Severe subcutaneous, muscular and visceral coenurosis in a goat

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ABSTRACT

Coenurosis (gid or sturdy) is a zoonotic disease that is caused by Taenia multiceps metacestode. It is common in small ruminants. The cysts in sheep are more cerebral, while are noncerebral in goats. Coenurosis decreases production, and results in the death of the affected animals and in the disposal of the organs or even carcasses in severe infection. The present study describes severe subcutaneous coenuri associated with contamination in other tissues including the skeletal muscles and visceral organs. A remarkable clinical observation was the aggregation of cysts in variable sizes in the subcutaneous tissue of whole body. Subcutaneous tissue is not a common site for cyst formation. Coenurosis was confirmed based on the morphological characteristics of the cysts including the clusters of protoscolices and rostellar hooks.

Keywords
Coenurosis, Taenia multiceps, Coenurus cerebralis, goat

Abbreviations
C. gaigeri: Coenurus gaigeri
T. multiceps: Taenia multiceps
C. cerebralis: Coenurus cerebralis
**Introduction**

Coenurosis (gid or sturdy) is a zoonotic disease that is caused by *Coenurus cerebralis* (*Taenia multiceps metacestode*). *Taenia multiceps* lives in the small intestines of carnivores as definitive hosts. Intermediate hosts are infected via ingestion of contaminated grass by spread eggs from the carnivores feces that lead to cyst formation in different organs [1]. Coenurosis is usual in small ruminants [2, 3], but rare in horses [4] and cattle [5]. The common predilection site for coenuri is cerebrum in sheep and extracerebral tissues in goats [1]. However, presence of cysts in the brain of goats [6] and other tissues apart from the brain of sheep [7] have been confirmed, recently. The parasite responsible for non-cerebral coenurosis was named *Coenurus gaigeri* in goats, and *Coenurus skrjabini* in sheep [1]. However, the later literature described *C. gaigeri* as the same species with *T. multiceps* [8].

Coenurosis causes high economic losses in the small ruminants industry and breeding [9]. Coenurosis decreases production, and in cases with severe infection leads to the death of the affected animals and disposal of organs or even carcasses [1, 10]. Human acts as incidental intermediate host and may be infected by ingestion of eggs in result of poor personal hygiene. In the literature, several reports of human coenurosis have been presented from different countries including Austria [11], Nigeria [12] and North America [13].

In the present study, we observed a lot of coenurus cysts in the subcutaneous, muscules and visceral organs of a goat.

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**Case presentation**

A 11-month old female goat was referred to the veterinary hospital with a history of weight loss and multiple subcutaneous swellings on the face and around the eyes (Fig. 1a), neck, prescapular areas, flank and limbs (Fig. 1b). The case had not responded to any antibiotics or other treatments. On clinical examination, rectal temperature (38.5 ºC), heart rate (75 per min) and respiratory rate (32 per min) were in the normal range. The subcutaneous palpable swellings were soft and fluctuating in different size from 2.1×3.4 to 8.5×10.2 cm. Clear watery fluid was aspirated by a sterile syringe from the subcutaneous masses.

Collected cystic fluid had large number of small size, white colour plaques. The plaques were put on the clean glass slide, covered by a coverslip and examined under a light microscope. On microscopic examination, multiple protoscolices were observed. Based on the morphological features including the clusters of protoscolices and rostellar hooks (Fig. 2a), coenurosis was confirmed. Due to severe contamination, the goat was euthanized. In the postmortem investigation, Coenurus cysts were found under the skin (Fig. 2b), between fasciae of the skeletal muscles, in the thorasic cavity (Fig. 2c) and on the mesentery (Fig. 2d). The sizes of the coenuri cysts were different and had a thin and transparent wall. They were filled with clear fluid, and clusters of scolices were visible in their inner membrane (Fig. 2e).

Histopathologically, each coenurus was lined by a thin hyaline layer. Some cysts were surrounded by a demarcation line including lymphocytes, eosinophils, macrophages and giant cells. Several scoleces were visible within the cysts (Fig. 2f).

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**Figure 1**

A: Goat affected to coenurosis. Different swellings on the face and periorbital region.
B: Coenurus cysts are located under the skin.
Discussion

The occurrence of coenurosis in tissues other than CNS had been reported mainly from the Asian countries and are characterized to be C. gaigeri in goats [14, 15]. C. cerebralis and T. multiceps are considered the same species with only intraspecific variations.

Varcasia et al. (2012) investigated morphological and molecular characteristics of non-cerebral coenurosis in goats. They showed the same reported morphologic features with C. cerebralis reported by other authors [16]. The cysts outside of the CNS offer that a different strain or genetic variants of T. multiceps may be responsible. Phylogenetic trees based on genetic markers of mitochondrial DNA (ND1 and COI) demonstrated that non-cerebral cysts could belong to...
different genotypes or strains of *T. multiceps*. Oryan et al (2010) evaluated biochemical and pathological findings of *C. gaigeri* in Iranian native goats. They used CO1 and ND1 for phylogenetic analysis and identification of species. These researchers suggested that the larval stages of *T. multiceps gaigeri* and *C. cerebralis*, are monophyletic species [3]. According to the study of Hüttner et al. (2008), genetic analysis and phylogenetic investigation are the best diagnostic ways for identification of different species of metacestodes [17].

Clinical signs of coenurosis depend on the location and size of cysts [1]. Presence of cysts in the cerebrum is associated with the nervous symptoms including ataxia, paralysis, hypermetria, blindness, head deviation, incoordination, head pressing, and circling. Coenurosis may take for several months, and the mortality rate realed to that may reach to 100% [18, 19]. Non-cerebral coenurosis is not clinically diagnosable in mild form and the cysts may be observed in the slaughterhouse. In severe infection, the mainly clinical signs are lameness, paresis, paralysis and large skin lumps due to the subcutaneous cysts [20]. Muscular cysts cause pain and functional weakness of involved organs [15]. Orbital coenurosis is rare and is associated with proptosis, blepharitis, the conjunctiva congestion, chemosis, swelling around the orbit, and enlargement and protrusion of the eye ball [20]. Treatment of coenurosis in sheep and goats with albendazole, niclosamide and praziquantel has little or no effect [1]. Surgical treatment for removing the cysts is not economical in cases with multiple large cysts.

In the present study, extra-cranial coenururi cysts affected the skeletal muscles, and subcutaneous and visceral organs. A remarkable clinical observation was aggregation of variable sizes cysts in the subcutaneous tissue of whole body. Our report described coenurosis in a 11-month female goat. It is stated that the disease happens often in 1-2 year-old female animals, particularly in the pregnancy course due to the pregnancy stress and reduction of immunity level. Previous studies show that clinical coenurosis is common in young animals [18, 22]. In the literature, there are reports similar to our report in goat [15]. Afonso et al. (2011) observed *C. cerebralis* in 149 abattoir-slaughtered and 47 experimentally infected goats. They showed that in the experimentally infected goats, a large percentage of *T. multiceps* cysts are found in the muscles and the subcutaneous tissues[23]. Shivaprkash and Reddy (2009) found multiple subcutaneous coenuri in the neck, prescapular region, abdomen and limbs in a herd of goats and characterized them as *C. gaigeri* due to their extra-cranial sites [2].

Coenurosis is a zoonotic parasitic disease and is important in public health. Human cysts are usually found in CNS, eye, subcutaneous or muscular tissues [24, 25, 26]. Control programs are regular anthelmintic treatment of dogs by effective taenidical drugs, and correct disposal of contaminated carcasses to prevent access of dogs to them [27].

The present study reveals various predilection sites of coenurosis including the subcutaneous, skeletal muscles and other organs. Further studies are necessary to clarify the tendency of coenuri to occur in the subcutaneous tissues, skeletal muscles and visceral organs of goats. Public health importance should be considered in such cases. The awareness must be given to the farmers about the correct disposal of contaminated carcass. Regular antiparasitic drug should be used in dog for prevention of this parasitic infestation.

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**Author Contributions**

S.A. and R.Kh. performed post-mortem examinations. S.A. wrote the manuscript. M.A. referred the case and did the clinical examinations. SR.N. participated in the laboratory diagnosis of the cysts. All authors read and approved the final manuscript.

**Conflict of Interest**

All the authors declare that there is no conflict of interest.

**References**


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Case Report


سنروسی زیرجلدی، عضلانی و احشایی در یک بز

چکیده
سنروسی زیرجلدی نوعی بیماری زئونوز است که توسط مرحله لاروی تنیا مولتی سپس ایجاد می‌شود. در نشخوار کننده‌گان کوچک رایج است. در گوسفنده، کبيست‌ها پیشروی در مغز و در بز در بافت‌های دیگر تشکیل می‌شود. سنروسی سبب کاهش حاضری و در پوست و عضلات اسکلتی و احشایی می‌شود. کبیست‌ها برخی مکان‌های جلدهای بز و غیره را تشکیل می‌دهند. سنروسی به طور مستقیم موجب کاهش تولید، مرگ، دفع اندام‌ها و حتی لاشه در عفونت‌های شدید می‌شود. مهم‌ترین نشانه‌های بیماری شامل توهین، قلبی، مقاوم و بی‌احترامی کبیست‌های قلبی در اندام‌های مختلف در زیر پوست است. کبیست‌ها می‌توانند آکینوسیکی از جمله‌گره‌های میکرو بیماری پروتوکولکی در دیواره‌های کبیست و قلبی‌های حلقی کبیست سبزنتیز کنند. اگرچه بیماری سنر در بز رایج است، اما آلودگی شدید معمولاً نادر است. مهم‌ترین نشانه بالینی قابل توجه وجود کبیست‌های فراوان در اندازه‌های متغیر در زیر پوست است. مورفولوژیکی از جمله آکینوسیکی و پروتوکولکی در دیواره‌های کبیست و قلبی‌های حلقی کبیست سبزنتیز کنند. اگرچه بیماری سنر در بز رایج است، اما آلودگی شدید معمولاً نادر است. مهم‌ترین نشانه بالینی قابل توجه وجود کبیست‌های فراوان در اندازه‌های متغیر در زیر پوست است.

واژگان کلیدی
سنروسی، عضلانی، احشایی، بز، کبیست‌های زئونوزی، آلودگی شدید، مرگ، گروسفند.