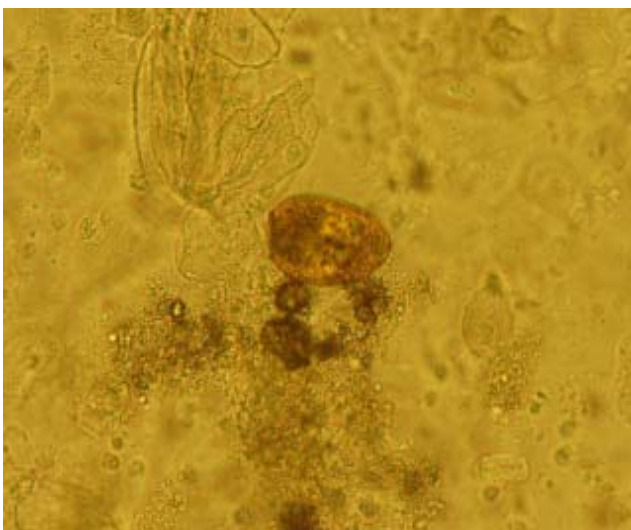


# A 34-year-old Man with Fever, Hemoptysis and Eosinophilic Pleural Effusion

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## *Paragonimus* pneumonia with pleural effusion

*Paragonimus* is a lung fluke that cause human infection (paragonimiasis) especially in Southeast Asia<sup>1</sup> and China<sup>2</sup> and rare in the other parts of the world.<sup>3,4</sup> *Paragonimus westermani* is the most common species in Southeast Asia and China whereas *P. kellicoti* is common in North America. In Thailand, paragonimiasis is usually found in the central part of Thailand. Life cycle of *Paragonimus* involves 2 intermediate hosts that are snails and crustaceans (freshwater crabs or crayfish). When the patient eats raw crabs or crayfish, the metacercaria excysts in the duodenum and migrates to the lung, develops to adult worm and deposits eggs. Patients usually present with fever, cough, hemoptysis, chest pain, pleural effusion and are often misdiagnosed



**Figure.**

as tuberculosis.<sup>3,5</sup> Eosinophilia and eosinophilic pleural effusion are clues that lead to the diagnosis.<sup>1,3,5</sup> Sputum fresh smear should be performed and operculated eggs may be found although the sensitivity is low.<sup>1,3</sup> Serologic diagnosis with ELISA has good sensitivity and specificity and is very useful for diagnosis.<sup>1,3,5</sup> Current recommendation of treatment is praziquantel 25 mg/kg orally 3 times a day for 2 days in which greater than 95% cure rates have been reported.<sup>3,5</sup>

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