A human fasciolosis presenting with cholelithiasis and choledocholithiasis in Van, Turkey

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F asciolosis is an uncommon disease caused by Fasciola spp (especially F. hepatica) in humans. Recently, human fasciolosis has been frequently reported in Latin American countries, India, and some European countries. To our knowledge, although 214 cases of fasciolosis have been reported in Turkey from 1932 to 2003, only 46 symptomatic cases were admitted with acute abdominal symptoms and diagnosed during surgical intervention, except for the cases where coprologically was diagnosed in Van province, Eastern Turkey, between 1998 and 2003.

We report a case of fasciolosis who was presented to the Research Hospital of Yuzuncu Yıl University, Van, Turkey, with right upper abdominal pain, anorexia, nausea, occasional vomiting, general jaundice and indigestion after meals (especially fatty meals). The patient is 36 years old, and she lives in Van, Turkey. Her complaints persisted for seven months and increased in the last month. Abdominal ultrasonographic findings were compatible with cholelithiasis and choledocholithiasis (Figure 1). Eggs of F. hepatica were found in the stool sample of the patient in the parasitology laboratory of the hospital. After a preparation period, the operation was performed. At exploration, choledochus was expanded approximately 1.5cm in wide. Choledochotomy was performed and a living parasite was extracted

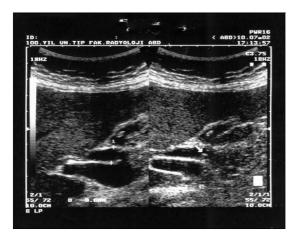


Figure 1 - Abdominal ultrasonography showing the image stone in choledochus.

within, and cholecystectomy was also performed. Subsequently, 1ml bile sample was also taken from the choledochus for the parasitological examination. Parasitological examination confirmed that this parasitic agent was *F. hepatica* (2.2x1.2cm in size). Eggs of the *F. hepatica* were also found in the bile sample.

The reported cases of fasciolosis increased with the use of serological methods in Turkey after 1999. Although 15 positive cases have been reported serologically by Kaplan et al.6 in Elazig province, Eastern Turkey, only one symptomatic case of fasciolosis has been reported by the same authors from the same region.5 The prevalence of the disease was serologically found to be 3.01% in Antalya province, and between 0.9-6.1% in Isparta province, Mediterranean region of Turkey.² Although there were only 46 symptomatic cases of fasciolosis, most of them were admitted with acute abdominal symptoms and diagnosed during surgery (reported between 1932 and 1999) and the parasites have been settled down in choledochus.² remaining 168 cases of fasciolosis reported after 1999 were serologically diagnosed,^{2-4,6} except for the cases detected in Van, Turkey between 1998 and 1999.⁷ The symptoms detected in the previous cases were also present in this case, and the location of parasite was in choledochus similar to previous cases. Although we diagnosed 16 cases of child fasciolosis by coprologic examination in Van, Turkey⁷ there were no patients requiring surgery were successfully treated with triclabendazole (Fasinex® 11mg/kg). The patient also lives in Van, Turkey, but she differs from other patients in the previous studies detected with the disease and which required surgery at maturity (36 years old). The reported cases of fasciolosis have increased to 17 in Van, Turkey and to our knowledge to 231 in mainland Turkey. The major reason of occurrence of the fasciolosis in great numbers in Van, Turkey is the consumption of the raw watercress by the people of the region. Most of the people in Turkey, are not seen by a physician unless they seriously suffer from complaints. We think that most cases of fasciolosis admitted to peripheral hospitals may be to the lack overlooked due of serological examination and equipment. If serological investigations were performed in some districts of Turkey as well as in Van, Turkey and some regions of the world, we believe that many fasciolosis cases would be detected. In functional disorders of liver, bill ducts and gall bladder, fasciolosis should be

Clinical Notes

considered in some regions of the world where fasciolosis is frequently detected as well as in Van province, Turkey.

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