

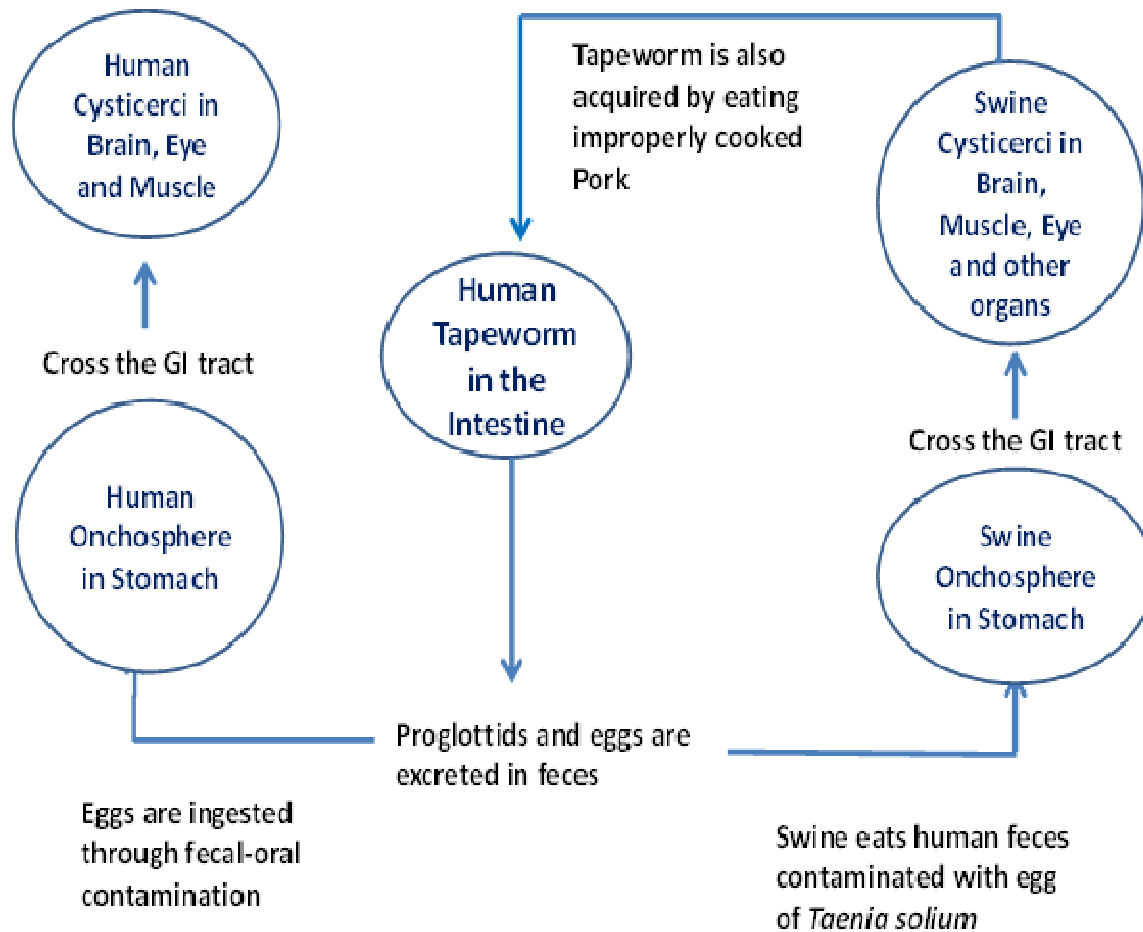


Figure 1: Schematic Representation of Life Cycle of *Taenia solium*

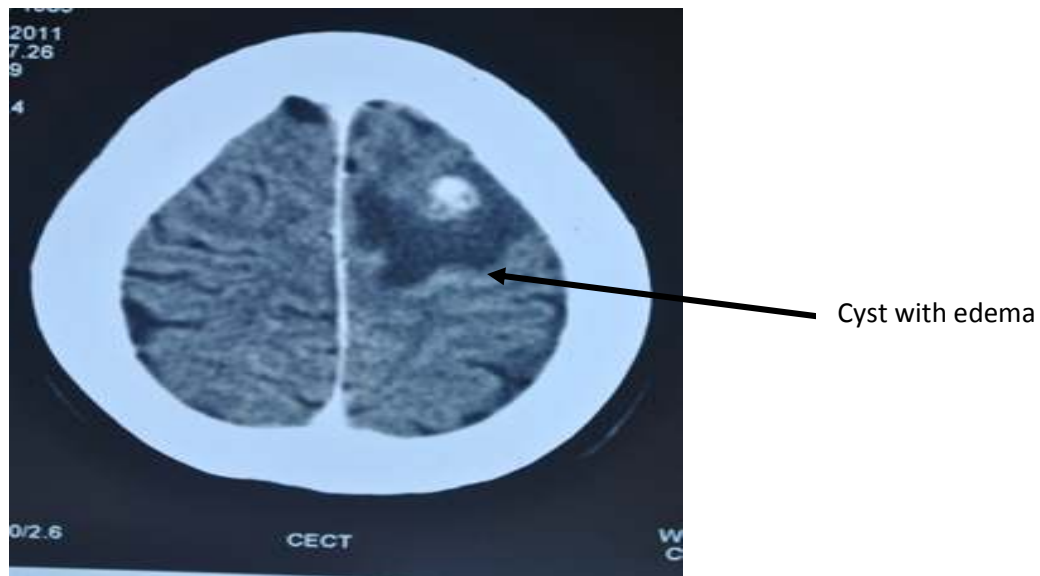


Figure 2: Schematic representation of single cyst with edema presents the brain.

Lesions seen in NCC

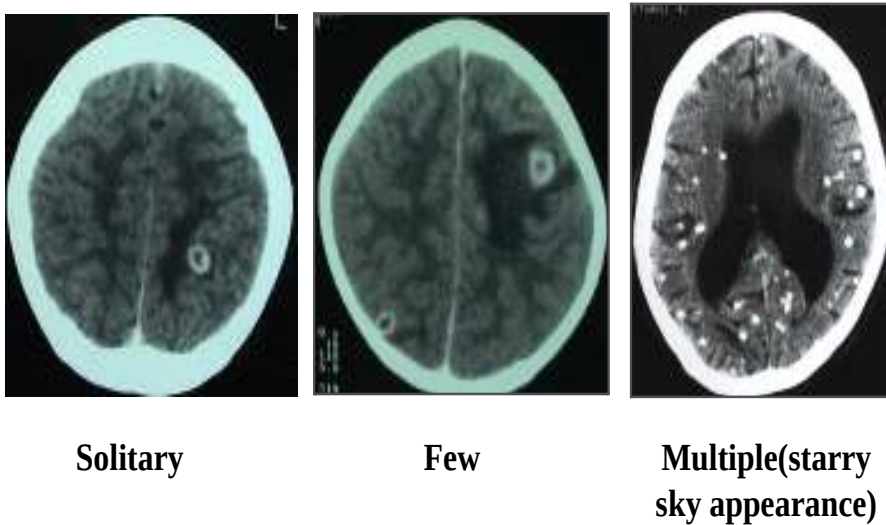


Figure 3 - CT-Scans of patient brains showing of a single (solitary), a few cysts and multiple cysts, respectively.

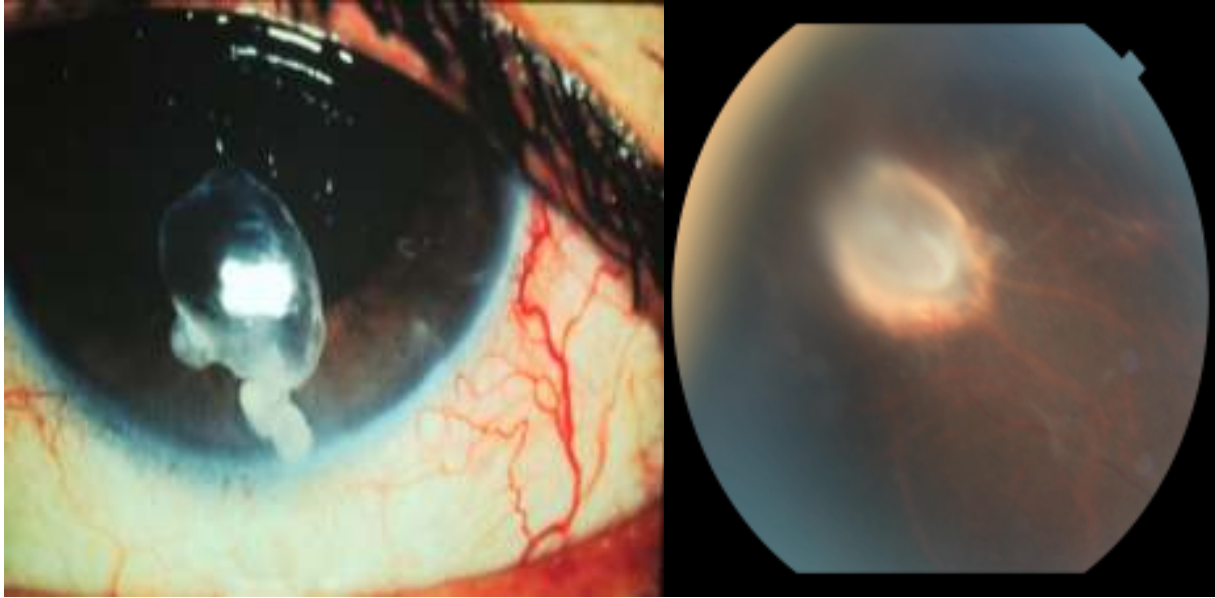


Figure 4: Optic cysticercosis in a patient diagnosed at Annapurna Neurological Institute and Allied Science, Kathmandu, Nepal



Figure 5: CT- Scan of calcified surface lesion in a patient diagnosed at Annapurna Neurological Institute and Allied Science, Kathmandu, Nepal

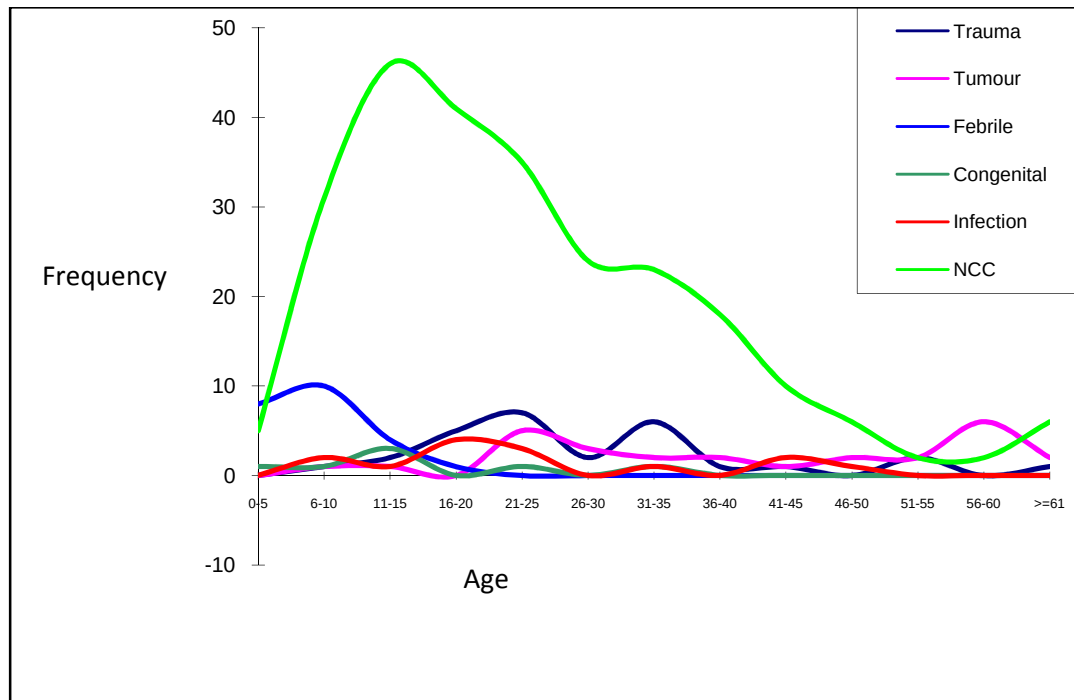


Figure 6: Occurrence of seizures in humans with age and factors that influence occurrence of seizures.

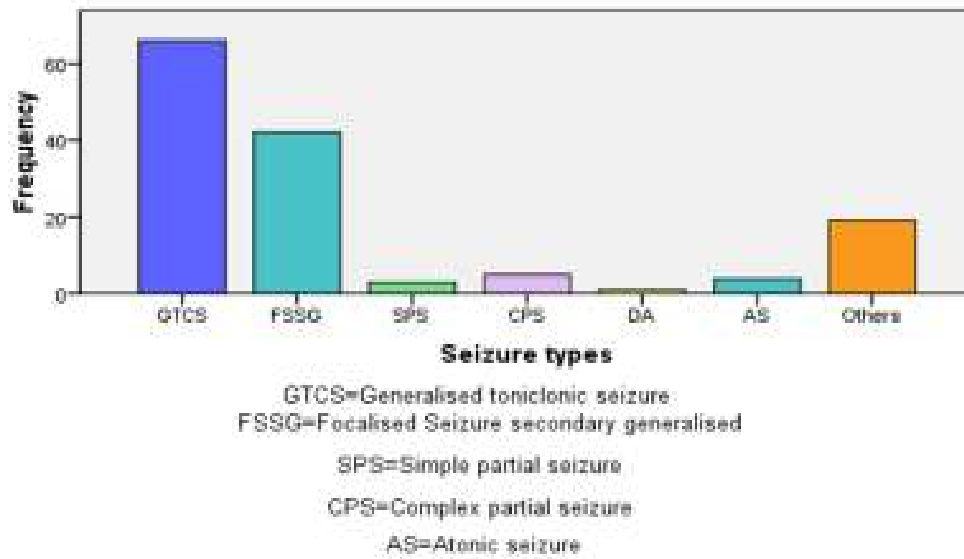


Figure 7: Frequency of various types of seizures (Sample size (n =250), Research conducted at ANIAS hospital, 2012-2012)

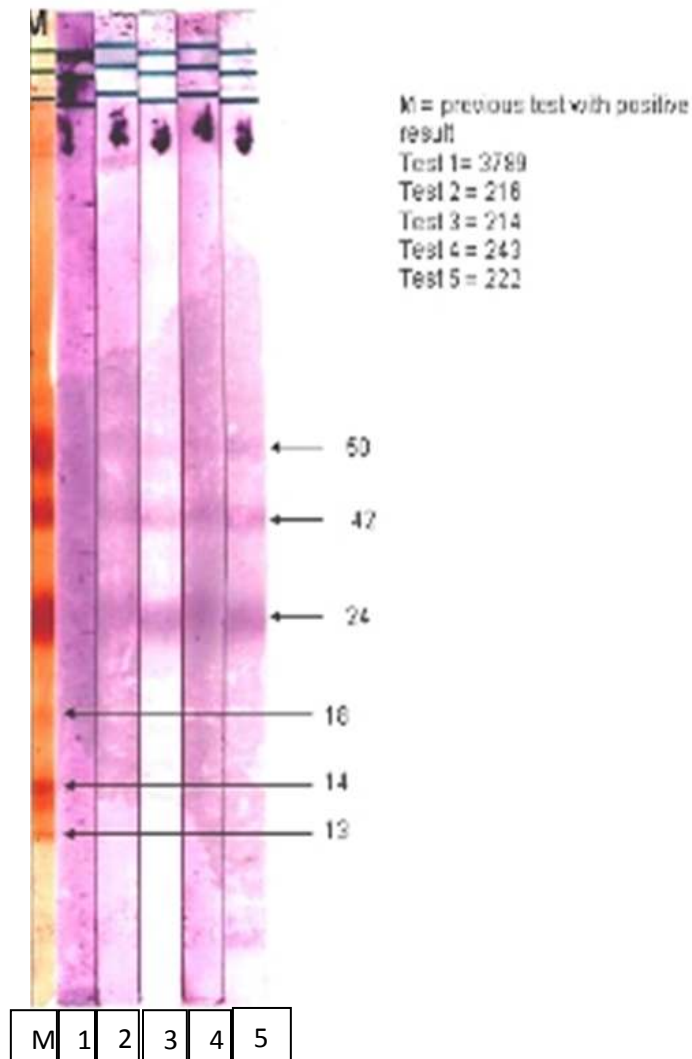


Figure 8: Enzyme linked immunoelectro transfer blot (EITB) assay: Lane M - showing *T. solium* specific antigenic bands corresponding to 13, 14, 16, 24, 42 and 50 KDa glycoproteins makers. Lanes 1 - 5 are representative test serum sample obtained from patients that were diagnosed with NCC by imaging techniques. Lane 1 shows no reactive bands.



Cyst in 4th Ventricle Pipette suction of cyst

Figure 9: Surgical removal (pipette suction method) of Cyst present in 4th ventricle