

CASE REPORT

HYDATID CYST PRESENTING AS OVARIAN CYST: A CASE REPORT

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ABSTRACT: Echinococcosis is a zoonotic disease which may present as potential health hazard to human. In developing country like India, it is a significant health problem. Surgery is the treatment of choice for hydatid cyst. Recurrence may be avoided by antihelminthic supplements post-surgery.

KEYWORDS: Echinococcosis, Hydatid cyst, Ovarian cyst.

INTRODUCTION: Hydatid cyst, caused by *Echinococcus granulosus* is a zoonotic disease. In human, it is potentially dangerous depending on size and organ location.⁽¹⁾

Liver and lungs are usually the common sites, primary peritoneal involvement is Rare.⁽²⁾

CASE REPORT: A 48 years old female patient was admitted with complaints of pain lower abdomen for the last 11 years. The pain was aggravated during the last 2 months following physical exertions. She had abdominal hysterectomy 11 years back for adenomyosis. Physical examination did not reveal much except for cystic mass palpated during p/v examination. Ultrasound showed findings suggestive of left ovarian cyst, multiloculated and normal sized right ovary.

Exploratory laparotomy revealed the cyst embedded in dense adhesions of gut and omentum. Gradual adhesiolysis revealed the cyst which ruptured exposing 8 milky colored cysts of various sizes. Saline irrigation was done and laparotomy concluded. Post-operative period was uneventful. Histopathology of the specimen read laminated membrane and detached scolices and brood capsules. No ovarian tissue was identified. Cytological smear prepared from the sediments (hydatid sands) of cystic fluid showed many scolices, brood capsules and detached hooklets. (Fig. 2) Eosinophil count preoperative was 3%. Post-operative AEC read 600/mm³. She was discharged with advice of albendazole 400mg daily for 28 days.

DISCUSSION: Echinococcosis is a significant health problem in India, considering the fact that it is a zoonotic disease and man is an accidental host. In the duodenum, the embryos hatch, enter the portal vein and are ultimately carried to liver. Some embryos enter pulmonary circulation where the lungs act as second filter. A few entering the general circulation account for its occurrence in unusual sites. Primary peritoneal echinococcosis is very rare.

Diagnosis preoperatively maybe done by clinical findings, imaging and laboratory Tests.⁽³⁾ Surgical removal carries the best prognosis and is the treatment of Choice.⁽⁴⁾ Recurrence post-surgery is 2-25%. So antihelmenthics may be given post-surgery.

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Fig. 1

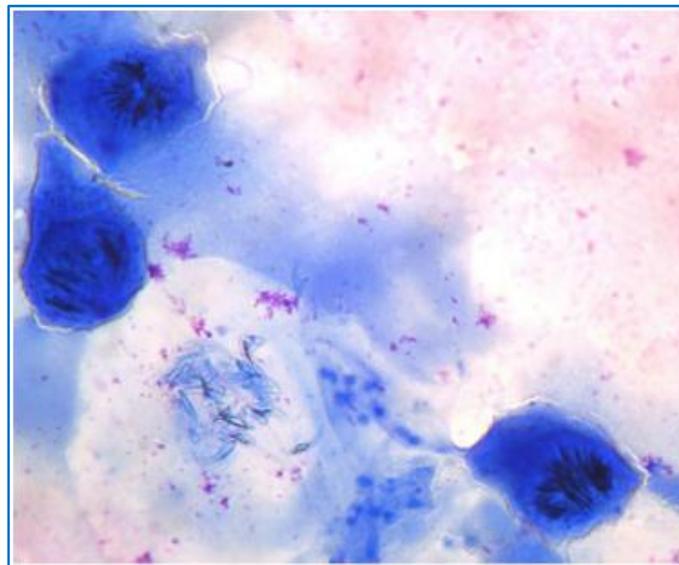


Fig. 2: Leishman x 40

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