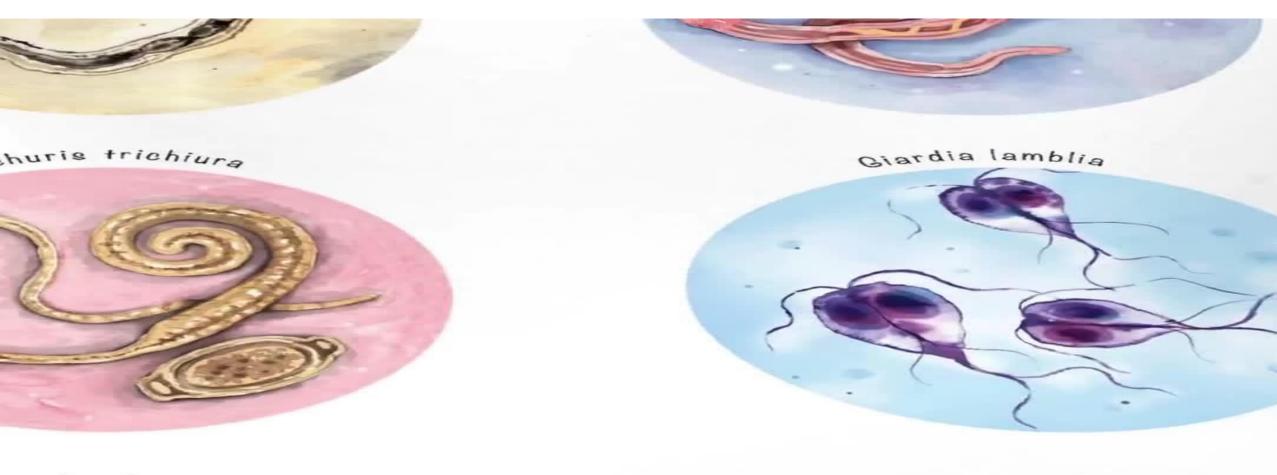
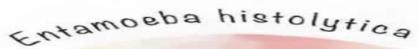
Parasitology

By prof. Hala Tabl



ris lumbricoides



Important Terms Used in Parasitology

Parasite: An organism entirely dependent on another larger organism

(Host) in order to have shelter and /or nutrition.

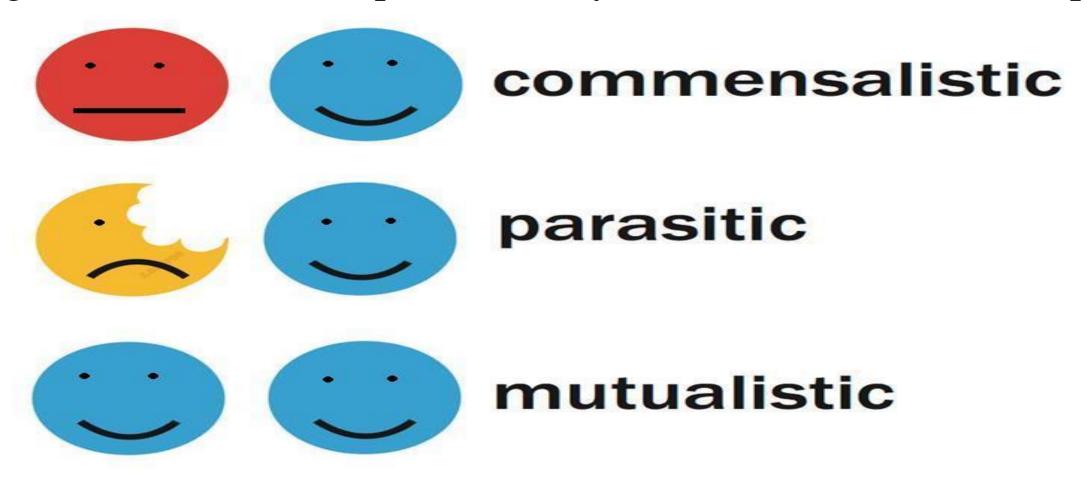
Parasitology: A science that deals with parasite.

Medical Parasitology: The study of parasites of medical importance

that is capable of causing disease in man.

Host Parasite Relationship

Symbiosis: a close and prolonged association between two organisms of different species. It may be one of three relationships:



Parasite



Permanent parasite (e.g. head louse)

Temporary parasite (e.g. bed bugs)



Parasite

Ectoparasite

(e.g. head louse)

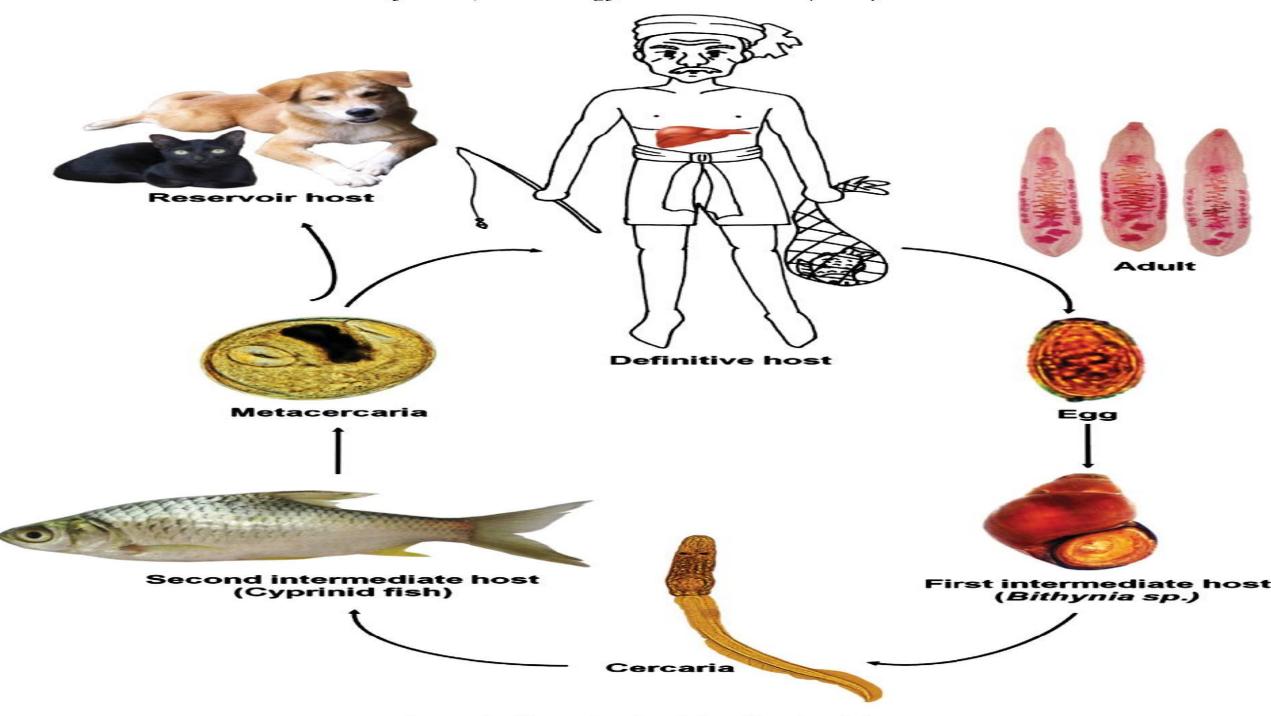
Endoparasite (e.g. *Entamoeba histolytica*)

Life cycle

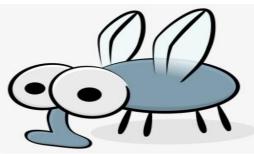
Host: That harbours the parasite.

- **Definitive host:** a host which harbours the adult stage, the most highly developed form of the parasite or sexually mature stage of a parasite.
- **Intermediate host:** a host which harbours sexually immature or larval stage of a parasite.
- **Reservoir host:** The animal that holds the same species of parasites as man, and constitutes a source of infection to man and ensures continuity of parasite life cycle.

- **Habitat:** The tissue or organ in which the adult stage of parasite exists in the definitive host.
- **Infective Stage:** The stage of parasite that capable of causing infection (entering the host and continue development within it).
- **Diagnostic Stage:** it is the stage of a parasite that can be detected in stool, blood, urine, sputum, CSF,... and used in diagnosis.



Vector



Any arthropod which transports a parasite from an infected to noninfected host.

Biological vectors: Vectors that are necessary to complete the life cycle of a parasite.

Mechanical Vectors: It is a passive carrier of parasites, not essential

in the life cycle.

- **Infection:** Invasion of the body by any pathogenic organism "except" arthropods.
- Infestation: The establishment of arthropods upon or within a host.
- Autoinfection: A situation where the infected individual acts as a

source of infection to himself.

• Zoonosis: Diseases of animals that are transmittable to man.

Classification of the medically important parasites Parasites Protozoa (helminths) (flagellates) (amebas) (sporozoans) (ciliates) (flatworms) (roundworms) Trematoda Cestoda (flukes) (tapeworms)



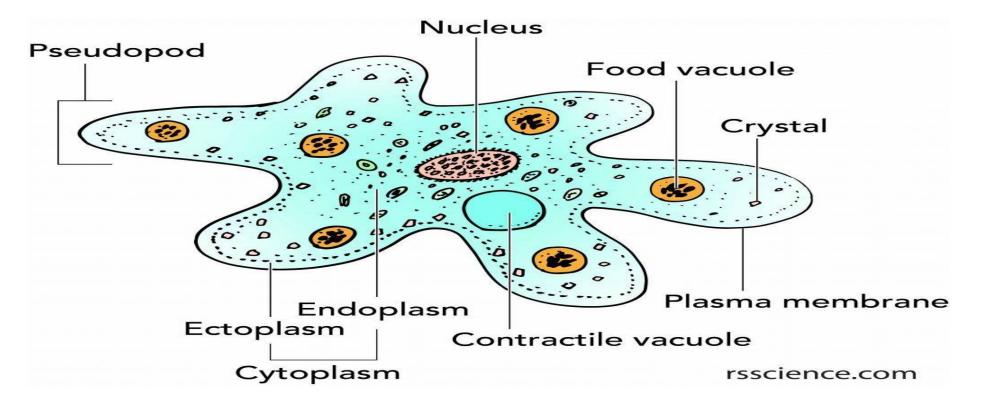


≻Unicellular organism.

Eukaryotic cell: - Has true nucleus surrounded with nuclear membrane.

- Has specialized membranous organelles (e.g. golgi

apparatus, endoplasmic reticulum, ...).



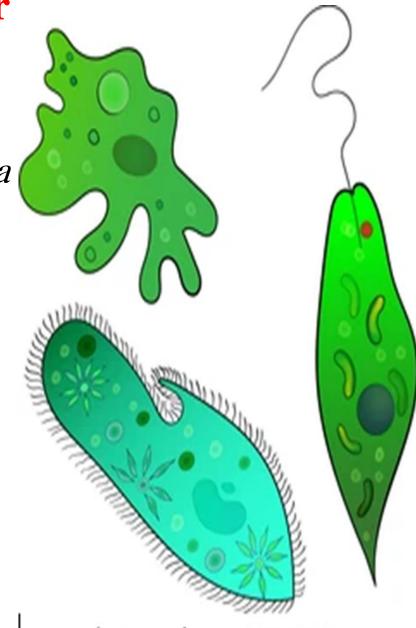
They are categorized according to their method of movements:

1- Amoeba: move by pseudopods e.g. Entamoeba

histolytica.

- 2- Flagellates: move by flagella e.g. Giardia lamblia.
- 3- Ciliates: move by cilia e.g. Balantidium coli.
- 4- Sporozoa: no organ of locomotion

(gliding motility). e.g. Plasmodium, Toxoplasma.



Medically important protozoa

Amoeba: Entamoeba histolytica Free living amoeba: Acanthamoeba, Naeglaria	Gastrointestinal tract Nervous system
Flagellates: Giardia lamblia Trichomonas vaginalis Hemoflagellates: Leishmania Trypanosoma	Gastrointestinal tract Urogenital tract Blood, Skin Blood, Nervous system
Ciliates: Balantidium coli	Gastrointestinal tract
Sporozoa: Cryptosporidium Cyclospora Isospora Toxoplasma Plasmodium	Gastrointestinal tract Gastrointestinal tract Gastrointestinal tract Nervous system, tissue Blood

A) Intestinal amoeba:

- > Pathogenic: Entamoeba histolytica.
- Commensals: Entamoeba dispar.
- **B) Free living amoeba:**
- > Acanthamoeba, Naeglaria:



They are opportunistic pathogens causing fatal meningo-enchephalitis in

Amoeba

immuno-compromised individuals.

Entamoeba histolytica

Morphology

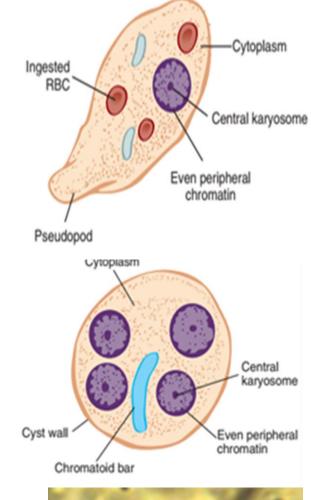
1) Trophozoite:

>It is the active motile feeding reproducing pathogenic stage.

Contains: Nucleus and food vacuoles.

2) The cyst form:

- \succ Trophozoites usually encyst before leaving the gut.
- ≻ Mature cyst is spherical, 4 nucleated cyst (quadrinucleate).





Life cycle

≻Definitive host: Man.

≻Habitat: Large intestine.

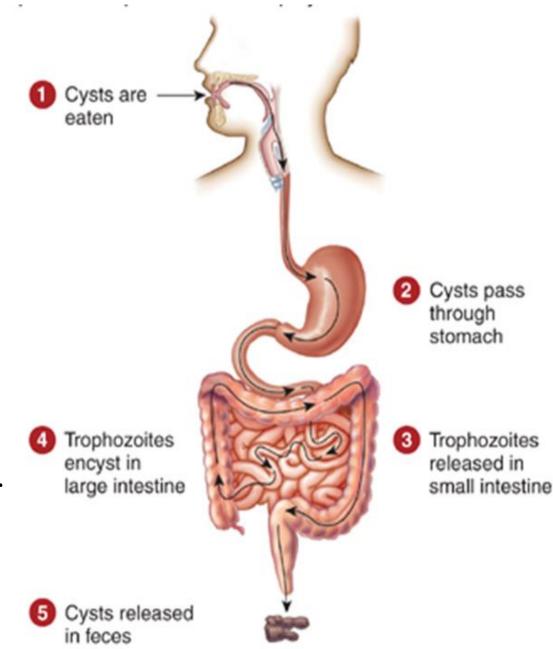
But may invade other tissues, reaching the circulation leading to extra-intestinal lesions.

► Infective stage: Four nucleated cyst.

≻Mode of infection: Ingestion of food or

drink contaminated with infective stage.

Diagnostic stage: Four nucleated cyst.



Amoebiasis

Trophozoites invade colonic mucosa, producing extensive ulceration. They may also invade the portal circulation and carried to the liver or, more rarely, to the lung, brain, or spleen.

- 1) Intestinal amoebiasis:
- a) Asymptomatic (cyst passers about 75%).

b) Acute amoebiasis (Amoebic dysentery): Fever, colic, tenesmus, bloody diarrhea.

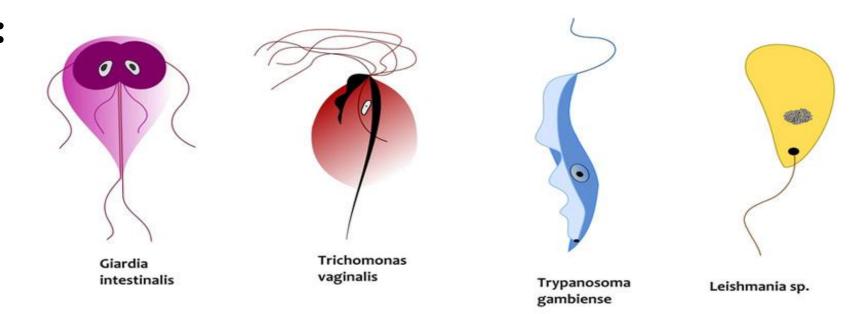
c) Chronic amoebiasis: There is diarrhea, abdominal cramps, flatulence, anorexia. The diarrhea is alternating with normality or constipation.

2) Extraintestinal: Amoebic hepatic, pulmonary, cerebral and renal abscesses.

Amebic liver abscess: right-upper-quadrant pain, fever, and a tender, enlarged liver.

Flagellates

- Intestinal Flagellates: Giardia lamblia.
- **Urogenital Flagellates:** *Trichomonas vaginalis.*
- > Hemoflagellates:
- Leishmania.
- Trypanosoma.



Morphology

1)Trophozoite:

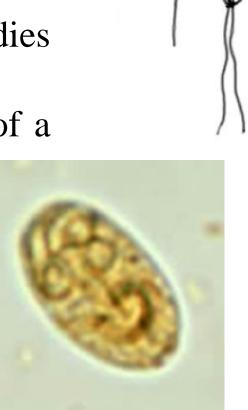
Pear shaped, has two nuclei and central parabasal bodies

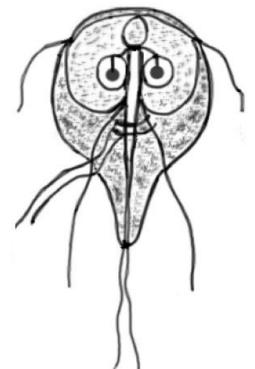
Giardia lamblia

and four pairs of flagellae giving it the appearance of a

face with two eyes, a mouth, hair and chin.

2) Cyst: Oval, 4 nucleated, develop in the colon.





Life cycle

Definitive host: Man.

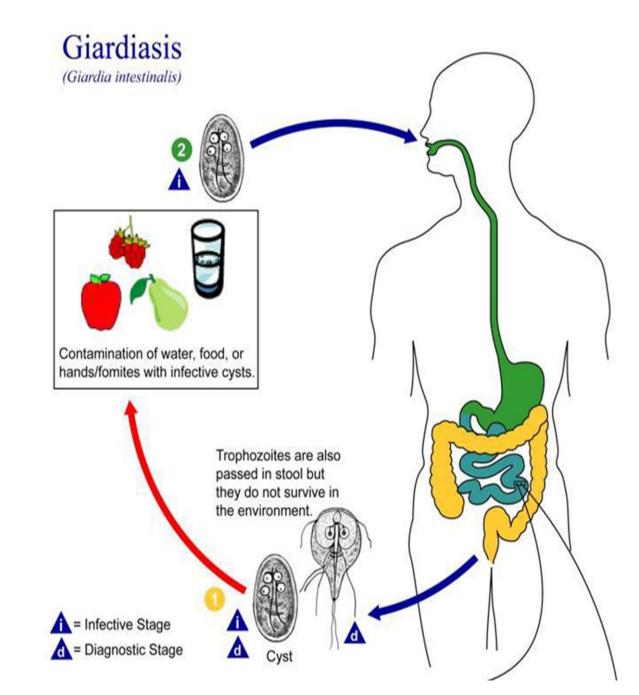
≻Habitat: Small intestine.

➤Infective stage: Four nucleated cyst.

≻Mode of infection:

Ingestion of food or drinks contaminated with infective stage.

Diagnostic stage: Four nucleated cyst.



Giardiasis

> Trophozoite attaches to the gut wall (not invade the mucosa /bloodstream)

—> inflammation of the duodenal mucosa —> malabsorption of protein and fat.

≻ Most cases are asymptomatic.

Symptoms range from mild diarrhea, flatulence, cramp-like abdominal pains

to steatorrhea (fatty diarrhea).

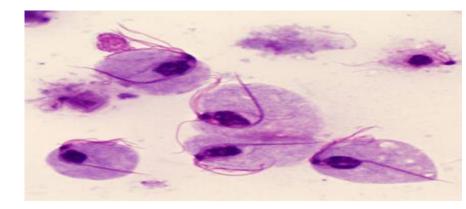
 \succ The stool is foul smelling, greasy in appearance and devoid of blood.

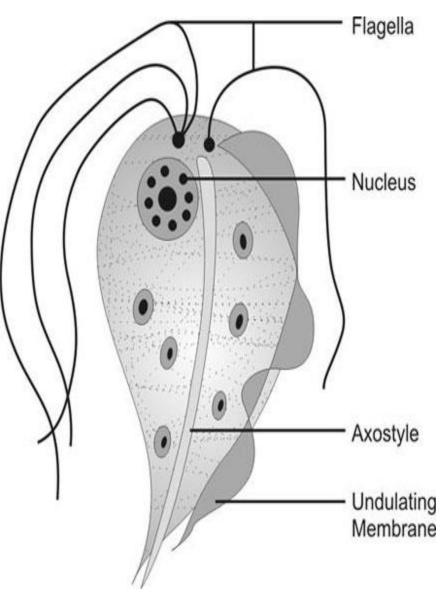
Trichomonas vaginalis

Morphology

- 1) **Trophozoites** are pear shaped, and have single nucleus, 3-5 anterior flagella, and
- undulating membrane bordered by flagellum.
- 2) No cyst stage, so infection occurs by

trophozoites.





Life cycle

- -Definitive host: Man.
- -Habitat: Urogenital tract of both

women and men.

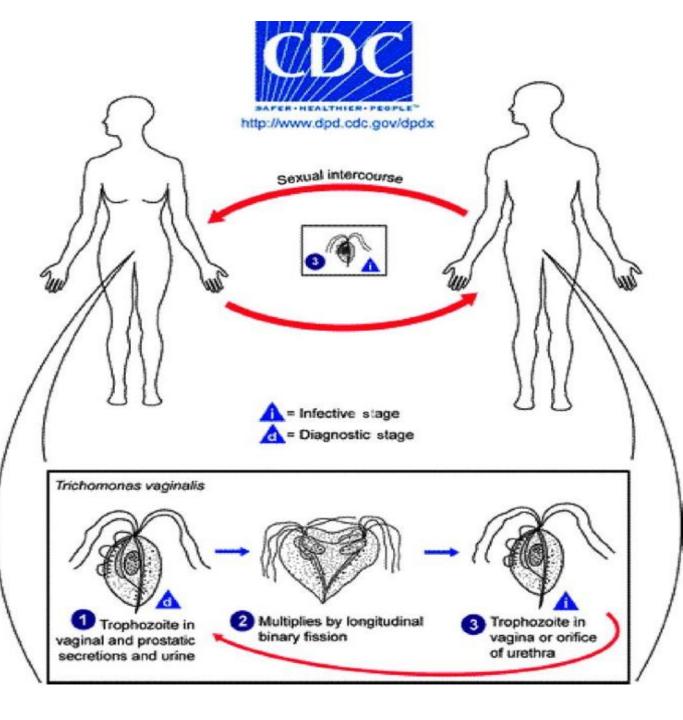
- -Infective stage: Trophozoite.
- -Mode of infection:

Sexual intercourse

less common through contaminated

toilet seats or towel.

-Diagnostic stage: Trophozoite.



Trichomoniasis

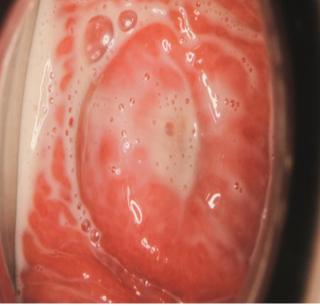
In women:

- Vaginitis in 70 % of infected women.
- Reddish vaginal mucosa & strawberry cervix.
- White or yellowish frothy discharge with a fishy smell.
- Vulvar pruritis.
- Dysuria and frequency.

In man:

- Mostly asymptomatic.
- Sometime it causes urethritis (frequency and dysuria).







Regarding amoebiasis, which of the following statements is TRUE?

A) The lesion is confined only to the intestine.

B) The normal habitat of the parasite is the small intestine.

C) The infection occurs by ingestion of food or drink contaminated with four nucleated cyst.

D)The infection occurs by penetration of the skin by trophozoite.

E) Trophozoites is the infective stage.

A 7-year-old child presented with diarrhea, flatulence and cramp-like abdominal pain. The child's stool appears fatty, greasy and foul smelling. An examination of his stool revealed pear-shaped, motile organisms. Of the following, which one is the most likely cause of this infection? A) Cryptosporidium hominis

B) Entameoba histolytica.

C) Giardia lamblia.

D) Trichomonas vaginalis.

E) Balantidium coli.

Which of the following statements concerning Trichomonas vaginalis is CORRECT?

a) It is transmitted sexually.

b) It can be diagnosed by visualizing the cyst stage in vaginal discharge.

c) It causes bloody diarrhea.

d) It causes vaginal thrush.

e) It is symptomatic in 70% of males.

