How Reliable are Serological Tests in Diagnosis of Cysticercosis?

Dear Editor,

Human cysticercosis occurs when man becomes the intermediate host by being infested with eggs of *Taenia solium*. Diagnosis is based on combination of direct visualization, histology, serology and imaging techniques. Use of single diagnostic modality has low sensitivity.\(^1\) Diagnosis of cysticercosis is important due to a probable involvement

![Figure: Cyst of *T. solium* (whole mount). Cyst wall (cw), scolex (s) and stalk (st).](https://www.ijmm.org)
of the central nervous system. 

We describe a case of ocular (subconjunctival) cysticercosis in a eighteen years old, vegetarian male, who presented to the ophthalmology OPD with complaints of increasing painless conjunctival swelling of left eye since four months associated with redness, restriction of gaze and diplopia. The patient had a history of similar swelling in tongue three months back, which extruded spontaneously. The cystic swelling was excised in toto and the conjunctival defect was sutured. The patient was prescribed albendazole (15mg./kg) for three weeks. The cyst was 7mm x 5mm, white, translucent (live) and had a dense white spot which showed presence of a single scolex (Figure).

The serology for T. solium (T. solium IgG IVD Research Inc. Carlsbad, CA 92008) was negative. The serum immunoglobulin levels were within normal range. Stool samples, examined twice, did not show evidence of T. solium infestation. Computed tomography could not be done due to economic constraints.

The report demonstrates the poor sensitivity of immunological studies to detect cases of histologically proven cysticercosis, thus questioning their use in screening patients of suspected cysticercosis.

References


*V Wadhwa, P Kharbanda, S Rai
Department of Microbiology, Maulana Azad Medical College and LN Hospital, New Delhi – 110 003, India

*Corresponding author (email: <vishal2870@yahoo.com>)
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