

It's Not Always Water Under the Bridge – A Chronic Case of *Schistosomiasis Mansoni*

F. Murphy¹, G. Kelly¹, G. Moloney¹

1- Department Of Infectious Diseases Galway University Hospital

Background

Schistosomiasis is a parasitic infectious disease caused by schistosomes. Its geographical distribution is widespread, with endemic in Africa, South America and Asia.

In Africa, colonic disease is generally associated with *Schistosomiasis Mansoni* infection. Patients are infected after direct contact with water contaminated with snails carrying the parasite.

Predominant symptoms include diarrhoea, abdominal discomfort, fatigue, and weight loss.

Case Presentation

Mrs X is a 65 year old retired primary school principal. She described a 20-year history of abdominal discomfort.

Her initial workup in 2004 included physical exam, bloods, oesophago- gastro-duodenoscopy, colonoscopy and coeliac serology. Her coeliac serology has never been positive.

Initial duodenal biopsy showed normal villous architecture with focal increase in intraepithelial lymphocytes. She was given a presumptive diagnosis of Coeliac Disease and was advised to commence on a gluten free diet.

Mrs X travel history was significant for two years working in Zambia from 1981-1983. Of note her travel brought her to Lake Malawi where she undertook in recreational water activities.

Case Presentation

A repeat colonoscopy was performed histology showed well established granulomas in association with refractile non polarisable foreign material. (Image 1)

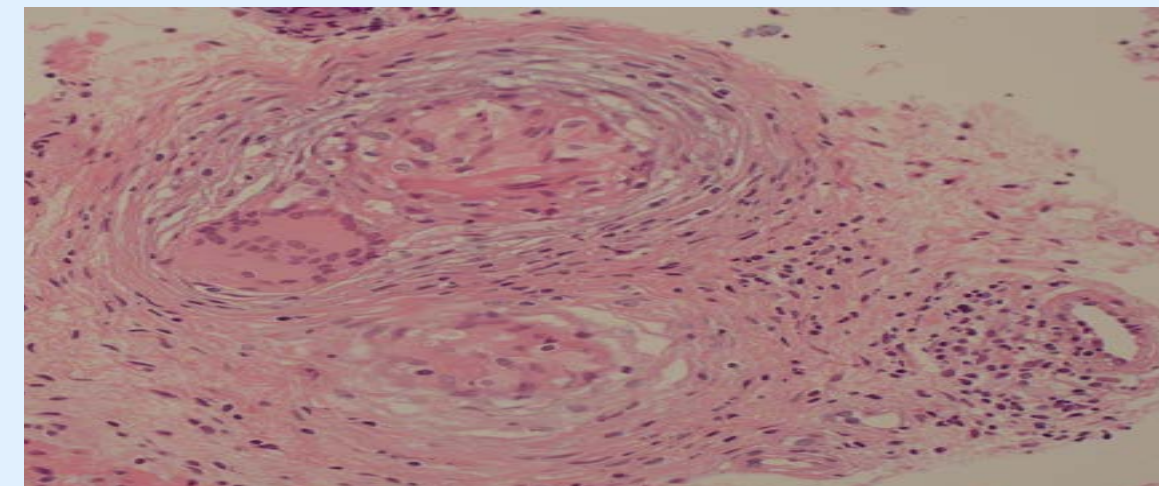


Image 1

Her histology showed a distinctive Mansoni spike. (Image 2) Her stool and urine sample were negative for ova. Her serology was positive; level 5 optical density (scale 1-9).

The patients travel history and serology were compatible for *Schistosomiasis Mansoni*. Mrs. X received one stat dose of 40mg/kg of Praziquantal. Her symptoms have improved.

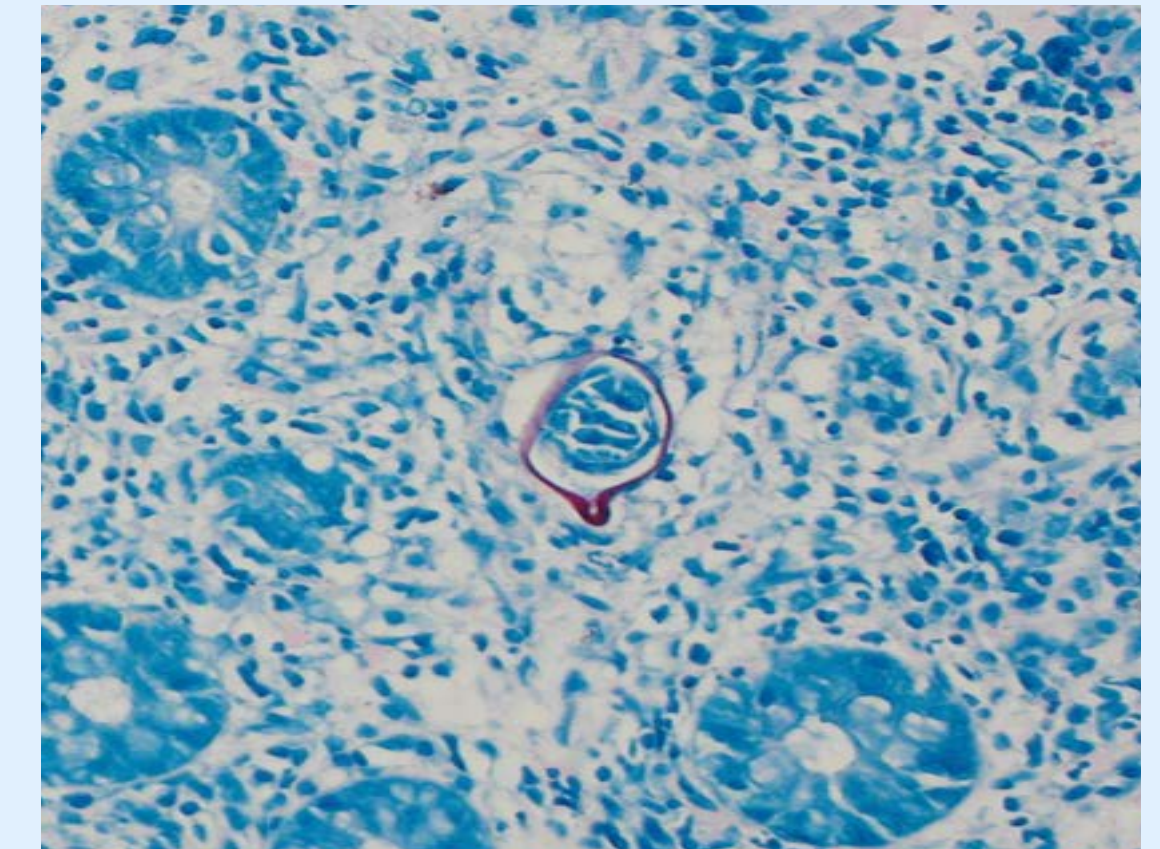


Image 2

Discussion

This case highlighted the importance of epidemiology in creating a differential diagnosis. Colonic schistosomiasis is a rare disease that should be considered a differential diagnosis in those that have travelled to endemic regions. Endoscopic appearances can be non-specific as initially high-lighted but can progress to distinctive granulomas containing Schistomas. Histopathological and serological examinations have a significant role in diagnosis, in addition to travel history.