A 44-year-old male presented with history of vomiting, abdominal pain and weight loss of 2 months duration. On examination, he was emaciated and had fullness in the epigastric region. Oesophagogastroduodenoscopy showed pyloric stenosis and biopsies showed mixed infiltrate of chronic inflammatory cells with no dysplasia and *Helicobacter pylori* organisms. CT scan showed thickening of the antro-pyloric region with dilatation of the stomach. In view of gastric outflow obstruction, he underwent partial gastrectomy and roux-en-y gastro-jejunostomy. During gastrojejunostomy, 7 metres tape worm was extracted from jejunal enterotomy (figure 1 and video 1). Histopathology showed granulation tissue and fibrosis within the pylorus and duodenal wall. No features of malignancy was evident. Postoperatively the patient was treated with praziquantel. Tapeworms are parasites that belong to Class cestoda and known as cestodes. There were about 71 cases of infestation with beef and pork tapeworms in UK and wales in 2005.\textsuperscript{1} Since our patient does not consume pork, the cestode was likely to be beef tapeworm (*Taenia saginata*) and it is the most common tapeworm to infest humans. Transmission is via undercooked beef with cysticerci. Patients experience symptoms like nausea, vomiting, diarrhoea, abdominal discomfort, constipation and headache, dizziness or convulsions if neurocysticercosis present. Surgical complications like colonic perforation,\textsuperscript{2} intestinal obstruction\textsuperscript{3} and appendicitis\textsuperscript{4} due to tapeworms have been reported. The diagnosis can be made by investigations like stool microscopy, detecting *Taenia* eggs in the perianal region and immunoblot assay to detect IgG anticysticercal antibodies in serum, cerebrospinal fluid and saliva.\textsuperscript{5} Antihelmintics like praziquantel and niclosamide are effective for treating intestinal tapeworm infestation.\textsuperscript{6,7} Albendazole is used for treating neurocysticercosis.
