An Uninvited Dinner Guest

(See pages 1810-1 for the Answer to Photo Quiz)



Figure 1. An unidentified nematode as it was received 24 h after being expectorated by the patient. At this time, the nematode was still very much alive and was highly motile. It measures ~2.5 cm in length and 2–3 mm in diameter. This is a still image from video 1, available in the electronic edition of *Clinical Infectious Diseases*.

A 60-year-old woman from Peabody, Massachusetts, with a history of irritable bowel syndrome and no history of recent travel became ill after eating a home-cooked codfish dinner in celebration of the Good Friday holiday (25 April 2005). The cod had been purchased as a fresh frozen fillet at a local supermarket. The patient reported that she defrosted the fish before frying it in oil. The fish was cut in ~150-g, ~1.5-cm-thick slabs. The patient felt unwell within hours after eating her meal. She developed vague abdominal tenderness and bloating, but she was particularly troubled by intense borborygmus and an increased passage of flatus. In addition, she started passing semisolid stools that were unaccompanied by pain or tenesmus. Her husband, who shared the dinner, remained asymptomatic. Other than this meal, the patient had not consumed any other fresh fish or seafood within weeks before this event.

On the morning of the ninth day after eating the cod, the patient experienced a coughing spell while brushing her teeth. Immediately after the spell, she felt an unusual solid motile object in her mouth, and she then spat out a 2.5-cm-long, writhing worm (figure 1; see also video 1, available in the electronic edition of *Clinical Infectious Diseases*). The patient described the worm as highly active, "Like one of those movies of sidewinders [snakes] in the desert." Despite being horrified by this event, she had the presence of mind to capture the worm with tweezers and to bring it to a local emergency department, where physicians subsequently requested an infectious diseases consultation to assist in its identification. At the emergency department, the patient's total WBC count was 5800 cells/ μ L, without eosinophilia.

What is your diagnosis?

Clinical Infectious Diseases 2005; 41:1764

© 2005 by the Infectious Diseases Society of America. All rights reserved. 1058-4838/2005/4112-0013\$15.00