Case Report
Ocular Hirduinasis – Leeches the Cause of Anguinus Tearing and Potentially Blinding Parasite

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Purpose: To acknowledge the ophthalmologists, that among many causes of blood tearing; the leeches are of pinnacle importance in this regard, especially to the inhabitants of Balochistan due to suitable ecology for the parasite and its infestation to the human. Material and methods: The study includes 3 patients two children and one adult with sanguineous tearing having leeches in the eyes. Results: The moment worm removed, the bloody discharge ceased, the eye remained open and patient cheerful.

Key words: Ocular hirduinasis, leeches, blinding parasite

In all cases leeches come in our observation having propensity to attach themselves, to the superior limbal region and having the proclivity to enter the anterior chamber and cause dilapidation of the eye. The discharge of bloody tearing is frightening and alarming both to the sufferer and his relatives but if it is occurrence is due to hirdudnea and its recognition and removal instantaneously abolishes all fare and fright and bring pleasure and delight.

Material and methods
During two years i.e., 2004-06, we got three patients all male one adult age 45 years, two 7 years and 12 years respectively, curiously in all the three cases effected eye was left eye.

The adult gives history of performing ablution, since then was unable to open his left eye and bloody tearing, the two children give the similar history, while bathing in a talab.

To all the patients local anaesthetic drop were installed, the eye opened by assistant and no cursory look having attachment of worm at the limbal region simulating inital prolapse, but differentiated by movement of the worm.

The thermocautery applied to the worm until movement ceased thought to be unconscious or dead removed by corneal forceps. Antibiotic drops instilled and prescribed for a week.

Results
The leeches (Hirudinea) belong to the phylum annelida, which comprises three major classes with (Cheatopoda, Archannelidida and medically important class Hirudinea).

The phylum comprises worm of varying length and breadth, the body is composed limited with definite number of segments called metameres. The anterior end of segment. Is stuctorial and several segments are fused to form a powerful sucking disc? The individual are bisexual development is direct without metamorphosis. The class of this phylum Hirudine (leeches) is either terrestrial, marine or fresh water dweller.

Leeches are either free living are permanently or intermittently parasite. They are either omnivorous carnivorous or hemovorous. The class has got several orders.

Order (1) Acanthobdellida
Parasite on fishes

Order (2) Rynchobdellida
a) Genera glossiphonia – parasite on snails and frogs b) Genera pisicola – on fresh water fishes c) Genera pontobdella – marine fish d) Genera branchialon – marine fish

Order (3) Heropdillida
a) Genera herpudella (nephelis) b) Genera orbodella c) Genera tracheta

Order (4) Gnathobdellida (medially important class)
a) Common leech – hirudina medicinalis b) Hirudina limnobdella – parasite on higher animals, vertebrate and molluscs c) Aulostoma – horse leech d) Haemadipsa – land leech

Haemopis Sanguisuga
Parasite on nasal mucosa of humans with serious consequences

Haemopis vorax
Horse leech: The hemovorous leech attacks and attach to the skin surface specially hidden areas i.e., axillary region, umbilicus interdigital area, anybod orifice, mouth, nostrils, pharynx, vulovagina, anus, ear and eye etc. Thus, in any bleeding disorder i.e., hematemesis, epistaxis or sanguinus tears, the leeches also be placed in differential diagnosis.

Conclusion
There are myriads of causes for bloody tears i.e., systemic disorder:

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taking regular doses of potassium will not prevent future attacks. Potassium is generally taken by mouth, but in a case of severe muscle weakness, the patient would need to receive it intravenously in a hospital. Another management tool for hypokalemic attacks is to eat a low-carbohydrate and low-salt diet. Medications such as acetazolamide (250-750mg/dl) have also been effective in preventing some attacks and have been effective even in patients with hyperkalemic periodic paralysis.

References