

# 6<sup>TH</sup> ANNUAL BACTERIOLOGY AND PARASITOLOGY MEETING

September 13-14, 2017 Singapore

## An Indian male case diagnosed neurocysticercosis in Japan

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Cysticercosis is an amphi xenosis that spreading in Asian, African and Latin American countries. Infected with *Taenia solium*, a tapeworm found in pigs. By swallowing microscopic eggs, a person has an intestinal pork tapeworm. A person eats undercooked, infected pork and gets a tapeworm infection in the intestines. The eggs hatch and become larvae that find their way to the brain. The larval cysts can infect various parts of the body causing cysticercosis. Larval cysts in the brain cause neurocysticercosis which can lead to seizures. A 35-year-old male who was admitted to division of neurosurgery in Japan, works in the company and comes and goes between India and Japan. On 15 March in 2016, he complained left frontal headache and blurry vision. Tumor in the occipital region of the brain was detected by brain CT and MRI examinations. Then craniotomy and resection of tumor were performed in neurosurgery. *Cysticercus cellulosae* was found inside the lesion. Several subcutaneous nodules were also detected, which were soft and removable on the surface of abdomen and bilateral chest. Parasite eggs or tape worm body were not found by an examining feces and enucleated subcutaneous nodules. Since 4th April, Albendazole (800mg / day, per os) was administered for 4 weeks. He recovered without any adverse effects. Considered brain abscess, tumor metastasis and parasitic infectious diseases, morphologically it was diagnosed as neurocysticercosis. Chemotherapy was effective. It is a leading cause of adult onset epilepsy worldwide. There are estimated 50 million patients and 50,000 death for neurocysticercosis worldwide each year. Taking a careful travel history is very useful to diagnose neurocysticercosis. In India he didn't take pork. However, he was infected to neurocysticercosis. We should consider about neurocysticercosis as one of possible diagnosis concerned about the patient who had a voyage to the endemic area.

### Biography

Kazuhiro Itoh has his expertise in both Hematology and Infectious diseases. One of his particular interests is the immunomodulatory effect of antifungal agents. Systemic inflammatory response syndrome (SIRS) and sepsis have been considered to be phenomenon of hypercytokinemia in critically ill patients and immunocompromised hosts including patients with hematologic malignancy. Shedding light on the mechanism of signal transduction pathway in immune cells is supposed to make a contribution to improve the prognosis. The other field of his interest is Japanese spotted fever (JSF), one of the spotted fever group rickettsiosis, caused by *Rickettsia japonica*. An exemplary therapy of JSF based on evidences has not yet been established. He analyzed the cases of JSF and evaluated to optimize the treatment.

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