

leaves the body after eight to 10 days to pupate), it is our conjecture that a number of cases may go unreported.

It is imperative that effective preventive measures be taken up on a war footing, in an effort to contain what might be the beginning of an epidemic of cutaneous myiasis in Saudi Arabia.

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Myiasis in Saudi Arabia

To the Editor: The report of two cases of myiasis by Khan et al. [*Ann Saudi Med* 1993;13:464-6] was interesting. However, despite their statement that "since 1982, only six cases of human myiasis have been documented in the Kingdom of Saudi Arabia", it is our impression that human myiasis is not as uncommon a disease as the authors would have us believe.

Cutaneous myiasis is rife in the Asir Province of Saudi Arabia.¹ Since the recognition of the first case² at the General Hospital, Zahran Al-Janoub in 1990, we have noted an increasing trend in the number of cases of cutaneous myiasis caused by the Tumbu fly larvae (*Cordylobia anthropophaga*) over the past few years (Table 1). Since the disease is self-limiting (the larval form

TABLE 1. Incidence of cutaneous myiasis at the General Hospital, Zahran Al Janoub.

Year	No. of Cases
1990	1
1991	2
1992	6
1993	22