

## Images in Infectious Diseases

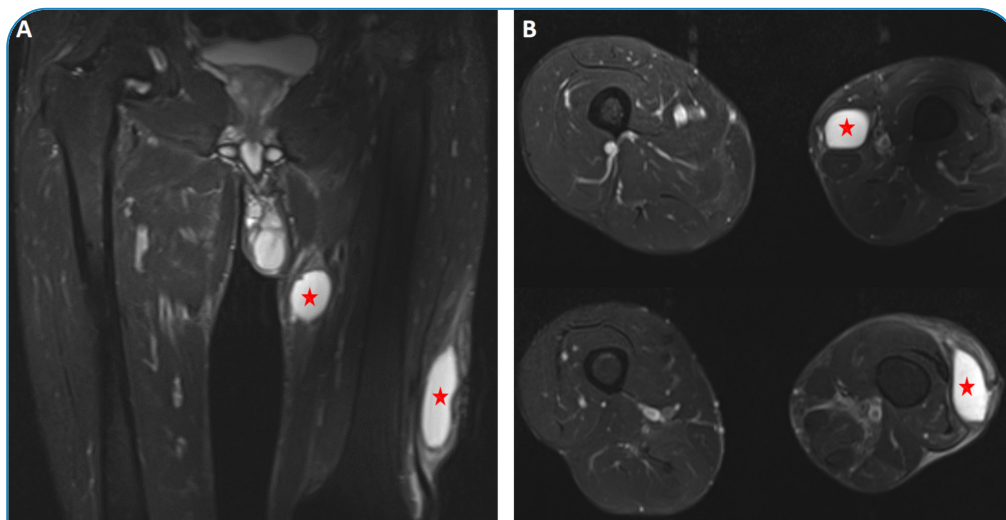
# Multiple primary hydatid cysts in the left thigh

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**FIGURE 1:** Coronal (A) and axial (B) fat-suppressed proton density MR images show lesions compatible with hydatid cysts 55 × 25 × 75 mm in the left knee superolateral part and 30 × 25 × 45 mm at the adductor muscle group plans (asterisks).

A 51-year-old male patient presented with erythema and swelling in the lateral part of the left knee. He had a history of working with livestock. Magnetic resonance imaging (MRI) showed lesions compatible with hydatid cysts in the superolateral part of the left knee and at the adductor muscle group plans (**Figure 1**). There was no hydatid cyst in the body except in the left thigh. Hydatid cysts were resected, and albendazole treatment (15 mg/kg/day) was administered for 3 months postoperatively.

Hydatid cysts, a zoonotic infection caused by *Echinococcus granulosus* larvae, is a zoonotic disease of major clinical importance<sup>1</sup>. Hydatid cysts are rare in muscle and subcutaneous areas<sup>2</sup>. MRI is considered the best technique for revealing daughter cysts and provides the most appropriate data for planning the surgical approach<sup>3</sup>. In painless, growing masses, a diagnosis of hydatid cysts

should be kept in mind, especially in endemic regions. If possible, total surgical excision should be performed in such patients.

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