

## Loeffler's syndrome, pulmonary ascariasis, in Thailand, rare or under-reported?

Sir, ascariasis is an important tropical round worm infestation. This parasitic infestation is still prevalent in many countries. Extraintestinal manifestation of ascariasis is not common and can be misdiagnosed. An important extraintestinal manifestation is pulmonary ascariasis. The disorder namely "Loeffler's syndrome", which manifests as eosinophils accumulation in the lung as a response to a parasitic infection, is an important concern in tropical medicine (1). This syndrome can be a response to several parasitic infestations. Ascariasis is a common etiology of this syndrome. Acar *et al.* suggested that "Loeffler's syndrome must be considered early in the differential diagnosis for community acquired pneumonia when peripheric eosinophilia is seen in patients if they live in an endemic area for parasitic disease (2)." Here, the authors review previous publications on this syndrome in Thailand, a tropical country with high prevalence of ascariasis. From standard database search, Pubmed, Scopus, ISI and ThaiIndexMedicus (from 1,918 till present), there are only 2 previous reported cases on Loeffler's syndrome due to ascariasis in Thailand (3). The two reported cases are children with confirmed parasitosis from stool examination, one with overt pulmonary symptoms and the other without (with incidental finding, migratory pulmonary infiltrates, from chest X-ray) (3). Eosinophilia could be detected by complete blood count and increase serum IgE could be seen (3). Of interest, there are extremely few reports on Loeffler's syndrome in Thailand and this is an interesting issue for further discussion. The question is why there are very few reports despite the fact that ascariasis is common in Thailand. The first possibility is that this syndrome is extremely rare in Thailand. Indeed, Loeffler's syndrome is a rare disease. However, in many settings with lower prevalence of parasitosis, there are many case reports on Loeffler's syndrome. Second, whether the syndrome is under-investigated and under-reported is a query. One might urge that the present sanitation in Thailand is much improved and the incidence of parasitosis decreases. However, there is a recent report of Loeffler's syndrome (with approval by antiparasitic trial treatment) in the returning traveler from Thailand (4) indicating that the syndrome should not be extremely rare in Thailand. Indeed, the local pulmonarologist might overlook this syndrome or there might be some unknown immunotolerance mechanism that suppresses the clinical presentation among the patients due to the high parasitosis in Thailand.

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### References

1. Charoenratanakul S. Tropical infection and the lung. *Monaldi Arch Chest Dis* 1997;52:376-9.
2. Acar A, Oncül O, Cavuşlu S, et al. [Case report: Loeffler's syndrome due to *Ascaris lumbricoides* mimicking acute bacterial community-acquired pneumonia]. *Turkiye Parazitoloj Derg* 2009;33:239-41.
3. Phanichyakarn P, Direkwattanachai C, Na Ayuthya PI. Loeffler's syndrome: report of two cases. *Ramathibodi Med J* 1979;2:147-51.
4. Schaub NA, Perruchoud AP, Buechner SA. Cutaneous larva migrans associated with Loeffler's syndrome. *Dermatology* 2002;205:207-9.



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## Rabies after lung transplantation: Existed evidence

Sir, rabies is a non-curable viral infection of the central nervous system. It is transmitted by animal bite. However, the uncommon mode of rabies transmission, transplantation transmission is possible (1). The consideration on lung transplantation should be mentioned. From simple literature searching, there are at least 3 reports on 4 rabid lung recipients from several non-tropical countries after lung transplantation (2-4). Common source from infectious donor was also reported (3). Of interest, there was no pre-transplantation screening of rabies. Also, no signs and symptoms of rabies could be seen in problematic donor. Since lung transplantation practice is the new therapeutic approach that is increasingly performed around the world, the concern on risk of infectious transplantation is needed. The risk of rabies should be kept in mind. As noted, the rabies transmission can be seen in non-tropical countries, which are not the actual endemic area of rabies. Donor screening for rabies before transplantation might be needed.

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## References

1. Razonable RR. Rare, unusual, and less common virus infections after organ transplantation. *Curr Opin Organ Transplant* 2011;16:580-7.
2. Wohlsein P, Baumgärtner W, Kreipe HH, et al. [Rabies transmission through organ transplantation]. *Pathologe* 2011;32:406-10.
3. Maier T, Schwarting A, Mauer D, et al. Management and outcomes after multiple corneal and solid organ transplantations from a donor infected with rabies virus. *Clin Infect Dis* 2010;50:1112-9.
4. Mattner F, Henke-Gendo C, Martens A, et al. Risk of rabies infection and adverse effects of postexposure prophylaxis in healthcare workers and other patient contacts exposed to a rabies virus-infected lung transplant recipient. *Infect Control Hosp Epidemiol* 2007;28:513-8.



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