

**P0172 Review of *Strongyloides stercoralis* infections in Navarra in the last five years**

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**Background:** The infection by *Strongyloides stercoralis* is being described more and more frequently in our country due mainly to the presence of immigrant population of endemic zones. It is often asymptomatic although it can produce severe cases in immunosuppressed patients.

**Materials/methods:** Navarra is a region in the north of Spain and has 640.000 inhabitants. We retrospectively collect the positive serology data to *Strongyloides* obtained from 1/1/2014 to November 5, 2018 in our community, as well as the clinical, epidemiological and microbiological data of the patients. To perform the serology of *Strongyloides* we have used the reagent *Strongyloides* Serology Microwell ELISA<sup>®</sup> from SCIMEDIX Corporation.

**Results:** We processed 63 samples of 53 patients of which 45/63 (71.4%) samples of 29/53 (54.7%) patients were positive. The mean age was  $38.9 \pm 10.6$  years, 16/29 (55.2%) were women and 4/29 (13.8%) were HIV (+). All of them presented eosinophilia in different grades and in 7/29 (24%) was above 20%, in 18/29 patients (62%) the initial reason for consultation was the presence of eosinophilia, in other 7/29 (24%) the reason were digestive discomfort (dyspepsia, abdominal pain) with 1/7 (14.3%) patient with diarrhea and colic-type pain. 27/29 patients (93.1%) were immigrants, of whom 23/27 (85.2%) came from Latin America and 4/27 (14.8%) from sub-Saharan Africa, only 4/27 (14.8%) had travelled to their country in the last year. Of the 2 autochthonous patients one of them was HIV positive and the other had travelled to Nepal. Stool samples were received for parasites of 20/29 (69%) patients, of which in 4/20 (20%) was confirmed the diagnosis by visualization of larvae and in 3/20 (15%) by PCR, as for other parasite. Serologies were requested in 20/29 (69%) patients and obtained some positive result in 15/20 (75%) patients. 14/29 (48.3%) patients received treatment, 11/14 (78.6%) with ivermectin and 3/14 (21.4%) with Albendazole.

**Conclusions:**

- In our area *Strongyloides stercoralis* is the most common cause of eosinophilia in immigrant patients.
- Programs targeted at immigrants are needed to prevent and diagnose this infection.
- In the immunosuppressed it is important to make a screening before initiating an immunosuppressive therapy.

