

## An unusual presentation of hydatid cyst of liver (a case report)

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### ABSTRACT

**Introduction:** Hydatid cyst mainly involves liver and lung. In the liver, it usually has a benign behavior, but occasionally it may rupture and produces obstructive jaundice. Rarely hydatid cyst of the liver ruptures directly into the peritoneal cavity.

**Case report:** A 25-years-old man with progressive abdominal protrusion was admitted to our center. He had complaint of vague constant abdominal pain, early satiety and nausea 3 years prior to admission. Physical exam revealed severe abdominal distension with mild generalized tenserness and muscle wasting. Lab findings were normal except for 11% eosinophilia in peripheral blood smear. Sonography of abdomen revealed multiple hypoechoic cysts in the abdominal cavity. Abdominal CT scan confirmed sonographic finding and revealed additional cysts in the liver. High titer antibody against echinococcus granulosus was detected in serum of the patient. Mebendazole (100 mg/kg of body weight) was prescribed for one month. Complaint of patient abolished and the size of the cysts reduced obviously in the follow up visit.

**Conclusion:** Hydatid cyst of peritoneal cavity is an unusual presentation of hydatid disease even in endemic areas and it is almost always secondary to rupture of the cyst in liver. Although complete extraction of cyst is the best treatment for single cyst, there is no consensus about treatment of multiple cysts especially in peritoneal cavity. But in most centers, medical therapy is added to surgery to reduce the rate of recurrence. The patient was a case of hepatic hydatid cyst with spontaneous silent rupture into the peritoneal cavity but the clinical manifestations (abdominal distention and muscle wasting) was very similar to cirrhosis. Rupture of hydatid cyst may be asymptomatic or with mild symptoms.

**Key words:** Echinococcosis, Hepatic – Cysts, Hydatid

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