Urinary tract infection by *strongyloides stercoralis*: a case report

Nilo Manoel Pereira Vieira Barreto¹
Weslei Almeida Costa Araujo¹
Joelma Nascimento de Souza¹
Ernesto Pereira de Oliveira¹
Nadia Andrade Khouri²
Marcia Cristina Aquino Teixeira¹
Neci Matos Soares¹

¹Universidade Federal da Bahia-UFBA, Faculdade de Farmácia, Salvador-BA, Brazil.
²Hospital Geral Roberto Santos-HGRS, Salvador-BA, Brazil.

*Strongyloides stercoralis* infections are usually chronic and asymptomatic. However, in the severe form of the disease, hyperinfection and dissemination to multiple organs may occur, especially in immunocompromised individuals. Usually, the nematode parasitic form colonizes the small intestinal mucosa, where produce eggs that hatch, releasing the rhabditiform larvae that travel to the lumen. From there, they are passed either in the stool or transform into filariforms, which can cause autoinfection. In rare cases, larvae have been observed in organs such as liver, heart, brain and urinary tract accompanied by hematuria and proteinuria. The objective of this study was to report a case of a hydronephrotic patient with *S. stercoralis* infection, with discharge of rhabditoid larva exclusively in urine. In 2013, a 72 years old male patient, hypertensive, obese and diagnosed with hydronephrosis secondary to renal calculi, reported lumbar pain, polyuria, polaciuria and dysuria, as well as frequent urinary tract infections. The microscopic analysis of urine sediment showed the presence of *S. stercoralis* rhabditoid larva. However, parasitological examinations by Baermann-Moraes, agar plate culture and spontaneous sedimentation, performed with three fecal samples on alternate days had negative results. The patient was treated with albendazole and to date has shown negative results in both parasitological and urine tests. This report deals with the unusual finding of *S. stercoralis* in a urine sample of an immunocompetent individual and absence of disseminated infection, but with hydronephrosis. Patients with nephropathies from *S. stercoralis* endemic areas should be monitored periodically, as early detection may prevent worsening of symptoms and renal failure.

Keywords: Hydronephrosis. *Strongyloides stercoralis*. Urinary Tract. Infection.

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