

Lecture 4

Intestinal Helminths

- Additional Notes
- Important
- Explanation
- Examples

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HELMINTHS

- Multicellular
- Types:

A.Round worms (Nematodes)

- Elongated, cylindrical, unsegmented.
- \checkmark Its size < 1 -100 cm. long
- \checkmark male is smaller than female
- Located: Intestinal & Tissue nematodes

Treatment for most of the Intestinal nematodes: Albandazole , Mebendazole

B. Flat worms

- Trematodes: leaf-like, unsegmented.
- Cestodes:
 - ✓ tape-like, segmented.
 - ✓ Treatment:
 - Intestinal stages: Praziquantel
 - Tissue stages (Hydatid, cysticersosis):

Depends on clinical condition : Surgical and/or Albendazole

A. Round worms (Nematodes) 1)Enterobius (Oxyuris) vermicularis (Thread worm or Pinworm)



	About this worm	Life cycle	Infective stage	Pathology	Diagnosis
•	Common in temperate regions Children > adult	$\begin{array}{llllllllllllllllllllllllllllllllllll$	 ✓ pruritus ani ✓ Females: in valvovagin 	CELLULOSE ADHESIVE TAPE around the anus	
:	naked eye asymptomatic Autoinfection		Diagnostic stage	tis, salpingitis	examine for eggs.
	occurs by contamination of the fingers	perianal itchiness → Autoinfection OR Contaminate other human	Eggs		



2) Ascaris lumbricoides (roundworm)

About this worm	Life cycle	Infective stage	Pathology	Diagnosis
 commonest in the small intestine, Jejunum and Upper part of 	commonest in the small intestine, Jejunum and Upper part of ileum.Embryonated eggs ingested from contaminated soil \rightarrow hatch in small intestine \rightarrow larvae invade intestinal wall \rightarrow enter bloodstream and transported to lungs \rightarrow enter alveoli and 	Embryonated egg	 Adult worm Light → Asymptomatic Heavy→ intestinal obstruction Migrating → bile duct -jaundice Larvae 	 ✓ Eggs or adult in stool. ✓ larvae in sputum.
 ileum. Feed on semi digested food → host 		Diagnostic stage		
malnutrition		Fertilized egg	Loeffler`s syndrome ⁽¹⁾	

(1) Pneumonitis and bronchospasm, cough with bloody sputum, eosinophilia, urticaria

3) Trichuris trichiura (Whipworm)



About this worm	Life cycle	Infective stage Pathology		Diagnosis
 coexists with Ascaris because of 	The fertilized eggs are passed with the stool→In the soil, the eggs become	Embryonated egg	light infection → asymptomatic.	 ✓ Eggs in stool. haracterized by its barrel shape with
similar requirement Adult live in large intestine	infective in 15 to 30 days →After ingestion (soil- contaminated hands or food), the eggs hatch in	Diagnostic stage	 heavy infection→ ✓ Abdominal pain ✓ Bloody 	mucoid plugs at each pole (American football shape)
especially caecum and appendix	especially caecum and appendix The females begin tooviposit 60 to 70 days after	Fertilized egg	diarrhea. ✓ Rectal prolapsed in children is a common complication.	



4) Ancylostoma dudenale^w world wide^w & Necator americanus ^w in America^w (Hook worms)

About this worm	Life cycle	Infective stage	Pathology	Diagnosis
 Found in small intestine mainly jejunum. Mouth lined with hard 	Filariform Larva in the soil penetrate the skin (1) \rightarrow go to the circulation (lungs ⁽²⁾) \rightarrow larva then swallowed and go to small	orm Larva in the enetrate the skin go to the lation (lungs (2)) \rightarrow then swallowed go to small	 Adult worm Low → Asymptomatic High → ✓ Epigastric pain, vomiting , hemorrhagic enteritis. ✓ hypoproteinaemia edema Larvae 	 ✓ egg in stool. ✓ Positive occult blood.
hooks,	the mucous membrane	stage	(1) Site of infection on the skin \rightarrow itching & dermatitis	
cutting plates and anticoagula nt glands	Ingularwhere they mature into adult→ female_startsItingadult→ female_startsItes andlaying eggs to be passed in stool(not infective) in soil →Rhabiditiform larva→ Filariform Larva	Egg	 skin→ itching & dermatitis (2) Migration Phase → cough with bloody sputum, pneumonitis Anemia → sever anemia = microcytic hypochromic anemia 	

5) Strongyloides stercoralis



About this worm	Life cycle	Infective stage	Pathology	Diagnosis
 in tropical area. fatal disseminatio n in immuno- 	 Direct development: The rhabiditiform larva pass from stool and become directly a Filariform larva if the environment of the soil is good Indirect development 	Filariform Iarva	 Filariform larva Cutaneous Dermatitis in case of external autoinfection. Migration pneumonitis Intestinal diarrhea, upper abdominal pain in the epigastria Disseminated strongyloidiasis in patient with immunodeficiency⁽¹⁾ 	 ✓ Stool examination ✓ Duodenal aspirate
compromise d host The smallest AUTOINFECTI	 In external environment habidition Iarva becomes free living adults, produce eggs, rhabiditiform larva and Filariform larva AUTOINFECTION Is very portant teria Internal: when the rhabiditiform larva in the intestine and penetrate the intestine ✓External : fecal contamination of skin rhabiditiform larva → filariform 	Diagnostic stage		
ON Is very important criteria		Eggs		

(1) Uncontrolled diarrhea \rightarrow granulomatous changes \rightarrow necrosis \rightarrow perforation \rightarrow peritonitis \rightarrow death.

B. Cestodes : (Tapeworm) 1) Taenia saginata



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About this worm	Life cycle	Infective stage	Pathology	Diagnosis
 obligatory parasite of man adult worm 	1.CATTLE become infected by ingesting grass contaminated with eggs or gravid segments which passed from human faces	Undercooked Beef with CYSTICERCUS BOVIS Asymptomatic Malnutrition, abdominal	 ✓ majority Asymptomatic ✓ malnutrition, abdominal 	stool: proglottids, eggs.
live in the Small intestine .	 2.In the cattle go to circulation and transformed to cysticercus stage in the muscle known as CYSTICERCUS BOVIS. 3.Man become infected by eating undercooked beef, the adult worm lives in small intestine → passing eggs and gravid segments to the environment. 	Diagnostic stage eggs or gravid segments	discomfort	



2) Taenia solium

About this worm	Life cycle	Infective stage	Pathology	Diagnosis
 In pigs & human 	Adult worm in S.I of human \rightarrow pass eggs & segments with the stool \rightarrow ingested by pigs \rightarrow formation of Cysticercus bovis in the pigs muscle humans ingest eggs from infected feces (vs. larvae in pork) \rightarrow eggs hatch into oncospheres in small intestine \rightarrow oncospheres penetrate intestinal wall and travel to other tissues \rightarrow form cysticerci containing larvae, especially in brain, skeletal muscle, and eye.	Undercooked beef Diagnostic stage eggs or gravid segments	cysts grow slowly → neurologic defects (seizures, focal symptoms) or blindness → when cysts die after several years, increased inflammation → aggravated symptoms	



3) Echinococcus granulosus

About this worm	Life cycle	Infective stage	Pathology	Diagnosis
 echinococcosis or hydatid cyst disease 	chinococcosis eggs found in dog feces Egg hydatid cyst \rightarrow humans ingest eggs sease \rightarrow eggs hatch into Dia	Eggs	organ dysfunction: liver →	 Imaging ✓CT ✓MRI
	larvae in small intestine \rightarrow larvae penetrate intestinal wall and travel to other tissues \rightarrow form hydatid cysts in liver, lung, or brain	stage Hydatid cysts	enlarged cyst may also rupture	 Microscopy: Hyadtid sand Serologic tests to detect specific antibodies





Quiz

1. A 6-year-old boy, came to the GP to complete his school screening. GP found weird perianal, white areas. From history the boy has not had any pain or diarrhea or other symptoms except itching. Which technique should the doctor use to collect the biopsy and conform his hypothesis?

a) stool sample & egg presence will confirm his diagnosis

b) blood, and +ve occult test c) scotch tape and examination for the egg

2. Loeffler's syndrome is associated with which of the following organisms?

a. strongyloiodes srecoradis b. oxyuris

c. ascaris lumbericoides

d. ancylostoma duodenale & necator americanus

Quiz

3. Anemia could be a complication for which of the following infections?

a. Strongyloiodes srecoradis b. Ascaris lumbericoides

c. Oxyuris d. Ancylostoma duodenale & necator americanus

4. Two drugs used in almost all the nematodes GIT infection:

a. Albendazole & Mebendazole b. Oxoplasma & Albendazole

c. Albendazole & Cryptosporidium d. Zithromax & Cryptosporidium