中文題目:糞小桿線蟲感染引起的無症狀廣泛性大腸炎—在腎上腺皮質功能不全的病人:一個個案報告

英文題目: Asymptomatic Strongyloides stercoralis pancolitis in a patient with adrenal insufficiency: a case report

作 者:陳韋志1 曾國綸1 蘇育正1

服務單位: 高雄醫學大學附設醫院內科部胃腸科1

Strongyloides stercoralis is a soil-dwelling nematode found worldwide but particularly prevails in the tropics. As patients had compromised immunity and were treated with corticosteroids, the pathologic state of Strongyloides stercoralis hyperinfection could result in clinical manifestations in the lungs, the meninges, the duodenum, and the colon. When it comes to the symptoms of Strongyloides stercoralis colitis, abdominal pain, diarrhea, and anorexia are inclued. However, asymptomatic Strongyloides stercoralis colitis is rarely noted so needs to be further investigated.

A 74-year-old man was found to have positive immune-reactive fecal occult blood test during his routine healthy checkup. He denied to have any specific GI symptoms or bowel habit changes. He had past history of adrenal insufficiency and be treated with and oral cortisone acetate 37.5 mg/day during recent one year. Elective colonoscopy examination showed diffusely distributed patches of hyperemic, swelling mucosa with erosions from cecum to sigmoid colon, with some whitish-yellow nodules intermingled. Microscopic examination disclosed some macrophages engulfing extremely tiny PAS+ and GMS- parasite-like structure. Laboratory tests revealed a total leukocyte count of $6.97 \times 109/L$ with 68.7% neutrophils, 6.6% eosinophils, and 19.1% lymphocytes. Serum IgE level was 1731 IU/mL. Stool parasite survey unexpectedly revealed the presence of Strongyloides stercoralis. Ivermectin 12 mg as a single oral dose was given.