Capillaria philippinensis

Introduction
Intestinal capillariasis was first observed in the Philippines in 1963 and since then it has been noted, although less frequently in Thailand, with scattered reports from Taiwan, Japan, Egypt, and Iran.

Lifecycle
Human infection is initiated by the consumption of raw fish. The infective larvae are found in the intestine of the fish. When infective fish are eaten by humans, the larvae mature and the adult worms live in the intestinal mucosa, mainly in the jejunum, where they are usually present in large numbers. Larval stages, oviparous and larviparous females are also found in the host's intestine, which suggests that the nematode can multiply in the intestine resulting in auto-infection as in Strongyloides infection. The eggs are passed out in the faeces and embryonate in about 12 days. The eggs are ingested by fresh-water fish, hatch and develop into the infective form in the tissue of the fish.

Morphology
The adult female worm measures 2.5 - 4.3mm, whilst the males are marginally smaller measuring 2.3 -3.2mm. The eggs measure 45µm x 21µm, and resemble those of Trichuris but have less prominent polar plugs. They have a thick striated shell.

Clinical Disease

Symptoms are related to the worm burden. The most common findings are abdominal pain, diarrhoea and weight loss. Abdominal distension and oedema may also develop. If untreated, severe cases result in death in 4 to 7 months.

Diagnosis
Diagnosis depends on finding the characteristic eggs or larvae in the faeces.