

Diagnostic Complexity Challenging Human Neuro-Hydatidosis Versus Hepatic Cystic Location

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Cerebrospinal cystic echinococcosis is a rare disease, compared to the common hepatic location. In general, morbidity or/and mortality is predictable in this parasitic infection if not diagnosed and managed appropriately. Up till now, the disease is neglected in many endemic areas including Egypt, exposing the affected patients to serious complications. Aim: was to assess a commercially available ICT test in comparison to the conventionally used ELISA for specific antibody detection within 2 categories of hydatidosis cases within the 2 anatomical locations within the affected cases. Methodology & Results: This cross sectional study enrolled 62 hydatidosis cases which were proved positive, parasitologically or pathologically. Thus the applied serological tests in the current study, ELISA and ICT obtained low sensitivity to detect neurohydatidosis (35.7% for both technique), compared to the sensitivity recorded with hepatic hydatidosis, 91.6% for the former and 87.75% for the latter technique. Conclusion: Diagnosis of such life threatening infection should involve a combination of diagnostic strategies to confirm the clinical suspicion. Cerebral cystic hydatidosis should be considered in children and young adults present clinically with cystic brain lesions even in nonendemic areas. ICT test is a simple, rapid sero-diagnostic test of satisfactory sensitivity and specificity to confirm cystic echinococcosis, specifically in extra cranial locations

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