
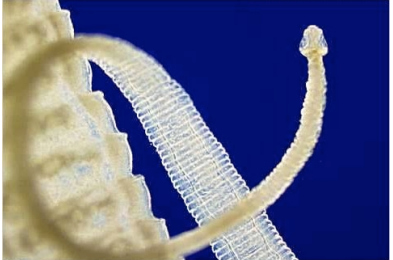


Cestodes - tapeworms

- Obligate parasites
- Considered to be degenerate (disgusting)
 - Simplified structure
 - No mouth, no digestive system
 - Live in intestines with feces
 - Reproductive structures
- The ultimate parasite!!
 - Amazing holdfast organs
 - "bag of reproductive organs bathed in a sea of predigested food"



Human Intestinal Tapeworms

Intestinal Cestodes	Cases
▪ <i>Diphyllobothrium latum</i>	16 million
▪ <i>Taenia solium</i>	5 million
▪ <i>Taenia saginata</i>	76 million
▪ <i>Hymenolepis nana</i>	36 million
▪ <i>Hymenolepis diminuta</i>	Rare
▪ <i>Dipylidium caninum</i>	Rare

Worldwide distribution

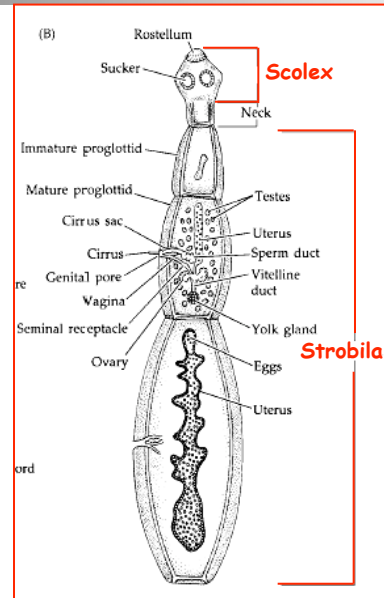


Extra-intestinal

Tissue cestodes (extra-intestinal)	Disease
▪ <i>Echinococcus granulosa</i>	▪ Hydatid disease (6k)
▪ <i>Echinococcus multilocularis</i>	▪ Hydatid disease (rare)
▪ <i>Diphyllobothrium spp</i>	▪ Sparganosis (?)
▪ <i>Taenia solium</i>	▪ Cysticercosis (?)

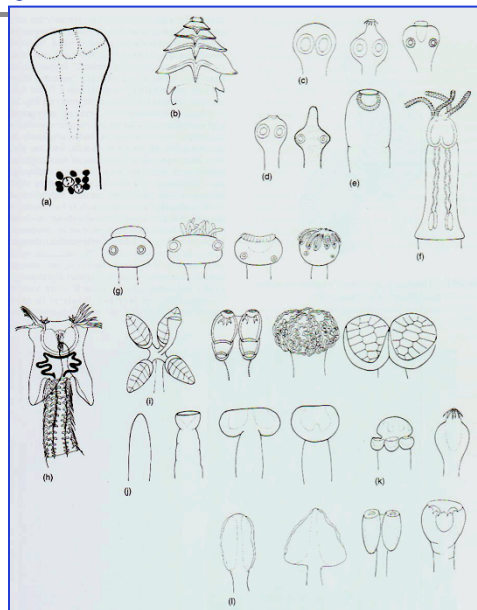
Cestode Morphology

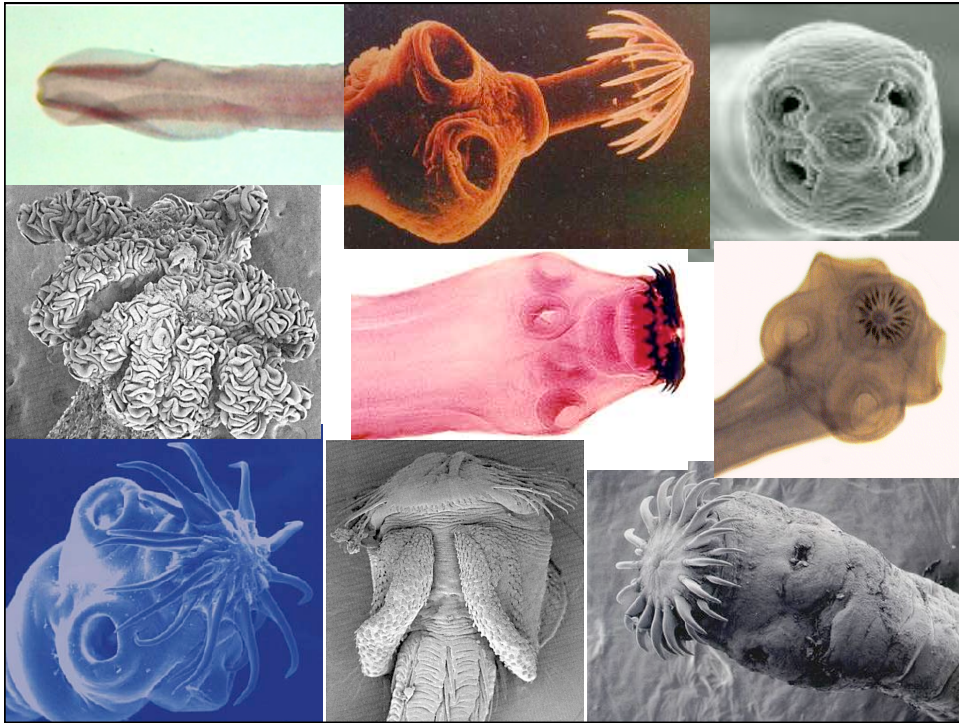
- **Scolex** - small anterior hooked attachment organ
- **Strobila** - division of body into segments immediately following the scolex/neck
- **Proglottid** - each individual segment
- Most cestodes are long - can occupy the entire length of the small intestine
- How large is the small intestine?





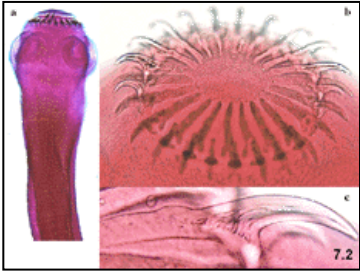
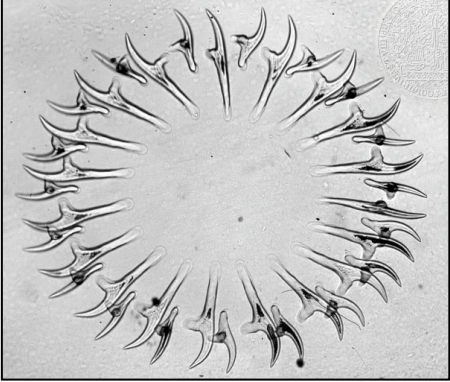
Scolex Diversity

- Typically referred to as the head
- Holdfast organ to resist peristaltic contractions
- Includes adhesive suckers and spines



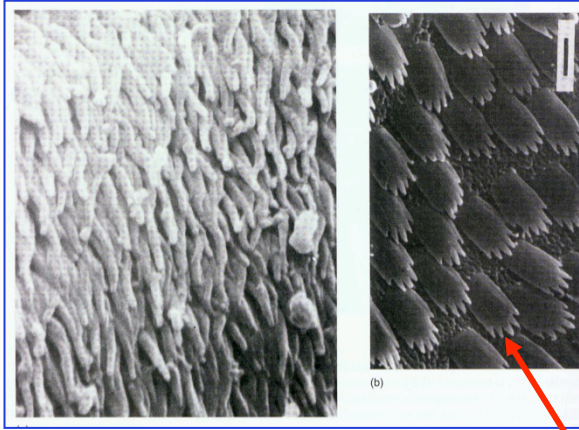


 Grap your weapon of choice



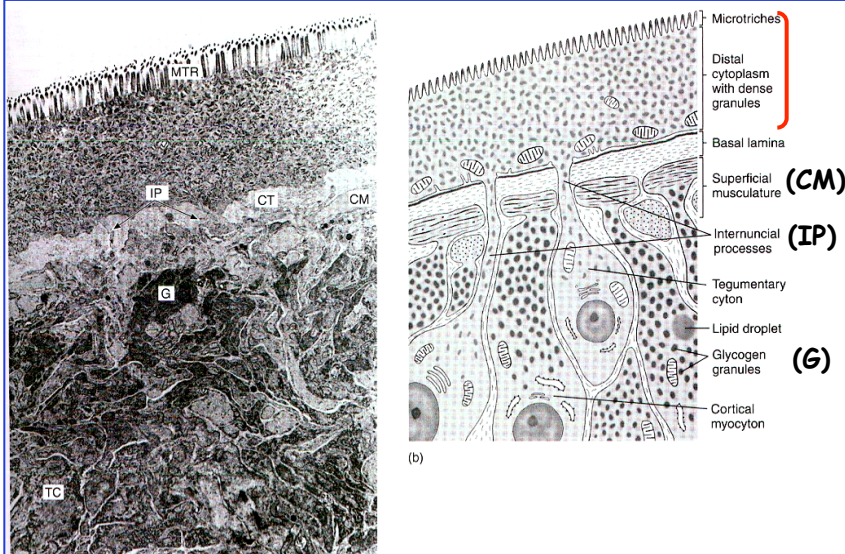
Cestode Nutrients

- No digestive tract - absorb all nutrients directly through the **tegument**
- **Microtriches** - outward projections
 - Similar to microvilli of our gut mucosal cells
 - Increase the surface area for nutrient absorption
 - Interdigitate with host microvilli

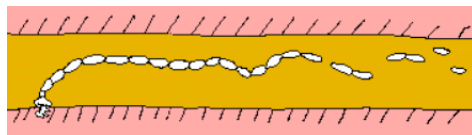
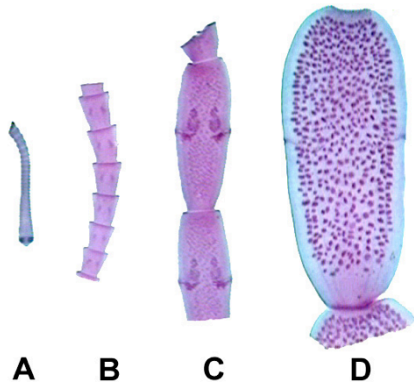


Cestode tegument structure is similar

Tegument is a syncytium



Strobilation - forming segments



A fun day at the museum!

Proglottids - segments

- Proglottids grow in series from the scolex.
- Proglottid close to the scolex are the immature segments
- Middle segments contain male and female reproductive structures
- Simultaneous hermaphrodite with cross-fertilization - also can self-fertilize
- Proglottids break free and are excreted in host feces
- Later segments are gravid
 - Filled with eggs!

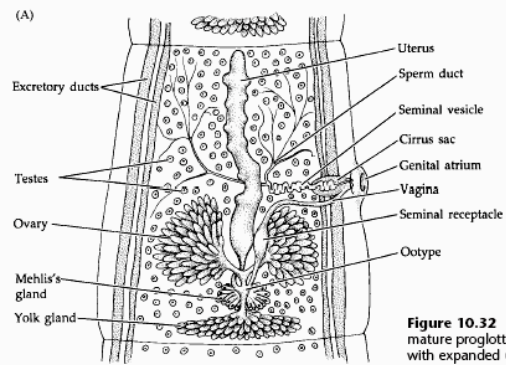
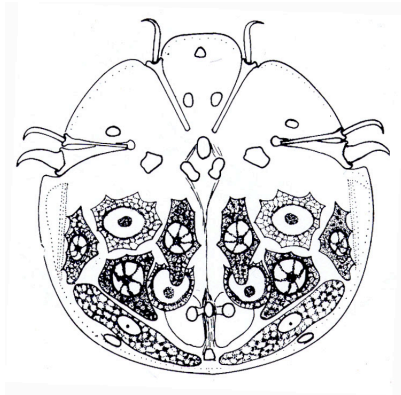


Figure 10.32 mature proglottid with expanded internal organs



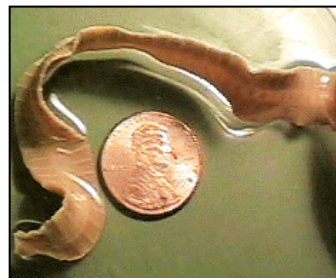
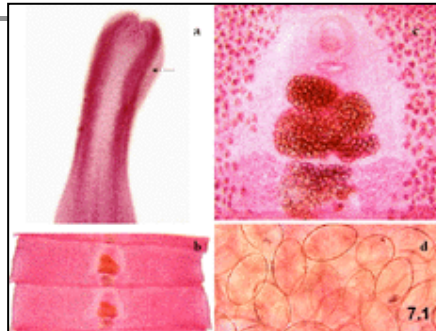
Developmental Stages

- Many invertebrates and vertebrates are parasitized as intermediate hosts
- The embryonated egg contains the **oncosphere**
- a larva that will penetrate the intestinal wall after eggs are swallowed by intermediate host
- The oncospheres of cestodes have three pairs of hooks which makes it easy to identify them



Diphyllobrothrium latum

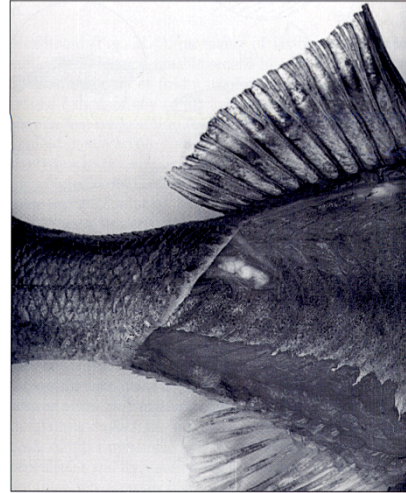
- A.K.A Broad Fish Tapeworm
- **Definitive Host:** Fish-eating carnivores, including dogs, bears, humans, weasels, seals, etc.
- **First Intermediate Host:** Crustaceans, including copepods
- **Second Intermediate Host:** Fish, particularly pike and salmonids (trout, salmon) **Geographic Distribution:** northern Europe,
 - Russia, Scandinavia, Baltic Republics.
 - May be different species in U.S.





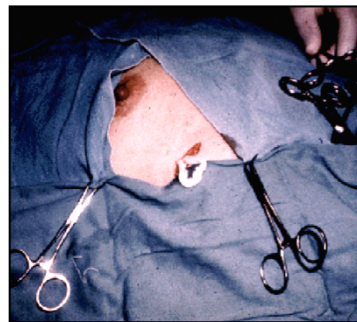
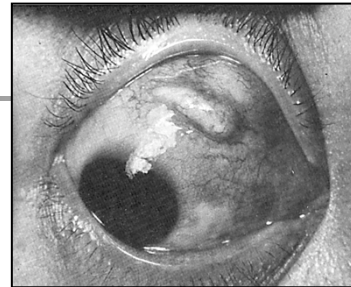
Diphyllobrothrium latum

- **Transmission:** for all three hosts, the parasite is eaten.
 - Copepod eats coracidium
 - Fish eats copepod with proceroid larvae
 - D.H. eats fish with plerocercoid.
- **Symtoms and Pathology:**
 - **Diphyllobothriasis** caused by adult tapeworm.
 - Most cases are asymptomatic.
 - Symptoms include nausea, diarrhea, and weakness.
 - Also causes anemia because worm absorbs large amounts of B-12.

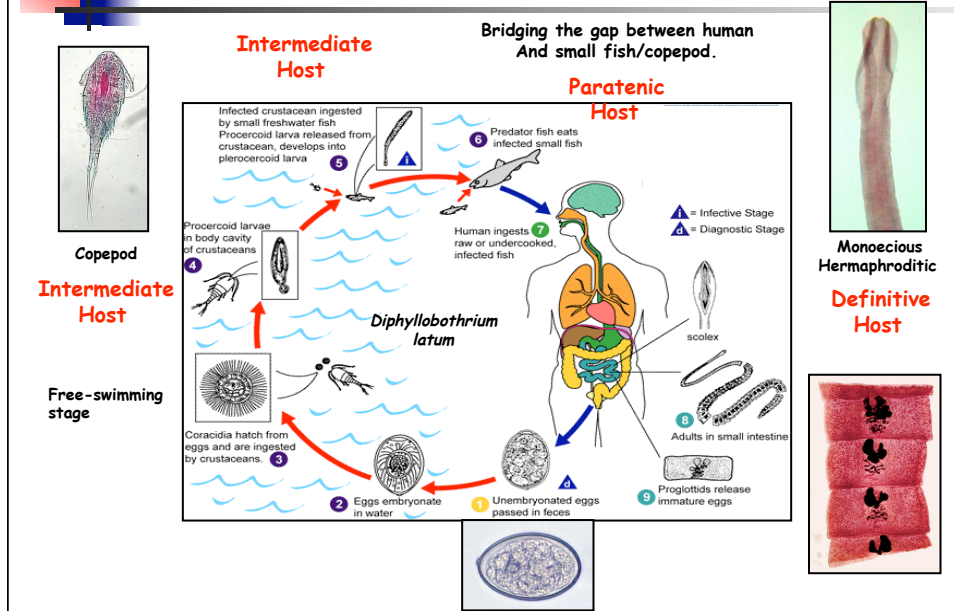


Sparganosis

- Related disease cause by larval form of any diphyllbothroid tapeworms, including *D. latum*.
- Humans cannot be the definitive host, but are accidental hosts.
- Most infections are due to copepods in drinking water or ingestion of eggs accidentally.
 - Especially *D. mansonioides* of cats
- Some are due to undercooked amphibians, reptiles, birds or mammals.
- Organisms can live up to 20 yrs.
- Other transmission: In east Asia, skin ulcers, eye or vagina inflammation are traditionally treated with poultice made of raw meat. If meat has proceroid, it can crawl in and form plerocercoid.

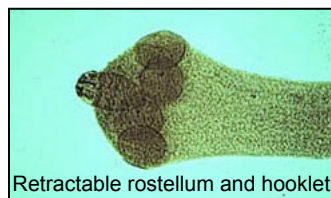


Diphyllobothrium latum Life Cycle



Dipylidium caninum

- **Definitive Host:** Humans, particularly children, dogs, and cats.
- **Intermediate Host:** Flea
- **Geographic Distribution:** Cosmopolitan
- **Transmission to D.H.:** Ingestion of infected flea. *Ctenocephalide species*
- **Pathology and Symptoms:** Usually asymptomatic. Incidence in children is higher than adults.
 - Children let dogs lick their faces.
 - Adults may develop immunity.



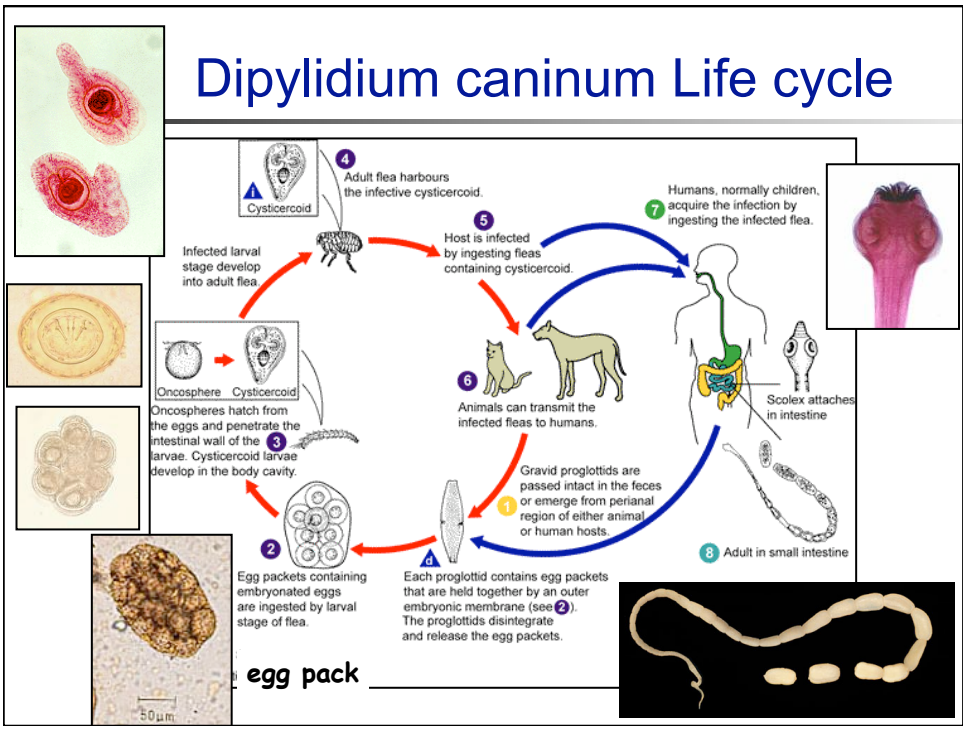
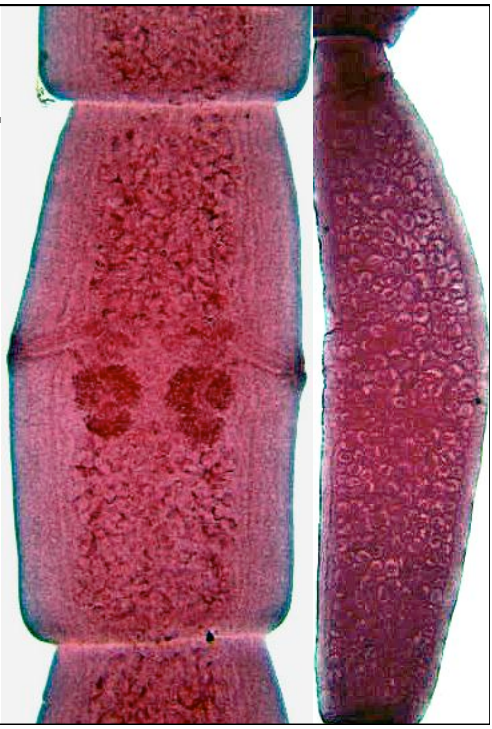


D. caninum

- **Diagnosis:** Proglottids in feces
 - Shaped like cucumber seed
 - Move like a fluke
 - Can crawl out of anus
 - Double-pore proglottid

- **Treatment:** Praziquantel

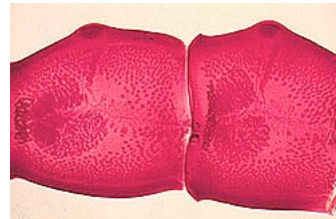
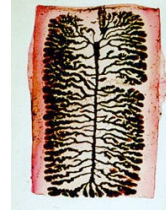
- **Notes:** There are hundreds of species in this family
 - Most parasitize birds and non-human mammals





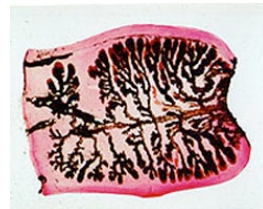
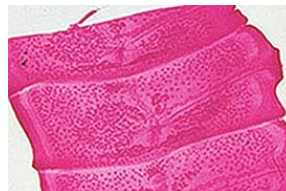
Taenia saginata

- AKA - Beef tapeworm
- **Definitive Host:** Humans
- **Intermediate Host:** Cattle
- **Geographic Distribution:**
Cosmopolitan. Most common where poor sanitation and no inspection of meat combined.
 - Africa and South America
- **Transmission:** Ingestion of larval form in undercooked beef



Taenia solium

- AKA: Pork tapeworm
- **Definitive Host:** Human
- **Intermediate Host:** Pigs
- **Geographic Distribution:**
Cosmopolitan
- **Transmission:** Ingestion of undercooked pork
- **Location in D.H.:**
Small Intestines
- **Pathology and Symptoms:** Minimal pathology from adults.
- Larval forms cause cysticercosis
 - cysticercus develop in humans
 - More dangerous than *T. saginata*.



Maximum survival of selected platyhelminths in human host

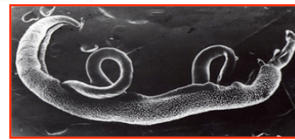
- Liver fluke >>20 yrs



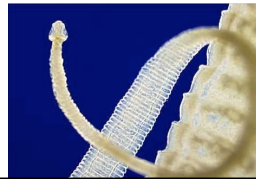
- Lung fluke >> 20 yrs



- Schistosoma >>40 yrs

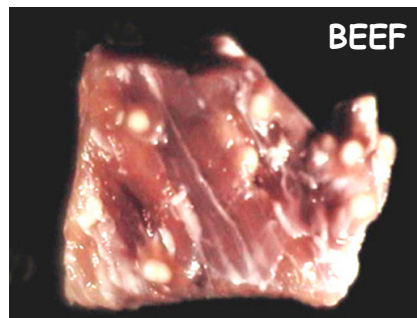
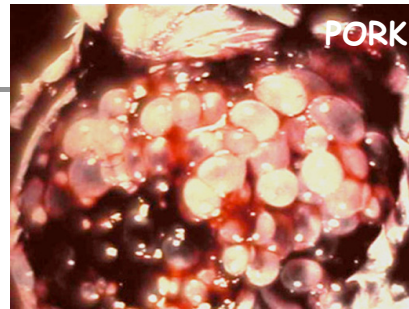


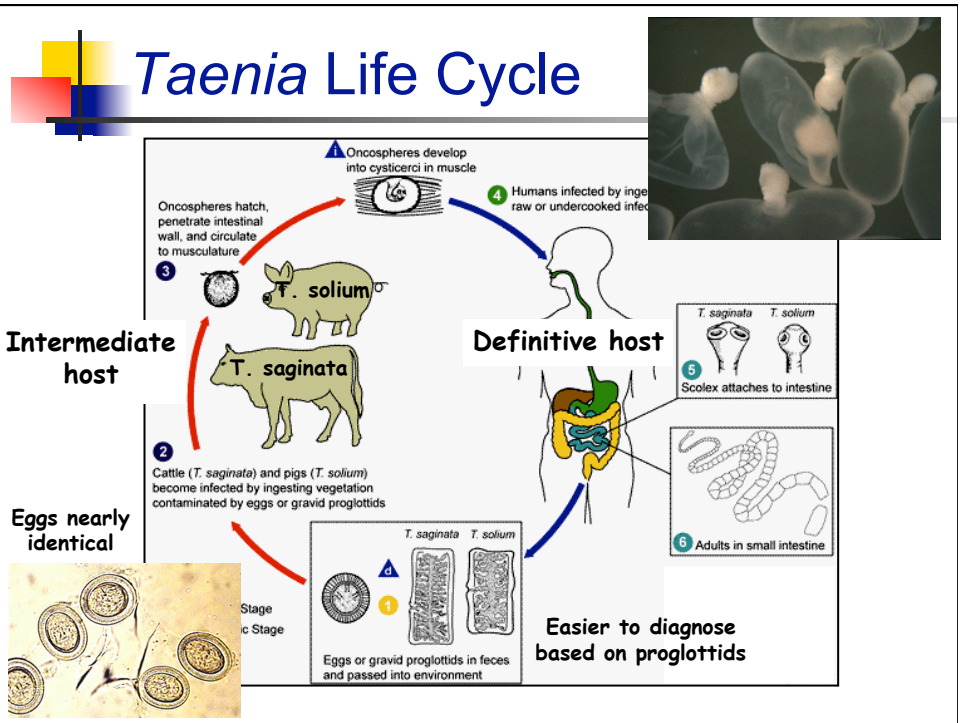
- Taenia >>35 yrs



Prevention

- Avoid undercooked pork, beef
- In butcher shops, grinding machines must be cleaned between grinding beef and grinding pork.
- Washing hands before preparing food reduces incidence of cysticercosis
- Proper sanitation



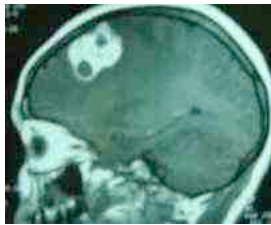


Cysticercosis

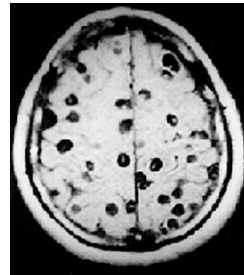
- Larval infection - *T. solium*
- Two ways to get it
 - Eat eggs in contaminated food
 - Autoinfection
 - Eggs hatch before leaving D.H. (rare!)
- Any organ and tissue can have cysticerci
 - Muscle most common
- Many cases are asymptomatic
- Severity depends on larval migration

Human cysticercosis: When humans plays the role of the Intermediate Host

- Larval stages develop in the human host
- Humans acquire cysticercosis through faecal-oral contamination with *T. solium* **EGGS**
- The **oncosphere** in the eggs is released by the action of gastric acid and intestinal fluids
- Cross the gut wall and enter the bloodstream
- They are carried to the muscles and other tissues
- They encyst as **cysticerci**
- Neurocysticercosis and ophtalmic cysticercosis serious



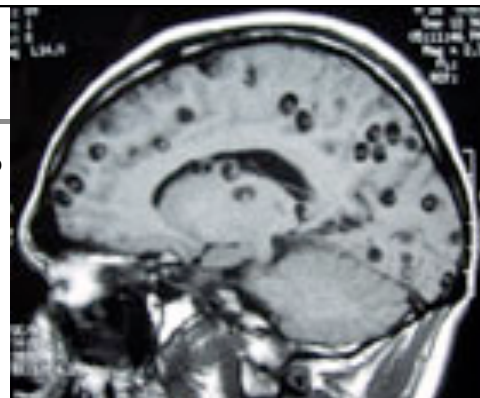
Racemose Cysticercosis-MRI



MRI of multiple cysts. Image courtesy of the Centers for Disease Control and Prevention.

Cysticercosis

- Symptoms depend on where larvae develop and number of larvae
 - Skeletal Muscle – little pathology
 - Eye – cause blindness
 - Heart – may cause heart failure
 - Brain – leading cause of adult onset epilepsy
- Killing adults reduces risk of cysticercosis.
- Killing larval forms may cause more damage than leaving them alive.
 - Dead larvae cause inflammatory response
 - Need to provide steroids to keep inflammation down
- Surgery can be used to remove larvae



Cysticercosis pathology

- Cysts are rounded or oval vesicles from a few mm to 1-2 cm
- Most common location is in the cerebral hemispheres, mainly at the junction of grey and white matter.
- Cysts can be found in the cerebellum, ventricles, brainstem, basal cisterns, and spine.
- Viable cysts have a translucent membrane through which the scolex is visible.
- Cysts degenerate: the fluid becomes opaque and dense and edges irregular and shrink.
- Calcification starts in the cephalic portion and leaves a whitish calcified nodule
- **Racemose form:** high mortality. Large translucent vesicle lobulated without scolex which develops in the basis of the brain or in the ventricles. Sometimes several small vesicles surround a pedicle like a bunch of grapes.

