

Neurocysticercosis

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Sir, the recent article on neurocysticercosis is very interesting¹. Takayanagui raised many interesting points. First, Takayanagui noted that “the clinical manifestations of neurocysticercosis largely depend on the host immune response against the parasite”¹. In fact, there are many factors affecting the clinical presentation and immunity is one of those factors. For example, the anatomical site of infestation is also an important determinant for clinical feature. If the lesion is at vital structure or cause obstruction, the early clinical presentation can be expected whereas the silent infestation for a very long time can be seen in cases that the affected sites is a non-vital structure. Second, the use of antiparasitic drug

and its effectiveness and efficacy in neurocysticercosis is another point to be further discussed. Until present, Nogales-Gaete et al. noted that “evidence based medicine does not have a definitive answer about the treatment”². Nevertheless, the use of “cysticidal drugs” becomes the new hope for the management of neurocysticercosis³. According to the “report of the Guideline Development Subcommittee of the American Academy of Neurology”, Baird et al. noted that “albendazole plus either dexamethasone or prednisolone should be considered for adults and children with neurocysticercosis”⁴.

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