

CASE REPORT

INTESTINAL MYIASIS (MAGGOT INFESTATION OF INTESTINES)

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Introduction

Infection with maggots or fly larva are seen all over the world and results from invasion of tissues and organs by the larvae of various species of flies like *Musca*, *Fannia*, *Chrysinia* and *Calliphora*.

Myiasis can involve skin, eyes, connective tissues, nasopharynx, intestines and urethra. Intestinal myiasis, a rare clinical entity results from ingestion of food contaminated with the eggs or larvae of flies, some of which survive passage through the stomach and later mature in the intestines before they are passed in the stools. Intestinal myiasis, sometimes results from deposition of larvae by the flies round the anus of the patient and such larvae may crawl into the rectum to complete their feeding inside the body. Children are particularly vulnerable to myiasis due to their out-door exposure or ingestion of fly contaminated food.

Published reports about intestinal myiasis from this part of the world are scanty because unless maggots are seen by the physician himself diagnosis cannot be made. During the last five years two well documented cases of this condition were diagnosed and treated by the author, the summary of these is as under:

Case Reports

Case No. 1.— A 28 years old farmer from Bahawalpur District had abdominal pain and frequency of stools since 6 months. The abdominal pain was dull in character and was usually followed by sudden sharp pain lasting for a short duration. He had been noticing larvae after defaecation and brought them for examination.

Case No. 2.— A middle aged farmer from Multan District had lower abdominal pains which were dull and lasted about 3 hours followed by sudden sharp pain lasting for a few minutes. This pain was accompanied by frequency of stools and gas formation. He had been noticing larvae in the stools off and on since 3 months.

Comments

Two cases of intestinal myiasis are described. If the clinicians take

more interest in seeking the maggots in freshly passed stools, more and more cases can be detected. Rectal myiasis has been reported from Africa by infection with rat tail larvae.³ A similar case of ocular myiasis has also been reported from Africa.² The maggots develop in the folds of mucous membrane of intestines causing irritation which clinically manifests as abdominal pain, vomiting and diarrhoea. This kind of infection may persist for months and may produce severe nervous symptoms like anxiety and insomnia. Diagnosis is made by seeing active, whitish, headless segmented worm like larvae which are present in the freshly passed stools that have been protected from contamination by flies.¹ Treatment consists of frequent saline purgation and enemas or use of castor oil which aids in expelling these larvae.⁴ Prevention entails careful covering of the foods.

REFERENCES

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