

A CASE OF INTESTINAL INFESTATION WITH *HYMENOLEPIS DIMINUTA* IN MAN

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INTESTINAL infestation with *Hymenolepis diminuta* is not common. In man not more than twenty cases have been reported in India. Its true definitive host is rat, and infestation amongst them is common in this place. In view of the rarity of this condition, the following case is being reported.

Case report

S. D., a young girl, was having pain in the right iliac fossa, with short periods of evening rise of temperature, off and on for the last four years. No history of diarrhoea or dysentery was given nor was there any loss of weight. She was having flatulence of upper abdomen.

Dr. Mrs. P. Raj, W. M. S., Daga Hospital, advised her to get her faeces examined. Examination revealed ova of *Hymenolepis diminuta* (figures 1 and 2, plate XL).

Egg is distinctly yellow in colour.

Outer shell of embryophore is thickened and slightly mammilated.

Hooklets in hexacanth oncosphere are arranged in fan-shape manner.

(Four repeated examinations showed the eggs in each specimen.)

Hymenolepis nana infection in man is relatively common; from the ova of this tapeworm, those of *H. diminuta* are distinguished by the distinct yellow colour, thicker embryophore and fan-shape arrangement of hooklets. The former does not require an intermediate host, whilst in the case of the latter, an arthropod, e.g. rat flea, acts as an intermediate host, in which cysticercus stage develops. Man gets infected by accidental ingestion of infected rat flea infesting prepared cereal foods.

[The eggs of *Hymenolepis diminuta* are bigger than those of *H. nana* and have no filaments in the space between the outer and inner envelopes of the egg.

The infection is due to accidental ingestion of either the infected ectoparasites of the murine host or the infected insects, e.g. meal moths or meal worms living in cereals used for cold cereal breakfast foods—N. V. B.]

AN UNUSUAL CASE OF LYMPHOCELE OF THE SCROTUM

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RECURRENT filarial attacks produce various changes in the scrotum and conditions such as hydrocele, chylocele and lymph scrotum are well known. In the scrotal sac besides the

various types of fluids, inflammatory cells, red blood cells and filaria sometimes in a dead and calcified condition have been demonstrated. In the present case, in the contents of the scrotal sac the finding was rather rare. So it has been thought worth while to report this case.

B. W., aged 30, male, was admitted into the hospital for the cure of the bilateral hydrocele. The swelling of the scrotum started on the right side about ten years back and went on gradually increasing in size. A year later the left side was also noticed to get bigger. On examination the right side was found to be the size of a no. 2 football and the left one was the size of an orange. On the right side the cord was found to be free and trans-illumination was negative. The whole of the right side was shelled out after an incision. (Tapping had been done when about 4 oz. of straw-coloured somewhat gelatinous fluid had drained out.) On opening the sac, a cauliflower-like mass was seen to occupy practically the whole of the sac. The right testis could not be spotted and the whole mass was thought to be new growth from the right testis. The sac with this mass was removed. The patient's wound healed up, and he left the hospital. The specimen received in formalin preservative was examined and it was found to consist of numerous spherical bodies within the scrotal sac. They did not consist of one mass, but could be easily separated from one another. There was no organic connection between them but they were stuck together as if with glue. The size was that of a pea; but a few were slightly bigger and some were smaller. These pea-like bodies were found not to be firmly attached to the inner wall of the sac but were loosely stuck with a sticky substance. Their surface was uneven and consisted of small granules (see figure, plate XLI). This external appearance was uniform in nature, one was the exact replica of another. The consistency was soft and with slight pressure these could be reduced into a homogenous amorphous dull grey coloured granules. There was no fluid inside. Histological examination showed only a structureless homogenous eosin-stained material without any cellular element. Staining for fat failed to reveal any fatty element.

Comments.—It appears that due to obstruction there was collection of lymph inside the scrotal sac from which these granular bodies were formed. Chemical analysis was not possible because of the formalin fixed specimen. The scrotal sac could not be properly explored to determine the position of the testis or for the abnormalities in the lymphatic because of the possibility of scattering of the spherical bodies and thereby spoiling the specimen. The uniform nature of the physical appearance of all these numerous bodies strongly suggests that the accumulated lymph condensed and granular bodies separated out of it.

PLATE XLI

AN UNUSUAL CASE OF LYMPHOCELE OF THE SCROTUM : B. P. TRIBEDI.
(M. H. P.) PAGE 256



Coloured diagram of the specimen showing the uniformly fine granular appearance of the spherical bodies.