

Oral Expulsion of *Taenia saginata* by a Sudanese Woman in Nyala, Western Sudan.

Adam, A.A.

Abstract:

A 43-year old woman vomited part of *Taenia saginata* (93 cm long) about two hours after she had a large meal at the end of a fasting day in Ramadan month. She expelled the rest of the worm per rectum the next day, after she took praziquantel tablet.



T*aenia saginata* is endemic in Africa especially in the Sudan (1). It infests man by eating infected raw or undercooked beef (1, 2). The scolex (head) is liberated from the cysticercus by the digestive enzymes and attaches itself to the wall of the small intestine via four suckers (2). The proglottides (segments) grow from the neck region proximally (1, 2). The worm reaches adulthood in 2 to 3 months, attaining a length of 4 to 10 metres. Then it passes its proglottides (segments) per rectum which are infective to cattle (1, 2).

Case report:

A 43 years old woman came to my clinic in Nyala (Southern Darfur) complaining of epigastric pain and nausea for the last two hours. Her complaints started one hour after she had a large meal at the end of a fasting day in Ramadan month (Muslims do not eat or drink from dawn to dusk in this Arabic month, for 12 to 13 hours in the Sudan). On physical examination, there was only mild epigastric tenderness. Soon she vomited part of a tapeworm, which was 93 cm long. The patient was relieved from the epigastric pain after vomiting, but still she had nausea. She was injected 10 mg metoclopramide intravenously as treatment for nausea and to enhance gastric emptying. Praziquantel 600 mg (one tablet) was prescribed for her as treatment for the non - expelled part of the worm. Six days later she came for follow up with no

complaint. She said that, she had passed a similar worm, per rectum one day after vomiting the first part and taking the praziquantel tablet. She did not bring the worm expelled per rectum for examination. The scolex of the worm was not found. Examination of one of its mature proglottides by hand lens and a microscope, revealed 21 lateral branches. This confirmed the diagnosis of *Taenia saginata*.

Discussion:

Oral expulsion of *Taenia saginata* is rare (3). Gupta et al in India reported a case of a 25 years old woman who vomited a 2 metres long *Taenia saginata*(4). The complaints of this patient started following a large meal after fasting for about 12 to 13 hours. During the long fasting time the worm might have lacked the food and wondered about searching for it. Reversed intestinal peristaltic waves might also occur. One or more of these peristaltic waves might have pushed the worm proximally towards the stomach then orally expelled. The possibility of the residence of the worm in the stomach is remote but can not be totally excluded. The actual mechanisms that lead to the oral expulsion of *Taenia saginata* need to be known and explained. Many of such cases were heard of in the area but not scientifically reported. In conclusion, to the best of my knowledge, this is the first case of oral expulsion of *Taenia saginata* to be reported in the Sudan.

References:

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About the authour

Adam Ahmed Adam MBBS, MCPath, a former pathologist in Nyala Teaching Hospital and currently Dean, Faculty of Laboratory Sciences, Sudan International University, Khartoum, Sudan.