

An Unusual Case of Cyst Hydatid

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Echinococcosis is frequently seen in Turkey.¹ Cysts are generally found in the liver and lung have been the subject of various studies. The case presented in this paper is unusual; the cyst was very widespread and of unusual presentation. In this report we emphasize the importance of the differential diagnosis between cysts and tumors.

Case Report

The patient was a 6 year old white female brought to the Pediatric Clinic of Hacettepe Faculty of Medicine on the 30 th July 1966. She had had loss of appetite, gradual loss of weight with accompanying weakness for the last 6 months. Scleral icterus had also been noted throughout this time.

Physical Examination

The general condition of the patient was fair with marked wasting of subcutaneous fatty tissues. She was pale and seemed weak. Only one lymph node was of palpable size 2-3 cm. located in the left axillary region, but she had generalized microlymphadenopathy. More subcutaneous swellings were palpable on the right 8th costa in the area of the left breast. The liver was palpable, hard and nodulated, 8 cm. below the costal margin and extending to the left hypochondrium. A mass with a smooth surface 5-6 cm. in diameter was felt in the left hypochondriac area.

Laboratory Findings

The hemoglobin was 9.4 gm/100 ml., WBC 7400/mm³ with predominant segmented cells. The bone marrow examination was normal except for eosinophilia. Urinalysis was normal. NPN of the blood was 30

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mg/100 ml; total serum proteins 9.5 gm/100 ml., albumin 3.3 gm/100 ml., globulin 6.2 gm/100 ml. SGOT was 16 U, thymol 6 U, CCF + + + +, calcium 9.4 mg/100 ml., Alk. phos. 4.8 B. U.

X-Ray Findings

There was a general metastastic appearance of the lungs (Figure 1). I. V. P. revealed an unidentifiable mass in the right kidney. X-rays of the bones were normal.

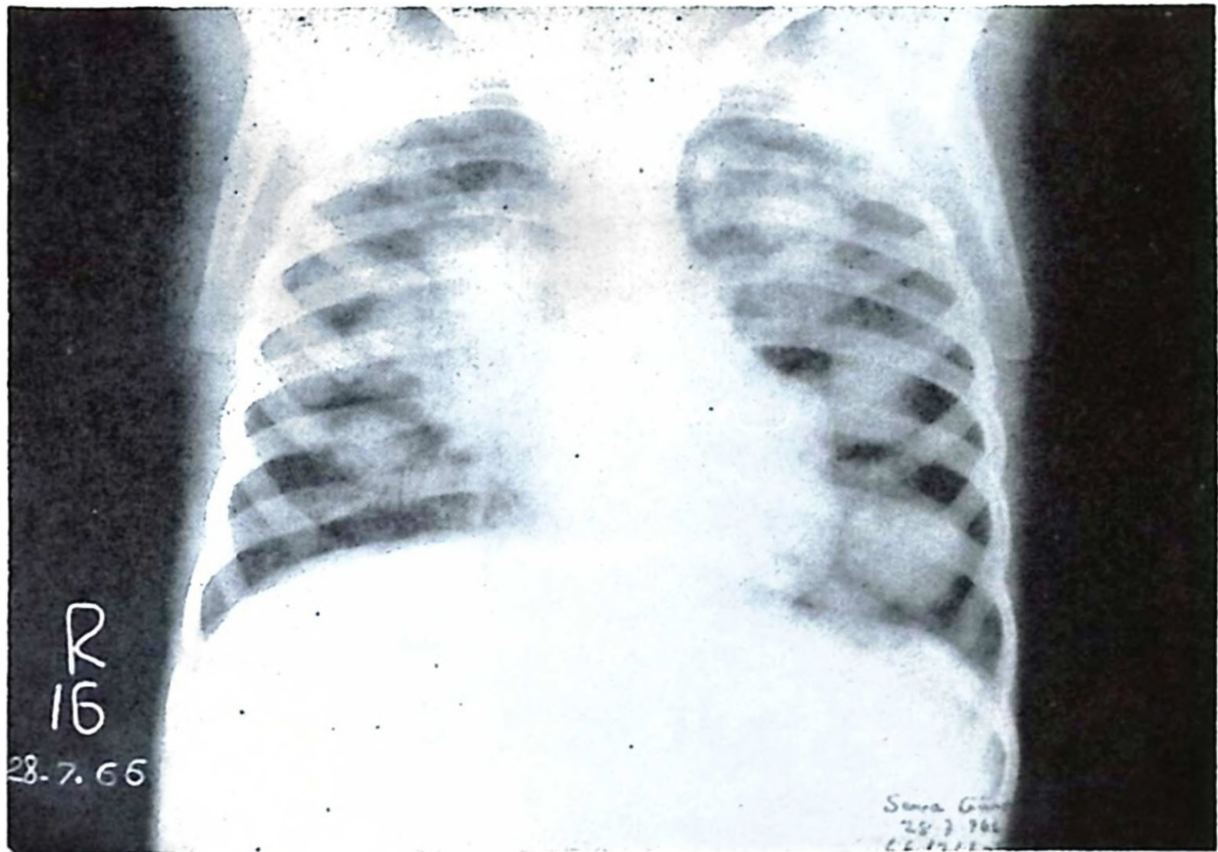


Figure 1

Other Examinations

A biopsy was taken from the subcutaneous nodule as well as the lymph node for diagnosis. Results of the histopathological examination revealed cyst hydatid.

Casoni and Weinberg test were positive.

Laparotomy was performed on August 19, 1966 and numerable cysts of various sizes were seen in the liver which were inoperable.

Recovery was normal and the patient was discharged. However it was reported three months later that the patient's condition was deteriorating.

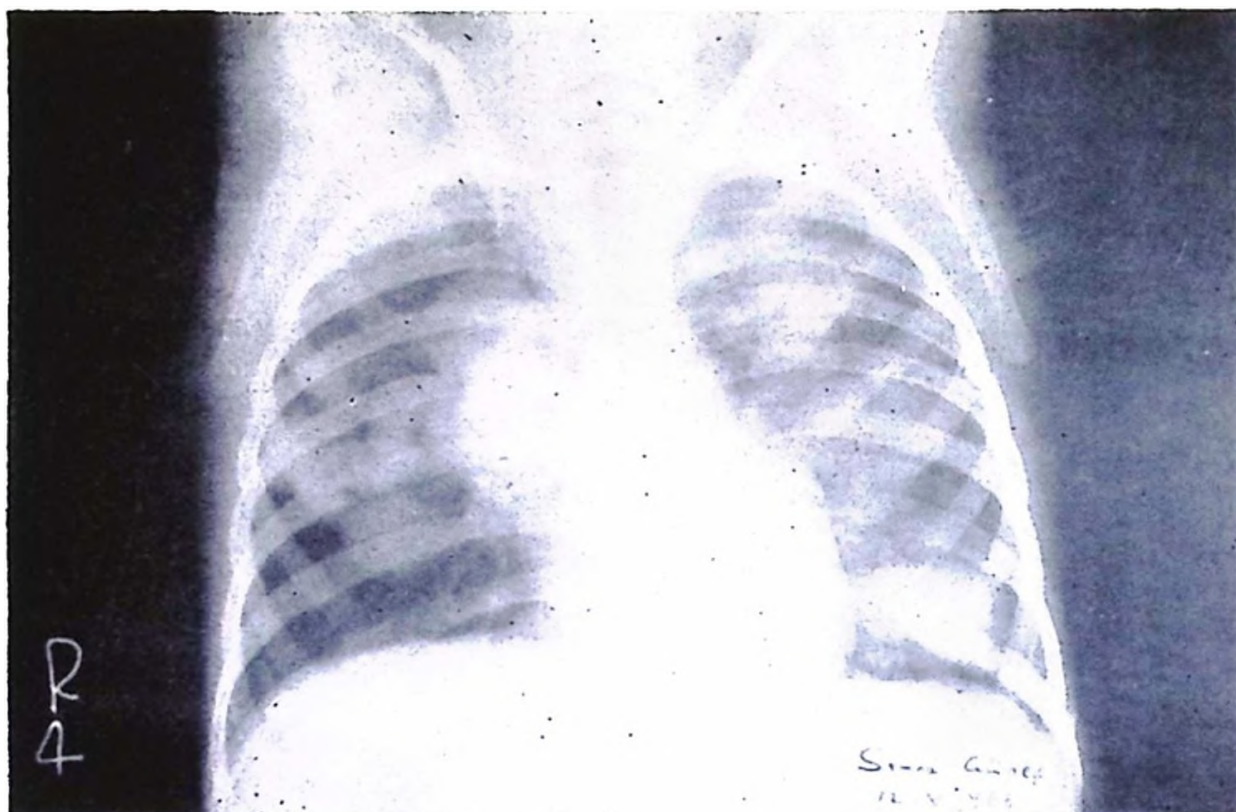


Figure 2

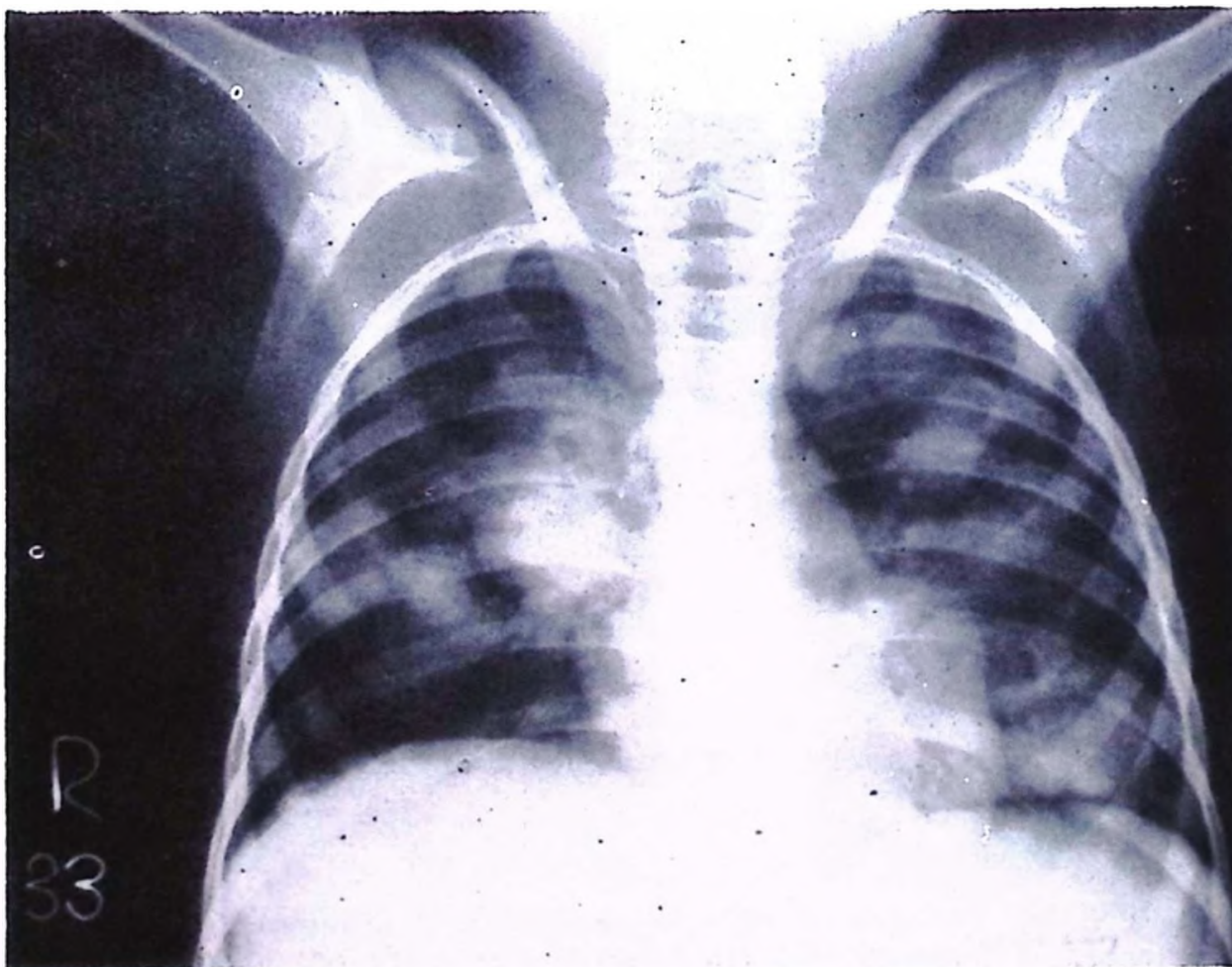


Figure 3

Discussion

Cyst hydatid in humans is frequently localized in the liver. Less frequently it is found in the lung, brain, peritoneal cavity, bone or eyes. It is rarely encountered in tissues.^{2 3 4} In this case widespread cyst hydatid was observed in the liver, lung, lymph node and subcutaneous tissues. Prior to the biopsy and the following laparotomy, due to the metastasid appearance of the lung, polymicrolymphadenopathy, the mass found in the abdomen and the x-ray findings, a malignant tumor with metastases was suspected. All these masses were identified as anatomical changes caused by generalized cyst hydatid in the follow-up histopathological studies.

As previously mentioned, the characteristics in this case were anorexia, weight loss, weakness, icterus and palpable widespread masses.

Summary

The interesting features of this case with cyst hydatid are the nodules found in the subcutaneous tissue and the widespread distribution of the cysts.

Acknowledgment

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