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Multiple Large Calcified hydatid Cyst simultaneous presentation in Lung and Liver: A rare presentation

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ABSTRACT

Cystic hydatidosis caused by echinococcus granulosus, dogs are the definitive hosts and sheep is the main intermediate host. In India where there are most of people residing in villages, sheep and dog are main pet animals of peoples. The liver is the primary site followed by the lung.¹ Typically the larvae that pass through or bypass the liver, are trapped in pulmonary arterial capillaries. The entrapped larvae developed into hydatid cyst.

Keywords: Hydatid cyst, Calcification, definitive host

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INTRODUCTION

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A 65 year female patient presented with the complaint of mild chest pain predominantly right sided with dry cough from last 7 days. On physical examination chest was clear, no added sound present. On X-ray chest imaging shows two large well defined, round calcified opacity in right lower zone and another shadow in the right lobe of liver. Both opacities were seems like fuse together and looks like two tennis ball one on another. Routine blood investigations were normal except eosinophilia. On Ultrasonography chest and abdomen imaging revealed solid, hyper echoic space occupying lesion in right lower lobe of lung and right lobe of liver. CECT chest imaging shows well defined calcified hydatid cyst with size of 8x7x5.5cm in right lower lobe and right lobe of liver. CT is helpful in doubtful cases, as it can analyse the internal structure and measure the density.²

DISCUSSION

Natural history of hydatid cyst, there is a latent period of several years for development of hydatid cyst. Usually cyst is asymptomatic and sometimes diagnosed accidentally when the imaging being done for other diseases or some time during routine investigation. Once cyst becomes symptomatic, would detoriats rapidly. Rupture of the cyst and spillage of its contents during procedure are feared complication that may lead to anaphylactic shock or spread of disease.³ Diagnosis of pulmonary hydatid cyst is still based on radiography, ultrasound may be useful, it may confirm cystic structure showing the characteristics of double contour aspect (pericyst and endocyst).



Figure 1:- X-ray PA and lateral view shows right sided multiple large calcified lesion.

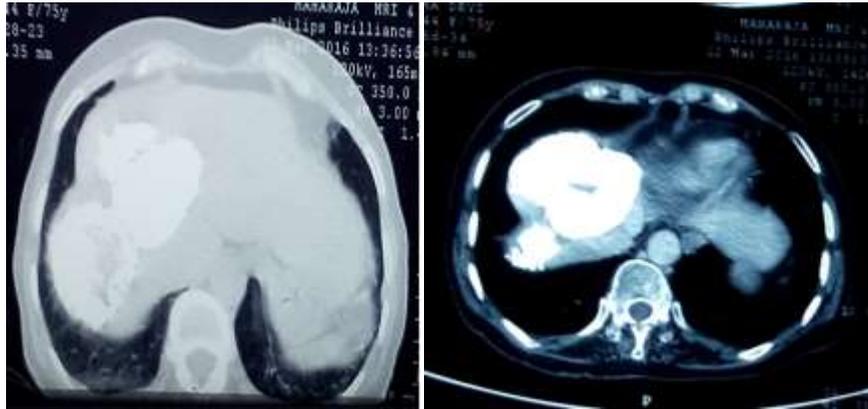


Figure 2:- CECT view shows right sided multiple large calcified lesion in Liver and right lower lobe of Lung.

CONCLUSION:

Large calcified hydatid cyst could have asymptomatic presentation either present in the liver or lung or present in both till it is not ruptured.

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