4-Strongyloides stercoralis

Strongyloides stercoralis is a <u>human pathogenic</u> <u>parasitic</u> <u>roundworm</u> causing the disease strongyloidiasis.

The common name of *Strongyloides stercoralis* is <u>threadworm</u> or <u>dwarf threadworm</u>.

- Threadworm term refer to Strongyloides stercoralis and Enterobius vermicularis (Pinworm)
- **Dwarf threadworm term refer to Strongyloides stercoralis** only.
- Dwarf tapeworm term refer to *H. nana*.
- Target organ of *Strongyloides stercoralis* in humans (the adult parasitic stage lives) in tunnels in the <u>mucosa</u> of the small <u>intestine</u>.

Life cycle

Q: How many types of life cycle of *Strongyloides stercoralis* find ?

Three **types of life cycle :**

1- free-living {heterogenic, is advantageous to parasite because it allows reproduction for

one or more generations in the absence of a host }.

2- parasitic cycles { <u>homogenic</u>}

3- autoinfection.

Q: Explain the free-living life cycle of *Strongyloides stercoralis*.

In the free-living cycle, adults that mate the female lays eggs first-stage larvae

(L1) transform into infective larvae via three molts The males and females die after one

generation The larvae develop into free-living adults or develop into infective larvae.....

The larvae penetrate the human host <u>skin</u> to initiate the parasitic cycle.

- Infective stage: (L3) larvae in soil

- Diagnostic stage: (L1) larvae in stool

Q: Explain the parasitic life cycle of *Strongyloides stercoralis*.

The infectious larvae penetrate the skin when it contacts soil enter the superficial veins blood lungs, alveoli......coughed up and swallowed into the gut..... small intestine mucosa of the <u>duodenum</u> and jejunum.... molt twice and become adult female <u>worms</u> live in the <u>epithelium</u> of the small intestine.... by <u>parthenogenesis</u>..... produce eggs.... yield larvae...... Only females will reach reproductive adulthood in the intestine..... Female strongyloids reproduce through parthenogenesis..... The eggs hatch in the intestine and young larvae are then excreted in the feces.

- By parasitic life cycle, S. stercoralis can cause both respiratory and gastrointestinal symptoms.

Q: Explain the autoinfection life cycle of Strongyloides stercoralis.

The infected larvae penetrate either the intestinal mucosa (internal autoinfection) or the skin

of the perianal area (external autoinfection).... the lungs the bronchial tree the pharynx

<u>....</u> <u>small intestine</u> mature into adults.

- Autoinfection in humans with helminthic infections is recognized only in <u>Strongyloides</u> <u>stercoralis</u> and <u>Capillaria philippinensis</u> infections.

In the case of *Strongyloides*, <u>autoinfection</u> may explain the possibility of <u>persistent infections for many</u> <u>years in persons</u>. Because of autoinfection, humans have been known to still be infected up to <u>65</u> <u>years</u> after they were first exposed to the parasite



Common in tropical countries

Risk factors



Human T-cell lymphotrophic uirus - 1 infection

Steroid, immuno suppressive therapy

Organ transplants

Institutionalized population

strongyloidiasis

LIFE CYCLE

A parasitic disease caused by nematodes or roundworm, in the genus Strongyloides

Free living adult

worms

Filariform laruae

Rhabditiform develop

into infective filariform

Rhabditiform hatch

penetrate skin

from eggs

Eggs from

female worms

Infective Filariform laruae in intestine become adults

Adult female worm in the intestine



Rhabditiform to filariform in large

Autoinfection

intestine ; penetrate intestinal mucosa & migrate to other organs

Egg deposited in intestinal mucosa, hatch & migrate to lumen

Rhabditiform laruae excreted in stoo



Symptoms

1-Many people infected are asymptomatic at first. Symptoms include <u>dermatitis</u>: swelling, itching, <u>larva currents</u>, and mild hemorrhage at the site where the skin has been penetrated.

2- If the parasite reaches the lungs, the chest may feel as if it is burning, and wheezing and coughing may result, along with pneumonia-like symptoms (Löffler's syndrome).

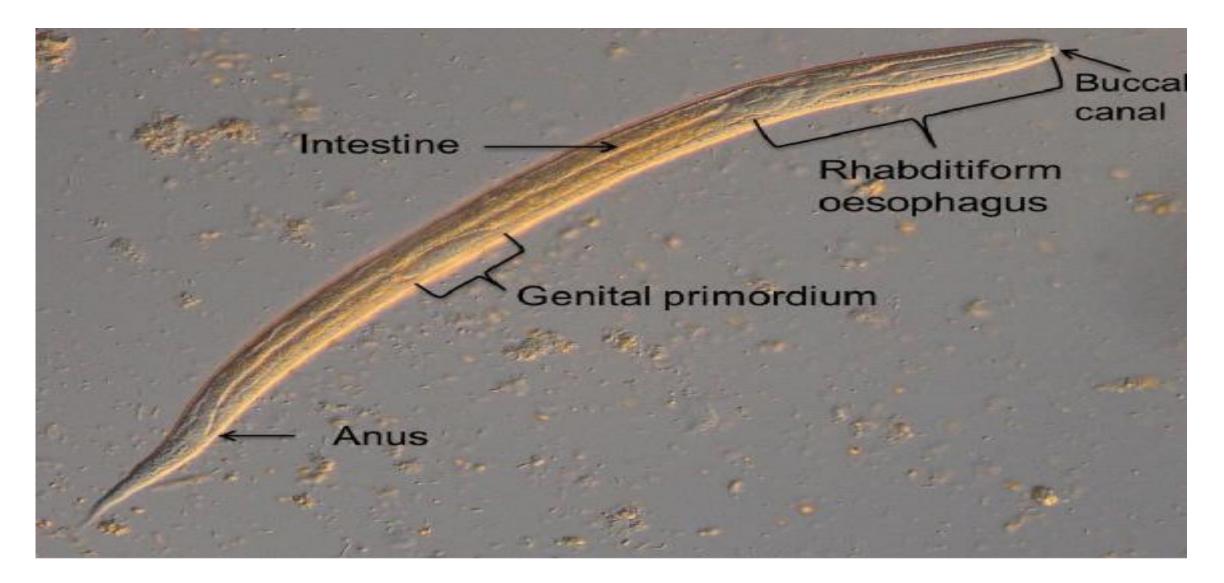
3- The intestines could eventually be invaded, leading to burning pain, tissue damage, sepsis, and ulcers. Stools may have yellow <u>mucus</u> with a recognizable smell. Chronic <u>diarrhea</u> can be a symptom. In severe cases, edema may result in obstruction of the intestinal tract, as well as loss of <u>peristaltic</u> contractions.

Diagnosis

1- Direct fecal smears.

- 2- Culturing fecal samples on <u>agar</u> plates.
- 3- Serodiagnosis through <u>ELISA</u>.

Still, diagnosis can be difficult because of the day-to-day variation in juvenile parasite load.



Light microscope photograph , iodine-stained Strongyloides stercoralis first stage larva from freshly faeces.

Enterobius vermicularis

Enterobius vermicularis

-The common name of *Enterobius vermicularis* is **pinworm** or **threadworm** or **seatworm**.

- common host of *Enterobius vermicularis* is <u>children</u> and transmitted via <u>the faecal-oral route</u>.
- <u>Humans</u> are the only <u>natural host</u> of *Enterobius vermicularis*.
- Infective stage: embryonated eggs.

- Diagnostic stage: embryonated eggs on per anal folds.

Life cycle

Life cycle of *E. vermicularis* showing the stages <u>inside</u> and <u>outside</u> of the human body

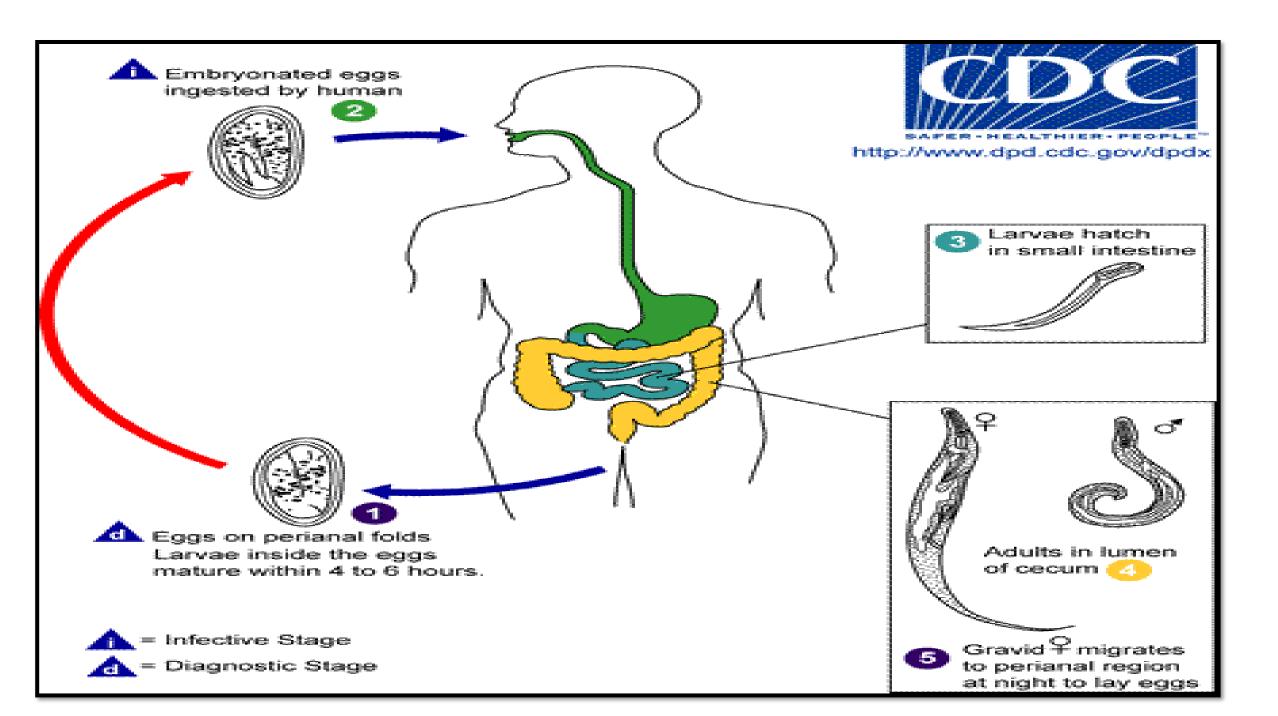
The life cycle, from egg to adult, takes place in the human gastrointestinal tract of a single. *E. vermicularis* molts four times; the first two within the egg before hatching and two before becoming adult worm.

infection occurs via ingestion of embryonated eggs by inadequate hand washing, The eggs

hatch in the <u>duodenum</u> the <u>larvae</u> grow rapidly to a size of 140 to 150 µm, migrate

through the small intestine towards the <u>colon</u>.

After that the male die, and are passed out with stool.....The gravid female pinworms settle in the <u>ileum, (large intestine)</u> <u>caecum</u> ... <u>appendix</u> <u>ascending colon</u>, <u>rectum</u> <u>anus</u>, and while moving on the skin near the anus, the female pinworms deposit eggs either through (Q: how many ways can the female of *E. vermicularis* lie eggs?) (1) contracting and expelling the eggs, (2) dying and then disintegrating, or (3) bodily rupture due to the host scratching the worm. After depositing the eggs, the female becomes <u>opaque</u> and dies. The female emerges from the anus to obtain the oxygen necessary for the maturation of the eggs.



Diagnosis

1- Diagnosis depends on finding the eggs or the adult pinworms.

2- adult pinworms diagnosis by { the light-yellowish thread-like adult pinworms during the night when they move near the anus, or on toilet paper} $\underline{O}r$ by <u>colonoscopy</u>

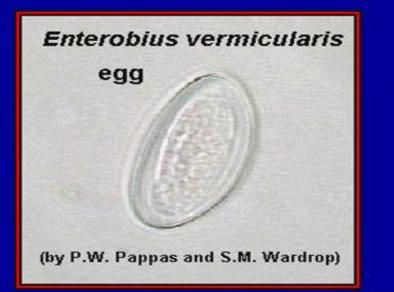
3- The eggs diagnosis by using <u>a low-power microscope</u> or by Transparent <u>adhesive tape</u> (<u>Scotch Tape</u>) applied on the anal area will pick up deposited eggs, and diagnosis the tape with a microscope.

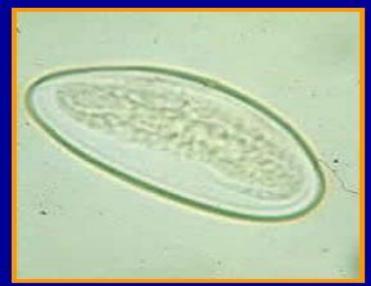
This test is most successful if done every morning for several days, because 1- the females do not lay
eggs every day 2-the number of eggs vary.

Morphology II

• Egg

Oval, clear and colorless. 50 to 60 μm in length. Flattened on one side. Contains a larva.







6- Trichinella spiralis

Trichinella spiralis

is {viviparous, pork worm, smallest, unusual lifecycle, live <u>larvae</u>} <u>mematode</u> *Trichinella spiralis*..... infected humans

The pork worm is ... Trichinella spiralis

The pork tapeworm is T. soilum

Q: How can human infect with *Trichinella spiralis* ?

By eat (ingest) infected meat of (pork, horse, fox, cat, bears)

Lifecycle

human eats the infected meat (larvae) of pig the larvae are released (due to stomach

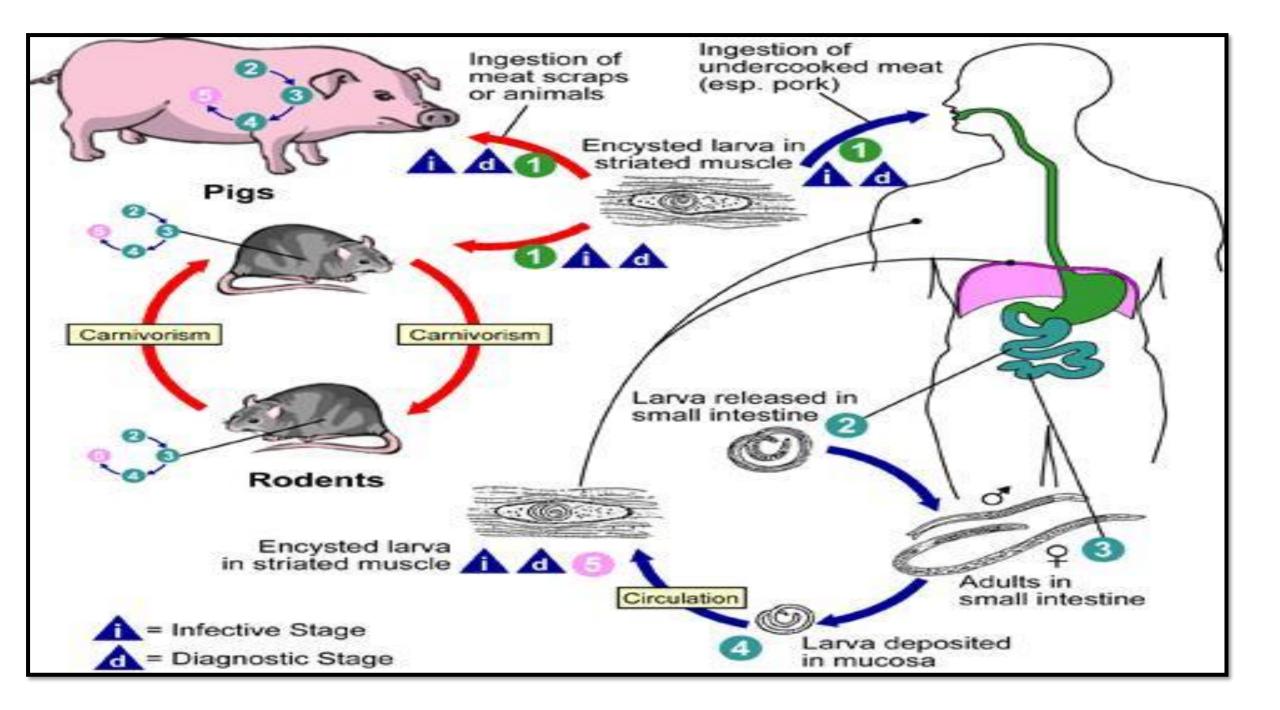
pH), and migrate to the small intestineburrow into the intestinal mucosa... mature

female produce up to 1,500 larvae..... female dies, she passes out of the host.... The larvae

inter the circulation and migrate to the muscle cell and encyst.

- Infective stage: encysted larvae in striated muscle.

- Diagnostic stage: encysted larvae in striated muscle



Symptoms

1- The migration of adult worms in the intestinal epithelium can cause traumatic damage to the host tissue,

2- The waste products they excrete can an immunological reaction.

3-Nausea, vomiting, sweating, and diarrhea. Edema, Pain and fever may occur.

4- Intense muscular pain, difficulty breathing, weakening of pulse and blood pressure, heart damage, and various nervous disorders

may occur, eventually leading to death due to heart failure, respiratory complications, or kidney malfunction, all due to larval migration.

5- In some cases, accidental migration to specific organ tissues can cause myocarditis and encephalitis that can result in death.

Diagnosis

Muscle biopsy may be used for trichinosis detection. Several immunodiagnostic tests are also available.

