Cysticercosis in the Neck Region, Mimicked Thyroglossal Cyst: A Rare Presentation

Radheshyam Mahato¹, Anupam Saha²

INTRODUCTION

Human cysticercosis is one of the commonest parasitic infection, caused by Cysticercus cellulosae, the larval form of pork tapeworm, Taenia solium. It is a major public health problem in developing countries where ingestion of tapeworm eggs through contaminated food and water and open air defaecation is most frequent.¹ The common sites of occurrence of cysticercosis are the subcutaneous tissue, skeletal muscle, brain, eye, heart, liver, lungs and peritoneum.²,³,⁵,⁶

The neck region is the uncommon site for cysticercosis.³ Here we reported a case of subcutaneous cysticercosis in the neck region which mimicked thyroglossal cyst on clinical examination as well as on ultrasonographic evaluation. The diagnosis of cysticercosis was made only by histopathological examination of surgically removed cystic tissue.

CASE REPORT

A 30 years old female patient presented at Midnapore Medical college, Paschim Medinipur, W.B, India with small swelling in front of left side of the neck region (Figure-1) which she noticed 6 months back. The swelling was slow growing and non-tender. On clinical examination, the swelling was tense cystic which was moving on protrusion of the tongue but not moving on deglutition. On clinical examination, the diagnosis of thyroglossal cyst was considered. Ultrasonography of neck region was done. Smears prepared from aspirated fluid on FNAC aspiration cytology (FNAC) of swelling in front of neck showed plenty of macrophages and scattered lymphocytes in the mucinous background. The FNAC diagnosis was consistent with benign mucous cyst. However diagnosis of cysticercosis was confirmed by histopathological examination of surgically removed cystic tissue.

Conclusion: A diagnosis of cysticercosis at this unusual site is very rare and depends mainly on histopathological examination. Although it is rare, cysticercosis should be considered as a differential diagnosis for a cystic lesion in the neck region.

Keywords: Cysticercosis, Neck Region, Thyroglossal Cyst

DISCUSSION

Cysticercus cellulosae, the larval stage of Taenia solium, passes its life cycle in two hosts. Human is definite host who harbours the adult worm and the pig is the intermediate host who harbours the larval stage. Human infection occurs due to ingestion of eggs from tapeworm host via transmission through faecal – oral route. Then the human acts as an accidental intermediate host with the manifestation of cysticercosis in different organs of the body.³,⁷

Human cysticercosis, a potentially deadly infestation due to ingestion of the eggs of Taenia Solium, present in contaminated food or water or unwashed hand or through autoinoculation resulting from reverse prerstitials.³ The cysticercosis in the neck region is notable because it mimicked thyroglossal cyst on clinical examination as well as on ultrasonography. FNAC diagnosis was also not conclusive.

The cysticercosis in the neck region is notable because it mimicked thyroglossal cyst on clinical examination as well as on ultrasonography. FNAC diagnosis was also not conclusive. Only the histopathological examination revealed the presence of cysticercus in the neck region. However, careful search showed no cyst in brain, abdominal organs and lungs through CT Scan of brain, USG of whole abdomen and chest X-Ray respectively.

The patient was put on tablet Albendazole 400mg twice daily for 2 weeks. The patient is doing well.

1Assistant Professor, Department of ENT, Midnapore Medical College, Paschim Medinipur, W.B. ²Professor, Department of Pathology, MGM Medical College and LSK Hospital, Kishanganj, Bihar, India

Corresponding author: Prof. (Dr.) Anupam Saha, Department of Pathology, MGM Medical College and LSK Hospital, Kishanganj-855107, Bihar, India

How to cite this article: Radheshyam Mahato, Anupam Saha. Cysticercosis in the neck region, mimicked thyroglossal cyst: a rare presentation. International Journal of Contemporary Medical Research 2017;4(1):277-278.
Cysticercosis in the Neck Region, Mimicked Thyroglossal Cyst

As a whole, it is common in Asia and Africa in relation to other subcutaneous sites of the body. Histopathological examination or FNAC helps to confirm the diagnosis of cysticercosis.

**CONCLUSION**

The importance of this case report lies not only in its extremely uncommon site of presentation but also emphasize the value of histopathological examination to confirm the diagnosis of cysticercosis. On the other hand, the diagnosis of cysticercosis should be considered as a differential diagnosis for a cystic lesion in the neck region, especially in the areas where it is prevalent.

**REFERENCES**


**Source of Support:** Nil; **Conflict of Interest:** None

**Submitted:** 05-01-2017; **Published online:** 17-02-2017