

Lecture 11

Malaria

- Additional Notes
- Important
- Explanation
- Examples

microbiology433@gmail.com

Life cycle

- Mosquito takes a blood and injects sporozoits
- Travel into hepatocytes & proliferate to form schizont. (inside the hepatocyte)
- Rapture of the schizont and releasing of the merozoites
- Merozoits penetrate RBCs & become trophozoites
- Proliferate inside the RBC to form schizont. (inside the RBC)
- Rupturing of scizont leads to onset of the symptoms (parasitemia)



Five species of malaria infects humans

- Plasmodium falciparum (quotidian¹, tertian² or irregular fever)
- Plasmodium vivax (tertian fever)
- Plasmodium ovale (tertian fever)
- ✓ Plasmodium malariae (quartan³ fever)
- ✓ Plasmodium knowlesi

Quitidian: fever recurring every day
Tertian: occurring every 2 days (48 hrs)
Quartan: occurring every 4 days

- Severe malaria: symptomatic malaria (usually in a patients with P.falciparum) in his blood (parasitaemia). And usually he has one or more of the following complications:
 - Cerebral malaria (Opisthotonus, unarousable coma)
 - ✓ Generalized convulsion
 - \checkmark Severe normocytic anemia
 - ✓ Hypoglycemia
 - ✓ Metabolic acidosis with respiratory distress
 - ✓ Fluid and electrolytes disturbance
 - ✓ Acute pulmonary edema and adult respiratory distress syndrome
 - ✓ Jaundice
 - \checkmark Haemogliniuria (blackwater fever) \rightarrow Acute renal failure
 - \checkmark Circulatory collapse \rightarrow Shock
 - Hyperparasitaemia (immunocompromised)
- Non-severe (uncomplicated) malaria: symptomatic infection with malaria parasitaemia without sign of severity and evidence of vital organ dysfunction.

Laboratory

- Microscopy:
 - The gold standard for diagnosis of malaria.
 - Used for identify parasite density, species diagnosis & monitoring response to treatment.
- Rapid diagnostic tests detect malaria antigens

