

Filarial Labial Chylorrhoea An Uncommon Problem in an Endemic Region

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A 15-year-old girl presented with history of wetting her underwear intermittently by milky white fluid for the past 2 years. Initially, there were small papular lesions that subsequently transformed into milky fluid-filled vesicles that ruptured intermittently. Discharge increased in the evening and after prolonged erect posture. There was no pedal edema and her physical development was normal.

Examination revealed many 1 to 5-mm whitish-yellow papulovesicular eruptions on both labia majora with thickening of the labial skin. Laboratory examination showed normal hematology, blood sugar, cholesterol, and creatinine. Aspirated fluid from vesicles was milky and its triglyceride level was 2.2 mmol/L. Abdominal computed tomography scan was normal.

Patient responded to treatment by diethylcarbamazine and dietary modifications (low fat with medium chain triglyceride). Compression garments were worn and hypertonic saline was administered over the labial lesions, as previously described by our group.⁽¹⁾

Filariasis has many different manifestations, including hydrocele and chyluria.⁽²⁾ In secondary chylous reflux, lymphatic vessels become obstructed and lead to incompetent valves, resulting in reflux into the lower limbs and the genitalia.

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