25TH NATIONAL & 11TH INTERNATIONAL ANNUAL CONGRESS
ON RESEARCH AND TECHNOLOGY OF IRANIAN MEDICAL SCIENCES STUDENTS
URMIA UNIVERSITY OF MEDICAL SCIENCES, URMIA, IRAN

Evaluation of Patients with Hydatid Cyst: Clinical Manifestations, Diagnostic Methods, and Treatment Approaches at Shahid Beheshti Hospital and Shahid Muftah Clinic from March 2022 to July 2023

Hossein Maheriasl*, Abouzar Arjomand, Abdolali Moshfe, Reza Hosseinpour

Student Research Committee, Yasuj university of Medical Sciences, Yasuj, Iran

OPEN ACCESS

***Corresponding Author:**
Student Research Committee, Yasuj university of Medical Sciences, Yasuj, Iran

Citation:
Maheriasl H, Arjomand A, Moshfe A, Hosseinpour R. Evaluation of Patients with Hydatid Cyst: Clinical Manifestations, Diagnostic Methods, and Treatment Approaches at Shahid Beheshti Hospital and Shahid Muftah Clinic from March 2022 to July 2023. *Iranian biomedical journal*. Supplementary (12-2024): 162.

ABSTRACT

Introduction: Hydatid cyst disease, caused by the larvae of Echinococcus granulosus, is one of the most dangerous zoonotic diseases. Studies conducted in Yasouj City have confirmed the presence of hydatid cyst disease in both humans and animals in this region, highlighting it as a significant health and economic concerns for the community. A thorough examination of the current state of hydatid cyst disease—including its clinical symptoms and diagnostic methods, and treatment options—can assist healthcare professionals in managing this condition effectively. This study aimed to evaluate clinical manifestations, and diagnostic and treatment methods among patients with hydatid cyst at Shahid Beheshti Hospital and Shahid Muftah Clinic.

Methods and Materials: In this cross-sectional descriptive study, 30 patients with hydatid cysts were evaluated between August 1401 and July 1402. Demographic information, symptoms, and clinical manifestations—including cough, hemoptysis, shortness of breath, sputum production, fever, chills, chest pain, abdominal and flank pain, nausea, vomiting, weight loss, and loss of appetite—were collected, along with physical examination findings, details of cysts (location and size), complications, treatment, duration of hospitalization, follow-up, disease recurrence, and any deaths attributed to the disease. The frequency of qualitative data was expressed as a percentage, and the amount of quantitative data was calculated as the mean ± standard deviation.

Results: The average age of patients was 36.9 ± 21.02 years, with 60% being women and 40% men. Additionally, 60% of the individuals had agricultural jobs. The most commonly observed symptoms included pain, nausea, shortness of breath, abdominal distension, and cough. Liver involvement was noted in 63.3% (19 individuals) of the cases, while lung involvement was present in 40% (12 individuals). The average cyst size was 64 ± 33.06 mm. Among the patients, 26.66% (8 individuals) underwent cystectomy-marsupialization surgery, whereas 23.33% (7 individuals) received non-surgical treatment. Post-surgical complications were reported in 30% of the patients, primarily manifesting as pain and excessive secretions. Moreover, 6.6% (2 individuals) experienced pain in the surgical area, and 3.34% (1 individual) developed an infection following the procedure. In 96.66% of the cases, the prescribed medication was of the Albendazole type.

Conclusion and Discussion: According to the results of the present study, the prevalence rate, clinical manifestations, and treatment methods appear to be similar to those in other regions. However, the limitations of this study include a small sample size, which restricts the ability to analyze symptoms, manifestations, and treatment methods based on age. Furthermore, it was not possible to segment and measure correlations between the location of the cyst and the treatment method.

Keywords: Albendazole, Echinococcosis, Patients

[Downloaded from ibj1.pasteur.ac.ir on 2026-10-16]

[DOI: 10.61186/ibj.25th-11th-IACRTIMSS]