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Case Report

Uncommon Human Urinary Tract Myiasis Due to *Psychoda* Sp. Larvae, Kashan, Iran: A Case Report

Sima RASTI¹, *Rouhollah DEGHANI², Hassan NAEIMI KHALEDI³, Sayed Mahdi TAKHTFIROOZEH⁴, Elahe CHIMEHI⁵

1. Dept. of Parasitology and Mycology, School of Medicine, Kashan University of Medical Sciences, Kashan, Iran
2. Social Determinants of Health (SDH) Research Center, Department of Environmental Health, Kashan University of Medical Sciences, Kashan, Iran
3. Laboratory of Shabeed Beheshti, Hospital, Kashan, Iran
4. Student Research Committee, Hormozgan University of Medical Sciences, Bandar Abbas, Iran
5. Dept. of Environmental Health, School of Health, Kashan University of Medical Sciences, Kashan, Iran

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***Correspondence**
Email:
dehghani37@yahoo.com

Abstract

Contamination of human and animal body tissues with flies' larvae and diptera cause myiasis. A 26 yr old female patient refers to Kashan Shahid Beheshti Hospital, central Iran because of urogenital infection, pain in the right part of stomach, smelly and reddish vaginal discharge and frequent urination. In the first checking, urine sample was taken. In the sample, active and alive larvae were seen. The live samples were taken to the Environmental Health Department Lab of Kashan University of Medical Sciences in clean glass jars. In the morphological survey, *Psychoda* sp larvae were identified. In Iran, this study is the first report of this species of larva that causes urinary myiasis. This fly larva is not carnivore or bloodsucker and feeds on bacterial agents. Observation of personal hygiene especially during defecation and urination is essential to prevent contamination of this type of myiasis.

Introduction

Myiasis is rooted from a Greek word "myia" which means initial stage of flies' life. It was first used by Hope in 1840 (1). Human Myiasis refers to the contamination and attack of dipterous larvae to human living tissues (2). One of the proper places for growth and reproduction of flies'

larvae is hay and straw barn during winter (3). Flies' eggs are usually in less than 20 numbers in each group, but sometimes they are increased to 50 or 100 numbers. Female flies lay their eggs on decaying plants, greenhouses, mixed and wet hay and straw. On proper conditions, larval stage is 6 to 8 days but in colder

weather or food, shortage it may takes 4 to 5 weeks or more (4). Myiasis is classified as dermal, respiratory system, nasopharyngeal, ophthalmic, auricular, gastric, rectal, intestinal and finally urinary myiasis which is the most uncommon type in human, because cloth protection and inaccessibility of genital area to flies prevents them from laying eggs (2,5). Myiasis can be described as obligatory, opportunistic or pseudo. In obligatory myiasis, it is essential that larva feed on living tissues. In opportunistic type, larva may attack a corpse. Myiasis of gastrointestinal system in human does not occur but accidental swallowing of eggs or larvae of flies with food, can cause gastrointestinal myiasis (pseudo myiasis) (6). If this larva causes illness, it is called myiasis (4). Myiasis is formed in the body tissues because *Cyclorrhapha* suborder of flies laid eggs and larvae and subsequently they grow. Flies' larvae feed on living and dead tissues and in the case of gastrointestinal myiasis, they feed on host's food and this causes serious damages to the mentioned tissues. Ulcer myiasis is common in unsanitary places and especially if it is combined with bacterial infection, it becomes problematic. Regarding the life cycle, need of favorable environmental conditions and meeting the thermal needs, the spread of myiasis producing flies mostly occurs in the warm and hot seasons. Therefore, these flies are mostly spread in tropical areas and their spread is universal. In the world, more consideration is given to myiasis contamination specially in livestock because in addition to economic loss and decrease of ranchers' income, subsequently there is risk of human ulcers and skin contamination that threatens human health(6). As mentioned and according to reports, in most parts of the world , miyasis agents cause many economic damage and loss but what is significant is the adverse impact on society's health and subsequently each individual (7).

Human myiasis cases have been reported in different areas of the world in different organs like eye, skin, mouth, ear, and children's genitals. Badry et al. reported *Clogmia albipunc-*

tata Williston larva in their patient's urine in Egypt (8), Güven et al. recognized *Psychoda albipennis* larva as the cause of urinary myiasis in a 50 yr old female patient (9). Also in Iran, Ghavami and Jalilvand reported the existence of the *Megaselia scalaris* larva in 18 yr old boy is urine in Zanjan in 2014 for the first time (10). Özkol and Çalka extracted a Furuncular larva from the head of a 12 yr old boy in Turkey in 2013(11). Ayatollahi et al. reported some cases of *Oestrus ovis*, eye myiasis, in four male patients with average age of 34 yr in Yazd province in 1992 (12). Ghafari et al. reported Nazopharyngeal myiasis in the nose of a 52 yr old female hospitalized in I.C.U. in 2011 (13). Salimi et al. found *Lucilia sericata* larva from an 86 yr old Araki male's urine in 2010(14). In addition, Talari et al. took out *Chrysomya bezzi* species from the middle ear for the first time in Kashan, Iran (15). *Lucilia sericata* species were taken out from a 36 yr olds' arm (16). Many fly species can cause urinary myiasis but *Fannia scalaris* larva is the most common cause of it (17). Other fly species in the world related to urine are *Musca*, *Sarcophaga*, *Lucilia*, *Wohlfahrtia* and *Calliphora* (14).

In addition, there are few reports of urinary myiasis caused by *Eristalis* (18, 19), *Psychoda* (9), *Megaselia* (20) and *Clogmia albipunctata* (21) larvae in the world. However, until now in Iran there has been no report of *Psychoda* larva's myiasis. We can say that this study is the first report of *Psychodas'* larvae as the cause of Urinary or urogenital pseudomyiasis in Iran.

Case report

A 26 yr old female patient living in Kashan referred to Kashan Shahid Beheshti Hospital because of urogenital infection. She complained of pain in the right part of stomach, stomach pain and cramps, nausea, loss of weight, smelly and reddish vaginal discharge and frequent urination for 6 months. Holding the urine was very difficult and painful for the patient. She lived in the basement of a greenhouse and when the place was visited, many

flies were seen. The place was also humid. At first, blood and urine tests were taken. Reports showed that everything was normal. However, in the patient's urine test, alive and active larvae were seen. According to the patient, six larvae have got out of her body in 2 days. The



Fig. 1: *Psychoda* larvae collected from patients' urogenital tract

Discussion

Myiasis is an illness caused by infection of vertebrates tissues by Dipterans larvae. This illness is often seen in domestic and wild mammals all over the world. It is also mostly seen in humans who live in rural areas and have close connection with animals (22). Psychodidae family includes six subfamilies, which only two of them have hygienic and medical importance. Blood sucker sand flies, which are leishmaniasis vectors and their *Psychoda* larva, cause accidental myiasis that results in vomiting, faeces, urine, and menstruation, and this is because of insufficient hygiene in patients and bacterial agents existence (23, 24). Myiasis has become epidemic in all the tropical areas but it is mostly reported in the warm and humid areas. Reported cases during the year, is generally limited to summer months (25).

Urinary myiasis, in addition to clinical symptoms like itching and burning in genital area, causes infertility (26) and vaginal disfiguration in females which has a negative effect on their

live samples were taken to the lab of environmental health department of Kashan University of Medical Sciences in glass jars. In morphological survey, *Psychoda* sp was identified by microscope and the use of identification keys (2) (Fig. 1, 2).

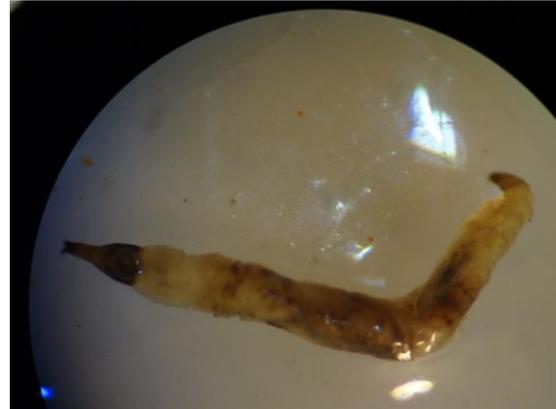


Fig. 2: *Psychoda* larvae collected from patients' urogenital tract

positive attitude toward marriage (27). In recent years, Doa et al. studied 5 different species of *Psychoda* larvae in urine from the physiological point of view. Urinary myiasis is very rare in human and one must be more suspicious of this larva in patients with urinary problems (28).

Less than 38 reports have been published on different types of urinary myiasis, such as *Dermatobia hominis* urinary myiasis in The United States (29), *Chryzomya bezzi* in Iran (30) and India (31), *Lucilia sericata* in Slovakia (32), *Eristalis tenax* in Spain (33) and Nigeria (34) and *M. scalaris* myiasis in Saudi Arabia (20). Only in 5 cases of 38 reports, *P. albipennis* is the main cause of urinary myiasis (9, 35-38). However, this report is the first rare case based on observation of this larva in Iran. In our study, cause of the patient's illness to *Psychoda* larva urinary myiasis is not clearly defined yet but it may have happened while using the toilet, and because of the genitourinary infection of the patient, it has attracted this type of pseudomyiasis agent. These species of larvae feed on bacteria. Their natural place

of living where humans are is toilet, which is rich with bacteria agents.

In case of human contamination or infection, insufficient sanitation in restrooms can be the cause the individual's contamination (14, 24). This larva can be active in places where proper conditions such as latrine, for laying eggs are provided and also favorable foods for larva is available. Therefore, if female genital is infected, it will be full of bacteria, which provide proper food for larvae. Because of the continuous discharge of patient's vagina and hard itching of that area, suitable humidity for larvae growing is provided. Often, this type of myiasis is more available in the villages, which have lower level of hygiene. In rural areas and the suburbs may be used Unsanitary toilet (without cover) and this problem can cause infection.

This report is from the suburb of Kashan that its toilets' condition is similar to rural areas. Use of disinfectant and insecticides, installing fine window nets to prevent insects entrance into living areas, regularly washing clothes and drying them under the sunlight, proper covering of genital area specially in warm seasons and observance of hygiene in working areas are very important. Also training the healthcare providers and familiarity with these illness especially in areas where outbreak of this illness is high can cause reduction of this type of contamination.

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References

1. Kumar P, Srikumar G. Oral myiasis in a maxillofacial trauma patient. *Contemp Clin Dent*. 2012;3:202-4.
2. Zumpt F. Myiasis in man and animals in Africa. *S Afr J Clin Sci*.1951; 2(1):38-69.
3. Taylor DB, Dennis Berkebile. Phenology of stable fly (Diptera: Muscidae) larvae in round bale hay feeding sites in Eastern Nebraska. *Environ Entomol*. 2011; 40:184-93.
4. Dehghani R, Sedaghat MM, Bidgoli MS. Wound myiasis due to *Musca domestica* (Diptera: Muscidae) in Persian horned viper, *Pseudocerastes persicus* (Squamata: Viperidae). *J Arthropod Borne Dis*. 2012; 6(1): 86-89.
5. Hall M, Wall R. Myiasis of humans and domestic animals. *Adv Parasitol*. 1995;35:258-334.
6. Dehghani R. An introduction to Aquatic arthropods. 1st ed. Farmanesh Publications; 2012.
7. Alizadeh M, Mowlavi G, Kargar F, Nateghpour M, Akbarzadeh K, Hajenorouzali-Tehrani M. A Review of Myiasis in Iran and a New Nosocomial Case from Tehran, Iran. *J Arthropod Borne Dis*. 2014; 8(2):124-131.
8. El-Badry AA, Salem HK, Edmardash YAE-A. Human urinary myiasis due to larvae of *Clogmia (Telmatoscopus) albipunctata* Williston (Diptera: Psychodidae) first report in Egypt. *J Vector Borne Dis*. 2014;51:247-9.
9. Güven E, Kar S, Doğan N, Karaer Z. Bir kadında *Psychoda albipennis*'in neden olduğu ürogenital myiasis. *Türkiye Parazitolo Derg*. 2008;32:174-6.
10. Ghavami MB, Djalilvand A. First Record of Urogenital Myiasis Induced by *Megaselia scalaris* (Diptera: Phoridae) from Iran. *J Arthropod Borne Dis*. 2015; 9(2): 274-280.
11. Hatice Uce Özkol, Ömer Çalka. Furuncle Persistent to Long-Term Antibiotic Therapy in a Non-Tropical Region: A diagnosis that must not be overlooked: Furuncular cutaneous myiasis. *Türkiye Parazitolo Derg*. 2014;38:138-40.
12. Miura M, Hayasaka S, Yamada T, Hayasaka Y, Kamimura K. Ophthalmomyiasis caused by larvae of *Boettcherisca peregrina*. *Jap J Ophthalmol*. 2005; 49:177-179
13. Mumcuoğlu KY, Eliashar R. Nasal myiasis due to *Oestrus ovis* larvae in Israel. *Israel Med Assoc J*. 2011;13:379-380.
14. Salimi M, Goodarzi D, Karimfar M, Edalat H. Human urogenital myiasis caused by *Lucilia sericata* (Diptera: Calliphoridae) and *Wohlfahrtia magnifica* (Diptera: Sarcophagidae) in Markazi province of Iran. *J Arthropod-Borne Dis*, 2010; 4(1): 72-76.
15. Talari SA, Yeganeh Moghadam A, Dehghani R. *Chrysomya bezziana* Infestation. *Arch Im Med* 2002; 5 (1): 56-58.

16. Dehghani R, Miranzadeh MB, Yosefzadeh M, Zamani S. Fauna aquatic insects in sewage maturation ponds of Kashan University of Medical Science 2005. Pak J Biol Sci. 2007 ;10(6):928-31.
17. Perez-Eid C, Mouffok N. [Human urinary myiasis caused by *Fannia canicularis* (Diptera, Muscidae) larvae in Algeria]. Presse Medicale (Paris, France: 1983). 1999;28(11):580-1.
18. Mumcuoglu I, Akarsu GA, Balaban N, Keles I. *Eristalis tenax* as a cause of urinary myiasis. Infect Dis. 2005;37(11-12):942-3.
19. Korzets Z, Bernheim J, Lengy J, Gold D. Human urogenital myiasis due to *Eristalis larva*: an unusual cause of ureteric obstruction. Nephrol Dial Transplant. 1993;8(9):874-6.
20. Wakid MH. A laboratory-based study for first documented case of urinary myiasis caused by larvae of *Megaselia scalaris* (Diptera: Phoridae) in Saudi Arabia. Korean J Parasitol. 2008;46(1):33-6.
21. Kamimura K, Arakawa RA. Case report on urinary myiasis due to the moth fly, *Telmatoscopus albipunctata*. Med Vet Entomol. 1986;37:161-2.
22. Dehghani R, Sedaghat MM, Esmaeli N, Ghasemi A. Myiasis among slaughtered animals in Kashan, Iran: describing a veterinary entomological problem in the tropics. Iran J Vet Sci Technol. 2014;4(1): 19-28.
23. Wagner R, Barták M, Borkent A, Courtney G, Goddeeris B, Haenni JP, Knutson L, Pont A, Rotheray GE, Rozkošný R, Sinclair B. Global diversity of dipteran families (Insecta Diptera) in freshwater (excluding Simuliidae, Culicidae, Chironomidae, Tipulidae and Tabanidae). Hydrobiologia. 2008 ;595(1):489-519.
24. Sakla AA, El-Hady HA, El-Nadi NA. *Psychoda albipennis* maggots (Diptera: Psychodidae) as a cause of urinary myiasis in an Upper Egyptian male, the second world case. El-Minia Med Bull; 2003;13:220-4.
25. Noutsis C, Millikan LE. Myiasis. Dermatol Clin. 1994;12(4):729-36.
26. Rilkoff H, Tukahebwa EM, Fleming FM, Leslie J, Cole DC. Exploring gender dimensions of treatment programmes for neglected tropical diseases in Uganda. PLoS Negl Trop Dis. 2013;7(7):e2312.
27. Hotez PJ. Empowering women and improving female reproductive health through control of neglected tropical diseases. PLoS Negl Trop Dis . 2009;3(11):e559.
28. Yones DA, Bakir HY, Hameed DA. Human Urogenital Myiasis Caused by *Psychoda* Species Larvae: Report of Five Cases and Morphological Studies. J Adv Parasitol. 2014;1(2): 12 - 20 .
29. Massey RL, Rodriguez G. Human scrotal myiasis: botfly infestation. Urol Nurs. 2002;22(5):315-17.
30. Jdalayer T, Maleki M, Moghtaderi M. Human urogenital myiasis caused by *Chrysomya bezziana*. Iran J Public Health. 1978;7(3):116-9.
31. Wadhwa V, Kharbanda P, Rai S, Uppal B. Urogenital myiasis due to *Chrysomya bezziana*. Indian J Med Microbiol. 2006;24:70-1.
32. Nagy V. Unusual presentation of the urogenital myiasis caused by *Lucilia sericata* (Diptera: Calliphoridae). Ann Agric Environ Med. 2012;19(4):802-4.
33. Gonzalez M, Maurice CM, Greissy MP, Javiera DV, Marcelo MC. Accidental genital myiasis by *Eristalis tenax*. Rev Chilena Infectol. 2009;26(3):270-2.
34. Utsalo SJ, Khalifa RM. Urinary myiasis presenting as urinary tract infection in a Nigerian adult male. Assiut Med J. 1985;9(2):43- 53.
35. Dinçer Ş, Tanyüksel M, Küçük T. Two case-reports of myiasis caused by *Psychoda* spp.(Diptera:Nematocera) and *Sarcophaga* spp.(Diptera : Cyclorhapha). Türkiye Parazitolo Derg. 1995;19:402-8
36. Taylan-Ozkan A, Babur C, Kilic S, Nalbantoglu S, Dalkilic I, Mumcuoglu KY. Urogenital myiasis caused by *Psychoda albipennis* (Diptera: Nematocera) in Turkey. Int J Dermatol. 2004;43(12):904-5.
37. Ural Oğuz, Berkan Reşorlu, Zeynep Çizmeci, Ünsal. A. A rare urogenital myiasis caused by *Psychoda albipennis*: a case report. Turk J Urol. 2012;38(3):168-9.
38. Kaya S, Arslan M, Karaer Z, Köksal I. Urogenital myiasis caused by *Psychoda albipennis*. Türkiye Parazitolo Derg. 2011;35(3):172-4.