

commercially in Europe but not in the United States. More recently, real-time PCR has been employed for diagnosis and follow-up of extraparenchymal disease.

Other major clinical/exposure criteria for neurocysticercosis include the presence of cysticerci outside the central nervous system (CNS) (e.g., typical cigar-shaped calcifications in muscle) or exposure to a tapeworm carrier or a household member infected with *T. solium*. Minor clinical/exposure criteria include residence in an endemic area or clinical symptoms suggestive of neurocysticercosis (e.g., seizures or obstructive hydrocephalus).

Studies have demonstrated that clinical criteria may aid in diagnosis in selected cases. In patients from endemic areas who had single enhancing lesions presenting with seizures, a normal physical examination, and no evidence of systemic disease (e.g., no fever, adenopathy, or chest radiographic abnormalities), the constellation of rounded CT lesions 5–20 mm in diameter with no midline shift was almost always caused by neurocysticercosis.

A definite or probable diagnosis is made in accordance with the criteria and combinations of criteria listed in the footnote of [Table 235-1](#). Patients may have CSF pleocytosis with a predominance of lymphocytes, neutrophils, or eosinophils. The protein level in CSF may be elevated; the glucose concentration is usually normal but may be depressed.

TREATMENT

***Taeniasis Solium* and Cysticercosis**

Intestinal *T. solium* infection is treated with a single dose of praziquantel (10 mg/kg). However, praziquantel occasionally evokes an inflammatory response in the CNS if concomitant cryptic cysticercosis is present. Niclosamide (2 g) is also effective but is not widely available.

The initial management of neurocysticercosis should focus on symptom-based treatment of seizures or hydrocephalus. Seizures can usually be controlled with antiepileptic treatment. If parenchymal lesions resolve without development of calcifications and patients remain free of seizures, antiepileptic therapy can