45 year old male from Bihar, presented with carcinoma of left gingivobuccal sulcus (GBS). As part of his workup chest X-ray was done which showed multiple well defined slender shaped (“rice grain”) calcifications noted in subcutaneous tissue & along neck muscles, with their long axes oriented in the plane of the muscle fibers. This appearance is highly suggestive of cysticercosis. After asking the patient repeatedly later gives history of convulsions (since 15 years). He was non-vegetarian with frequent consumption of pork. CT scan done showed multiple cystic lesions most of which were calcified inactive stage (Figure 1); few of the lesions show post contrast enhancement and active non calcified scolex in the vesicular stage. He was treated for neurocysticercosis after which he underwent treatment for malignancy with surgery-mandible composite resection and neck dissection modified type II. Post-surgery received Radiotherapy. He is on regular follow up.

Cysticercosis is a parasitic infection that results from ingestion of eggs from the adult tapeworm, Taenia solium (T. solium). These larval cysts infect brain, muscle, or other tissue, and are a major cause of adult onset seizures in most low-income countries. A person gets cysticercosis by swallowing eggs found in the feces of a person who has an intestinal tapeworm. Cysts, called cysticerci, can develop in the muscles, the eyes, the brain, and or the spinal cord. Symptoms caused by the cysts depend on the location, size, number, and stage of the cysts. Cysts in the muscles, Generally do not cause symptoms May cause lumps under the skin, which can sometimes become tender. Cysts in the brain or spinal cord Cause the most serious form of the disease, called neurocysticercosis, cause seizures and/or headaches (these are more common).

Reference

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