LETTER TO THE EDITOR

Strongylodiasis in a mine worker

J. Wolters

Department of Internal Medicine, Atrium Medisch Centrum, Heerlen, the Netherlands, e-mail: j.wolters@atriummc.nl

To the Editor,

Papendorp *et al.* described a patient with disseminated *Strongyloides stercoralis* hyperinfection after steroid use. The case underscores the necessity of a complete travel history before starting high-dose steroids. I would like to point out that *Strongyloides* has also been endemic in areas outside the tropics and that just a travel history is insufficient.

At the former St. Jozef Hospital in Kerkrade (in the southern part of the Netherlands) we treated a 74-year-old man with intensive chemotherapy for a non-Hodgkin lymphoma in 1993. During this treatment the patient developed a disseminated *Strongyloides stercoralis* infection with microscopically confirmed larvae in the sputum.

He had never travelled to or lived in a tropical area. He was born in Poland and came as a young man to the Netherlands and had stayed all his life. However, he did work for many years in the Dutch coal mines. As the older staff physicians know, infection with *Strongyloides* was quite common in the coal mines. The conditions in the coal mines were favourable for *Strongyloides* due to the high temperature and humidity.

Although the last mines closed in 1974, there are still many elderly people who once worked in the mines and strongylodiasis should be kept in mind.

REFERENCE

 Papendorp S, Hasenack Meijer MK, Landman GW, van Westerloo DJ. What's crawling in this sputum? Neth J Med. 2013;71:85-8.