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IMAGES IN EMERGENCY MEDICINE

Cutaneous larva migrans in England: a case in a returning traveller

Ravichandra Kelkar

A 17-year-old man presented with a history of insect bite to his right foot 1 week ago. He had recently returned to the UK from Kenya after a holiday. A serpiginous elevated tunnel-like erythematous skin lesion was seen on the sole of his foot (fig 1). The patient thought it was an insect and tried to lance it out himself (leaving two puncture holes as shown in the fig) but was unsuccessful. The clinical diagnosis was cutaneous larva migrans.¹

Cutaneous larva migrans—also known as ground itch or sandworm disease—is a dermatosis caused by accidental percutaneous penetration and subsequent migration of larvae of various nematode parasites.² The disease is restricted to the epidermis and is self-limiting; rarely pulmonary

Figure 1 Lesion on sole of foot caused by cutaneous larva migrans. Informed consent was obtained for publication of this figure.

eosinophilia and secondary bacterial infection can occur. Treatment is cryotherapy or anti-parasitic medication

with thiabendazole. The eruption generally disappears after 1–2 months, but may present for 6 months or longer.

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