



Hospital Universitario
Ramón y Cajal

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CLINICAL GRAND ROUND

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REASON FOR CONSULTATION AND PRESENT ILLNESS

62 year old woman

- Reason for consultation: diarrhoea
- History of present illness
 - Watery diarrhoea, 5-10 times per day
 - Duration: 4 months
 - Associated with nausea, vomiting, abdominal pain and weight loss (10 kg)
 - Followed up at a different institution, treated empirically a week before with metronidazole with no clinical improvement

MEDICAL & PERSONAL HISTORY

- Medical history
 - Giardiasis: 2016 and 2017 after returning from Ecuador
 - Strongyloidiasis: 2002, 2005, 2009 treated with albendazole/ivermectin
 - Cholecystectomy 2001, acute pancreatitis 2005
- Personal history
 - From Ecuador, resident in Spain since 1998 with frequent visits to Ecuador, last one in 2017
 - G7P2

PHYSICAL EXAMINATION

BP 83/57 mmHg

Signs of dehydration

Abdominal pain to palpation with no signs of peritoneal irritation

LABORATORY RESULTS & COMPLEMENTARY TESTS

- FBC: 12500/mm³ leukocytes, 26% neutrophils, 65 % lymphocytes (8180/mm³)
- K 2.9 mEq/L
- Bilirubin 1.40 mg/dl, GPT 71 U/L (NR 5-40), GOT 100 U/L (NR 4-50)
- Serology
 - HIV (-)
 - HCV (-)
 - HAV IgG (+) IgM (-)
 - HBV: anti-HBs (+), anti-HBc (+), HBs antigen (-)
 - *T. cruzi* IgG(-), *F. hepatica* IgG(-), *L. infantum* IgG+IgM(-)
 - *Strongyloides* spp. IgG: Indeterminate (Index: 0.95)

LABORATORY RESULTS & COMPLEMENTARY TESTS

- Stool
 - Bacterial culture (-)
 - GDH (-)
 - Parasite antigen detection:
 - *Giardia intestinalis* (-)
 - *Cryptosporidium* spp. (-)
 - *Entamoeba histolytica* (-)
 - Nematode larvae culture (-)

PANEL DISCUSSION

ESCMID eLibrary
by author

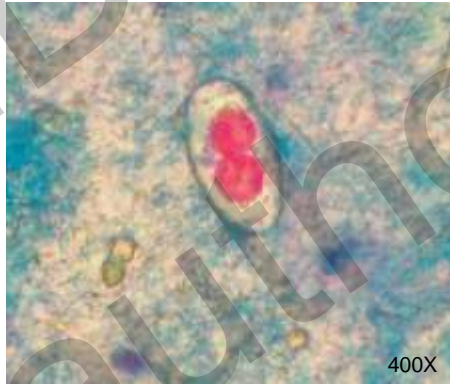
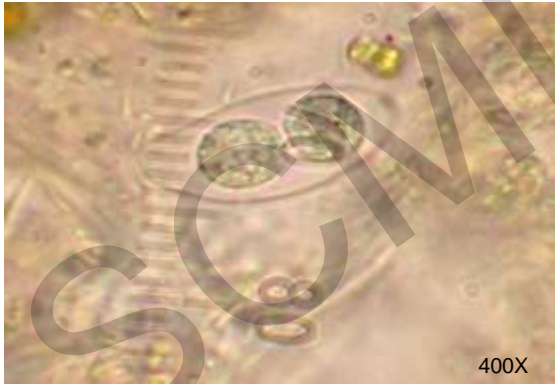
LABORATORY RESULTS & COMPLEMENTARY TESTS

At this point, would you order any other complementary tests?

- TSH 4.984 mUI/L (NR 0.350–4.950)
- Free T4 0.81 ng/mL (0.7–1.6)
- Amylase 50 U/L (NR 25–125), lipase 21 U/L (NR 8–78)
- Antitransglutaminase antibodies (-) with normal IgA
- ANA (-)
- calprotectin (-)
- Normal colonoscopy, with biopsy results pending

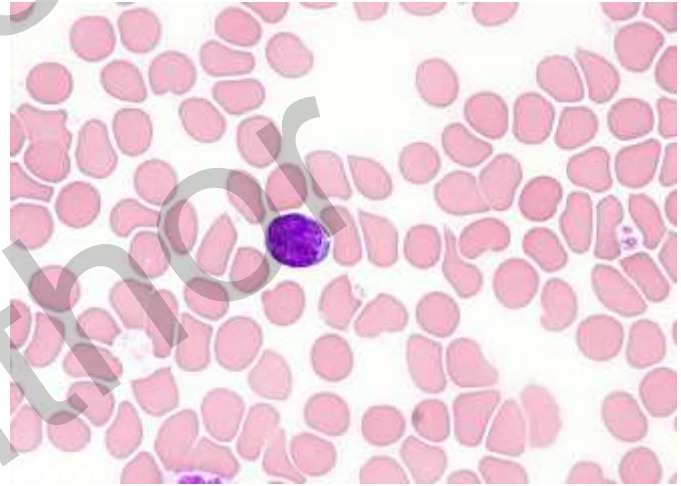
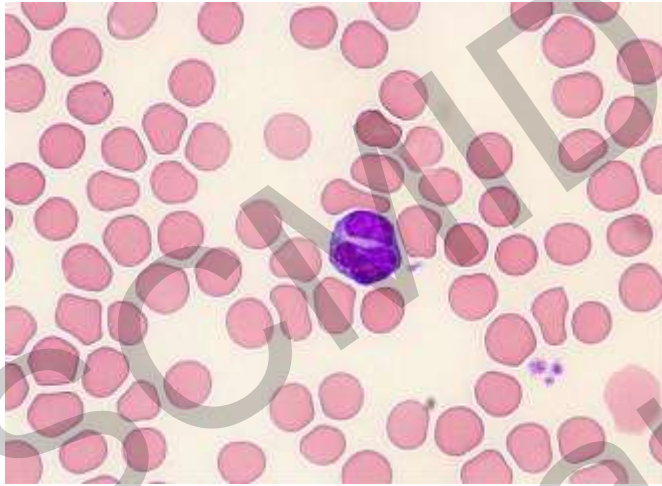
LABORATORY RESULTS & COMPLEMENTARY TESTS

Microscopic examination of the stools after concentration, Kinyoun and auramine stains showed the following:



LABORATORY RESULTS & COMPLEMENTARY TESTS

Peripheral blood smear



Treatment for *Cystoisospora belli* was started with trimethoprim-sulfamethoxazole (TMS) with a marked clinical improvement.

Chemiluminescence immunoassay (CMIA) for **HTLV**
IgG: **POSITIVE**

Western blot and PCR: **POSITIVE HTLV-1**

COMPLEMENTARY TESTS

- Peripheral blood cytometry and bone marrow biopsy: **adult T-cell leukemia.**
- Colon biopsy: lymphatic and lamina propria infiltration by lymphocytes with multilobulated nuclei and intense basophilic cytoplasm
- 18F-FDG PET showed no other signs of extension.

SUMMARY

Chronic diarrhoea due to *Cystoisospora belli* infection

**Adult T-cell leukemia related to HTLV-1,
chronic variant**

TREATMENT AND EVOLUTION

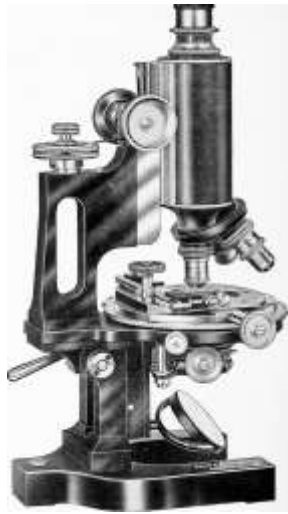
Treatment was started with Zidovudine and pegylated interferon-alfa 2a.

Good response but with side effects due to interferon. Diarrhoea after discontinuing TMS; currently with secondary prophylaxis.

We were able to contact one of her daughters who tested negative for HTLV.

TAKE HOME MESSAGES

- Importance of **microscopy** in diagnostic tests
- Consider immunosuppression in chronic infectious diarrhoea other than HIV
- Family screening in HTLV infection due to high rates of vertical transmission and prolonged asymptomatic periods



ACKNOWLEDGMENTS



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Thank you for your attention!