

# Genital myiasis, a rare case from rural Sabah

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## ABSTRACT

**Introduction:** Genital myiasis, a parasitic infestation by dipteran fly larvae, represents an uncommon clinical entity predominantly reported in tropical regions. This condition typically affects individuals with compromised hygiene, pre-existing cutaneous lesions, or immunodeficient states. Characteristic manifestations include localised tenderness, intense pruritus, and visible larval presence within affected tissues. **Case Description:** We present a case of labial myiasis in a 24-year-old healthy Rungus woman from the rural district of Kota Marudu, Sabah. The patient reported a 4-day history of perineal pain and swelling, which upon examination revealed active larval infestation. Approximately 120 live larvae were manually extracted, followed by daily debridement and a 7-day course of antibiotics. Due to significant tissue distortion from the infestation, labial reconstruction was performed on day 7. The patient recovered well, achieving complete wound healing within one-month post-intervention with no subsequent re-infection/infestation. **Discussion:** Consistent with existing literature, initial management involved meticulous wound debridement and larval extraction. Due to insufficient evidence supporting the topical application of turpentine or potassium permanganate on genital wounds, we cautiously placed turpentine-soaked gauze adjacent to the wound on day 2 post-extraction to induce a hypoxic environment for residual larvae, and subsequently, we found 3 dead larvae. An MRI abdomen and pelvis to observe the extent of infestation was performed but yielded inconclusive results. In retrospect, the novelty of this presentation led to a missed opportunity for species identification through larval sampling. We advocate for larval extraction followed by daily wound inspection and repeated extraction as needed, supplemented by broad-spectrum antibiotics (intravenous ampicillin-sulbactam 1.5 g QID for 7 days in this case). Persistent larvae were noted until day 3 post-intervention, and subsequent labial refashioning was done on day 7 due to tissue distortion. At the 6-week follow-up, the wound exhibited satisfactory healing.