri, 2006). In Iraq the multilocular hydatid disease is reported in one case and the present one.

The clinical presentation of hydatid disease depends on the size and site of the cyst. Some patients are asymptomatic while others may develop dysfunction of involved organs. The hepatic hydatid cyst can induce a obstructive jaundice and abdominal pain. Pulmonary hydatid cyst produces chronic cough, dyspnea, pleuritic chest pain and hemoptysis. Anaphylactic inflammatory complications may result from free rupture of the hydatid cyst.

Pre-operative clinical diagnosis of hydatid cyst was made ultrasonically and confirmed by a CT scan. They are the best tests to differentiate hydatid cyst from amoebic or pyogenic cyst (Kir & Baran, 1995).

References

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