# BLOOD AND TISSUE PARASITES

#### **Microbiology Practical Class**



## MALARIA



## > LABORATORY DIAGNOSIS OF MALARIA

#### **Malaria Can Be Diagnosed Commonly By:**

#### 1- MICROSCOPY (LIGHT MICROSCOPE):

Uses a blood smear to identify whether parasites are present in the patient's blood.

- Thick film: for screening
- **Thin film**: for different spices identification

#### 2 - RAPID DIAGNOSTIC TESTS (RDTs):

**RDTs** are quick tests for screening that use a drop of blood from the finger tip to identify whether parasites are present in the patient or no.

#### 3- SEROLOGY

#### 4- PCR

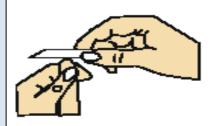
#### > LABORATORY DIAGNOSIS OF MALARIA

#### LIGHTMICROSCOPY

#### 1- Preparing blood film (Thick & Thin)







Touch the blood drop with a clean slide.



Take this slide and hold the edge that has the blood drop at an ~45° angle against the surface of the first slide. Wait until the blood completely spreads along the edge of the second slide.



Using the corner of another slide, spread the blood drop into the shape of a circle or square of ~1cm<sup>2</sup>.



While holding the second slide at the same angle, rapidly and smoothly push the slide forward.



Gently squeeze the patient's finger again, and touch the edge of a clean slide to the newly formed blood drop.



Write the identification number on the slide. Wait until the thick film is completely dry before staining it.

#### LIGHTMICROSCOPY



#### 2- Video showing Preparing of Thin and Thick blood film

https://youtu.be/aEAXYJ7XaCg

#### LIGHTMICROSCOPY

#### 3- Interpreting Thick and Thin Films

#### **THIN FILM**



- fixed RBCs, single layer
- smaller volume
- good for species identification
- requires more time to read

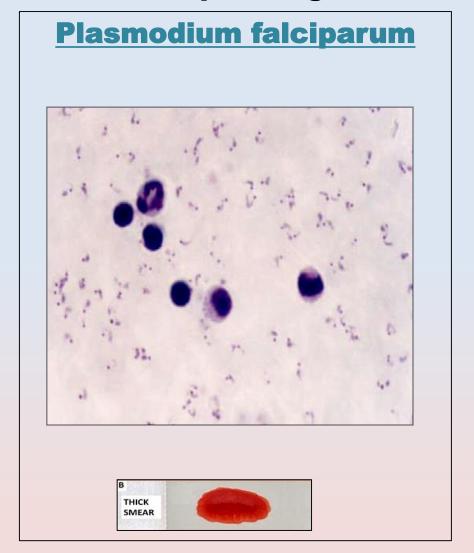
#### THICK FILM

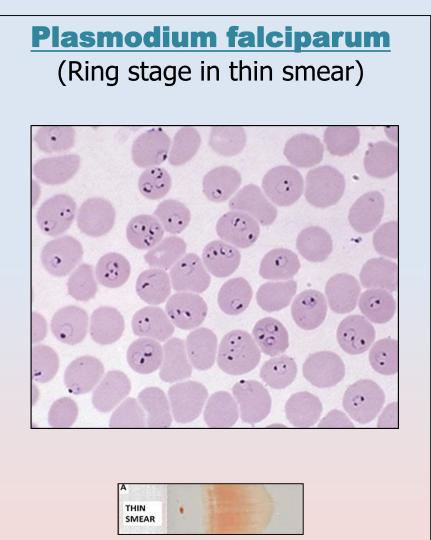


- lysed RBCs
- larger volume
- good screening test
- positive or negative

#### LIGHTMICROSCOPY

#### 4- Microscopic image for Thick film VS Thin film



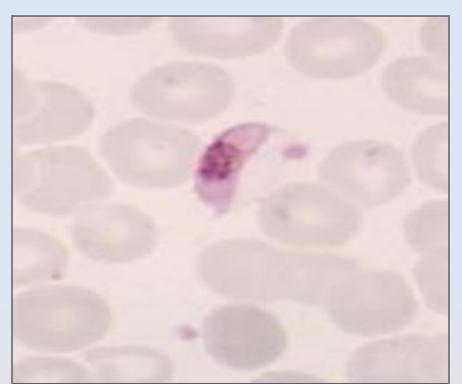


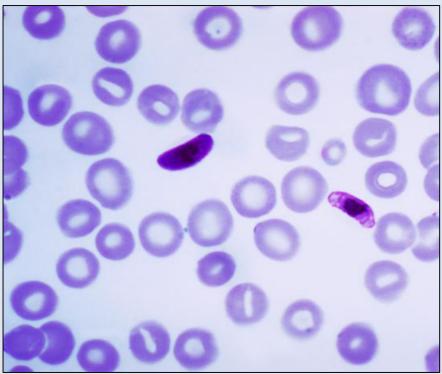
### LIGHTMICROSCOPY DIAGNOSIS

### 5- Species of Malaria (*Plasmodium Spices)* is identified by its characteristic microscopic appearance:

Species Stage	Falciparum	Vivax	Malariae	Oval
Ring Stage		3	0	
Trophozoite	0	1	(FEST)	-
Schizont				
Gametocyte				

#### LIGHTMICROSCOPY





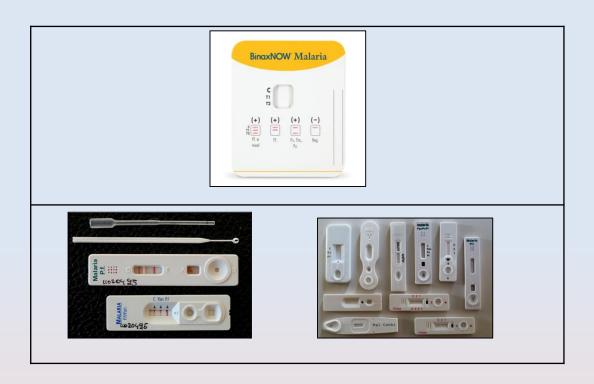
#### Plasmodium falciparum

#### **Gametocyte stage in thin smear**

(characteristic banana-shaped or crescent –shaped gametocyte stage in thin smear)

#### RAPID DIAGNOSTIC TESTS (RDTs)

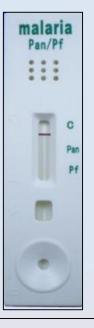
#### 1- The RADTs Test (for screening)



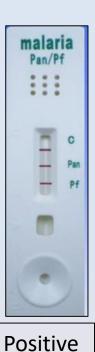
#### > LABORATORY DIAGNOSIS OF MALARIA

#### **LIGHTMICROSCOPY**

#### **3- RADTs Result**



Negative



## LEISHMANIA



## > LABORATORY DIAGNOSIS OF LEISHMANIA

# Leishmania Can be Diagnosed Commonly By:

- Microscopy (Light Microscope)
- Culture in NNN Medium

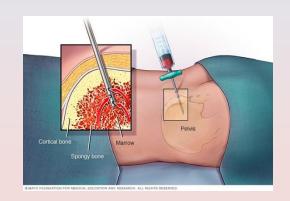
#### **Used Samples:**

- Bone Marrow aspirate
- Splenic aspirate
- Lymph node
- Biopsy

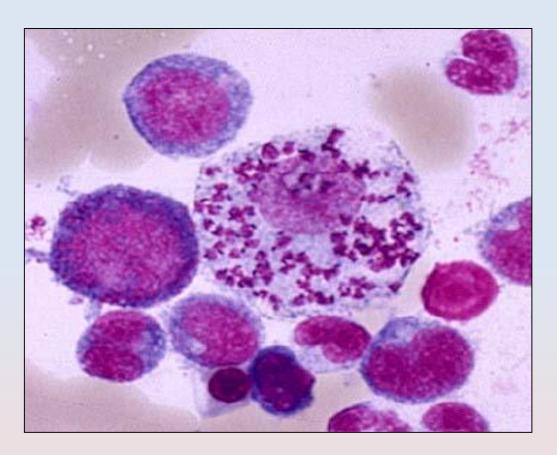
# >LABORATORY DIAGNOSIS OF LEISHMANIA



**Bone marrow aspiration** 



# >LABORATORY DIAGNOSIS OF LEISHMANIA



**Bone marrow aspirate** 

(Amastigotes)

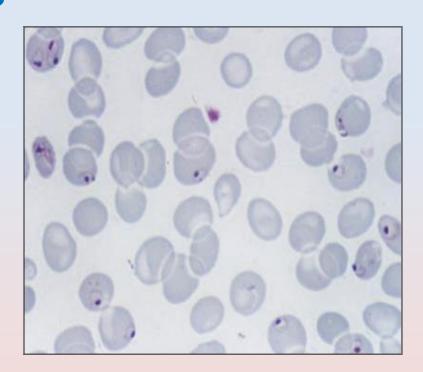
#### Case1:

A 25 year-old male from India, who came 3 months ago was admitted in KKUH with a history of severe anaemia and intermittent high grade fever for the last two months not responding to antibiotics.

#### WHAT IS THE DIAGNOSIS?

Malaria or *Plasmodium Falciparum* 

### Mention other way for diagnosis? RADTs, Serology or PCR

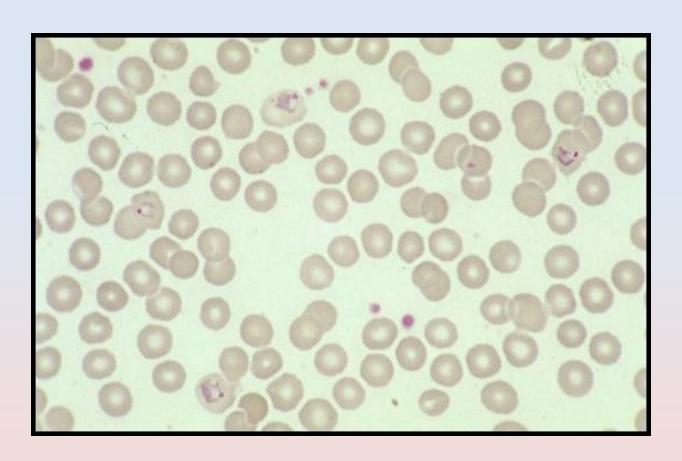


#### Case2:

A businessman who makes frequent trips to Thailand, presents with intermittent fever.

#### WHAT IS THE DIAGNOSIS?

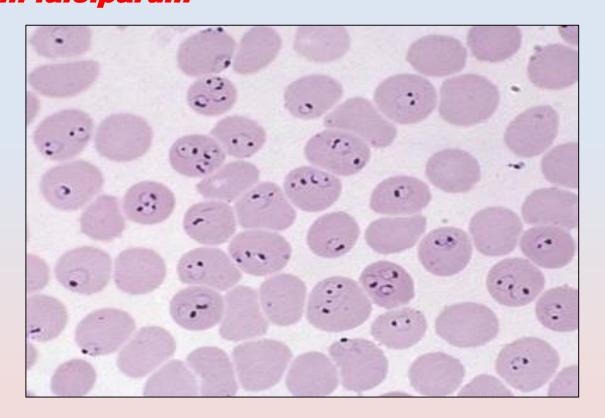
#### Malaria or *Plasmodium spices*



#### Case3:

A student in KSU who returned three weeks from vacation in Africa , he developed intermittent fever last week and lost consciousness a short time ago.

WHAT IS THE DIAGNOSIS?
Malaria
WHAT IS THE PATHOGEN?
Plasmodium falciparum



#### Case4:

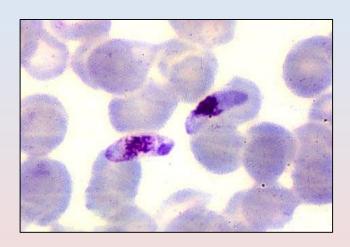
The patient was then treated with schizontocidal antimalarial drugs, a follow-up blood film is shown.

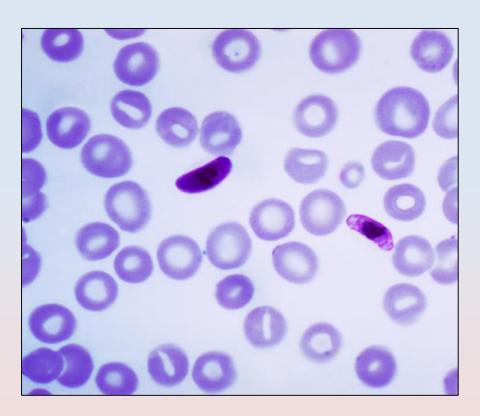
#### NAME THE PARASITE?

#### Plasmodium falciparum

#### **IN WHAT STAGE?**

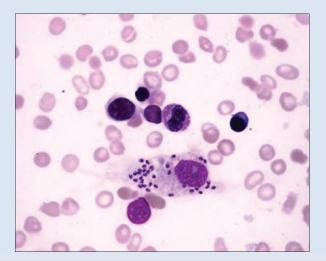
#### **Gametocyte stage**

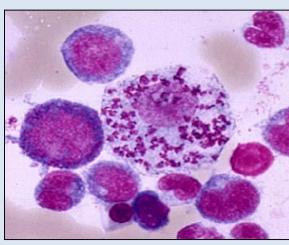


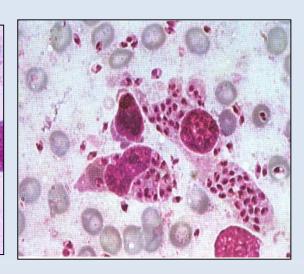


#### **Case 5:**

A 7 year old child presented with anemia, hepatospenomegaly and fever. Not responding to antimalarials and antibiotics. Bone marrow aspirate smear is shown:







### WHAT IS THE DIAGNOSIS? Viseral Leishmania

### **IDENTIFY THE PARASITE STAGE? Amastigote Stage**