CASE REPORT
GASTRIC ASCARIASIS ASSOCIATED WITH UPPER GASTROINTESTINAL HEMORRHAGE
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Infection by Ascaris lumbricoides, the largest of the intestinal nematodes, is more predominant worldwide than infection with any other helminth (Schwartzman, 1991). The adult worms can migrate to any organ or orifice of the body, causing mechanical obstruction with corresponding symptoms. The commonest gastrointestinal complications are intestinal obstruction, volvulus; perforation; appendicitis; biliary, hepatic, or pancreatic ascariasis (Karbwang and Harinasuta, 1991). Ascaris may produce upper gastrointestinal bleeding (Jacob, 1983), however, it is the rare complication of ascariasis. We report a case of acute upper gastrointestinal bleeding associated with gastric ascariasis diagnosed by endoscopy.

A 60-year-old Thai woman was referred to upper gastrointestinal endoscopy because of dull aching abdominal pain and melena for 1 week. She had no previous history of peptic ulcer, upper gastrointestinal bleeding, abdominal surgery, or drug ingestion. Physical examination revealed pale conjunctiva and epigastic tenderness. Laboratory investigations showed a hemoglobin of 8 gm/dl with 3% eosinophilia. Endoscopic findings revealed multiple gastric erosions at pyloric antrum with stigmata of recent hemorrhage and one adult ascaris moving at the antrum (Fig 1). The patient was treated with antacid gel and mebendazole.

This report revealed endoscopic gastric erosions in the presence of an adult ascaris moving in the stomach. There was no other risk factor of upper gastrointestinal bleeding found in the patient.

There is only one report in the literature of gastric ascariasis causing upper gastrointestinal bleeding (Jacob, 1983). The possible pathogenesis may be due to the mechanical trauma of adult ascaris migration in the stomach; or it may be due to gastric mucosal irritation by the worm’s secretion (Jacob, 1983).

Many patients with ascariasis have no upper gastrointestinal bleeding even with heavy worm infection while the adult worms live in their usual site of the host (small intestine). Complications due to ascariasis may be occurred during adult worm migration to the unusual sites such as bile duct (causing bile duct obstruction) or pancreatic duct (causing pancreatic duct obstruction and pancreatitis). However, there may be additional promoting factors contributing to upper gastrointestinal bleeding in the patients with gastric ascariasis. Thus, further study of the association between gastric ascariasis and upper gastrointestinal bleeding appears warranted.

ACKNOWLEDGEMENTS
We are indebted to Professor Tranakchit Harinasuta for critical comment on the manuscript.

REFERENCES