

A 34-year-old Man Presented with Low-graded Fever and Chronic Watery Diarrhea

Piroon Mootsikapun, M.D.

Cyclospora diarrhea

Chronic diarrhea is one of the common clinical illnesses of HIV-infected patients although less seen in the era of highly active antiretroviral therapy (HAART). Although there are many causes for this illness, the most common pathogens are opportunistic protozoa such as *Cryptosporidium*, *Cyclospora* and *Isospora*.¹ The size of the pathogens is used for the differentiation; *Isospora* is the biggest (20-25 μ), followed by *Cyclospora* (8-10 μ) and *Cryptosporidium* is the smallest (3-5 μ). This case had chronic diarrhea caused by *Cyclospora*.

Cyclospora cayeyanensis is a coccidian protozoa.² Although it completes life cycle in human, the oocysts shed in the feces of infected persons must mature (days or weeks) outside the host, in the

environment, to become infective. *Cyclospora* can cause disease in both immunocompetent and immunocompromised hosts. The incubation period between acquisition of infection and onset of symptoms averages approximately 1 week. *Cyclospora* infects the small intestine and typically causes frequent watery diarrhea. In HIV-infected patients, it can cause profuse diarrhea with remitting and relapsing courses. The diagnosis is made by stool examination with modified acid fast staining which will show multiple round variable stained oocysts sized 8-10 μ . Trimethoprim-sulphamethoxazole (800/160 mg) twice daily for 10-14 days is the treatment of choice although in HIV-positive patients, it may need longer duration of treatment and chronic suppressive therapy.²⁻⁴

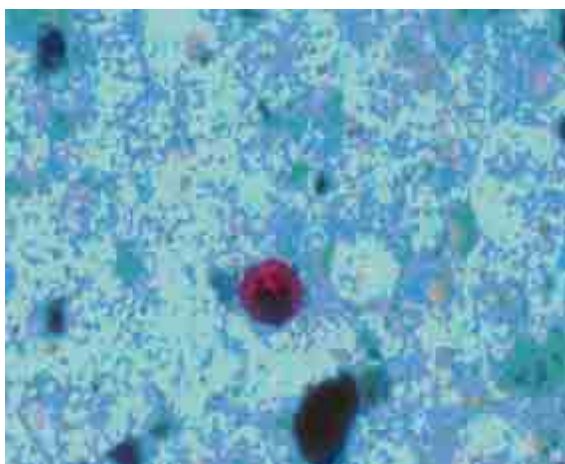


Figure 1.

References

1. Arora DR, Arora B. AIDS-associated parasitic diarrhea. *Indian J Med Microbiol* 2009;27:185-90.
2. Ortega YR, Sanchez R. Update on *Cyclospora cayeyanensis*, a food-borne and waterborne parasite. *Clin Microbiol Rev* 2010;23:218-34.
3. Madico G, Gilman RH, Miranda E, Cabrera L, Sterling CR. Treatment of *Cyclospora* infections with co-trimoxazole. *Lancet* 1993;342:122-3.
4. Hoge CW, Shlim DR, Ghimire M, et al. Placebo-controlled trial of co-trimoxazole for *Cyclospora* infections among travellers and foreign residents in Nepal. *Lancet* 1995;345:691-3.