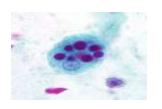


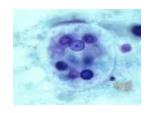
AL- Maaqal University College of Medical and Health Techniques Department of Laboratory Techniques



Medical Parasitology



Lab. 3



MSC. Hoyam Sajjed Ghanyem

Entamoeba

Can be divided into two types according to pathogenicity:

Pathogenic amoeba: Non Pathogenic amoeba:

> Entamoeba hitolytica

- >Entamoeba dispar
- Entamoeba moshkovskii
- > Entamoeba polecki
- Entamoeba coli
- Entamoeba hartmanni

Entamoeba histolytica



Kingdom: Protista or Animalia

Subkingdom: Protozoa

Phylum: Sarcomastigophora

Subphylum: Sarcodina

Class: Lobosea

Order: Amobida

Genus: Entamoeba

Species: E. histolytica

Introduction

- intestine of human.
- ➤ It is the third leading parasite cause of death in the developing countries.
- ➤ the parasite is primarily a human parasite and transmitted from human to human. dogs, cats, and primates may be infected.

What disease does Entamoeba histolytica cause??..

The parasite is responsible for amoebiasis (old name: amoebic dysentery).

Morphology of Entamoeba histolytica:

The parasite passes in three stages:

- Trophozoite
- Precyst
- Cyst

The most important of these phases are the trophozoite and the cyst stages because they are more effective

Trophozoite



Morphology

- ✓ It is the growing and feeding stage of parasite.
- ✓ Shape: not fixed because of constantly changing position.
- ✓ Size: ranging from 18-40 µm; average being 20-30 µm.
- √ Trophozoites are actively motile with the help of pseudopodia.
- √Trophozoites are anaerobic parasite, (present in large intestine).

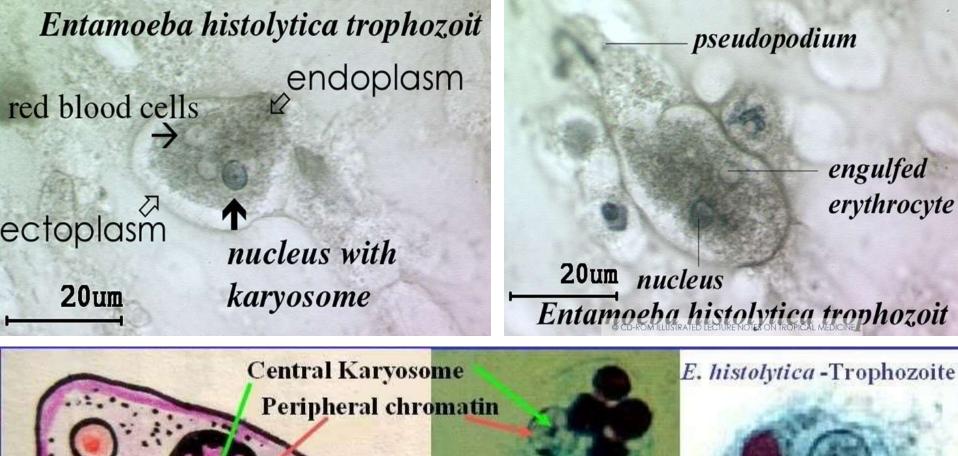
✓ Cytoplasm:

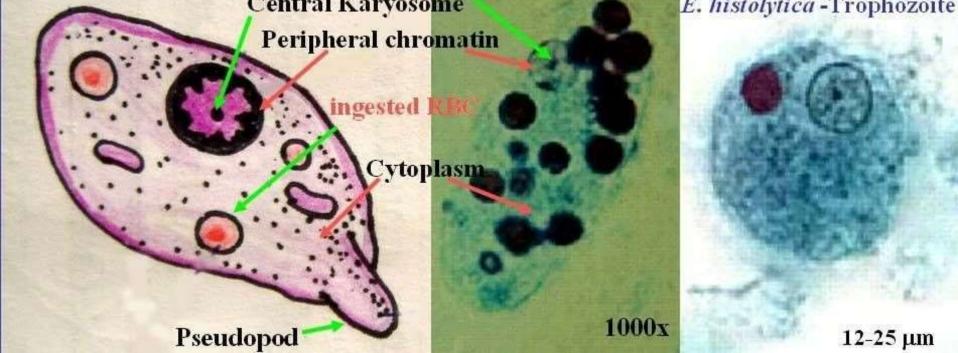
cytoplasm is divided into two portion:

- •a clear transparent ectoplasm
- a granular endoplasm. It is filled with lysosomes, pinocyte and phagocyte vacuoles containing Red blood cells are in different stages of digestion, and glycogens granules are distributed in large quantities between ribosome.

✓ Nucleus :

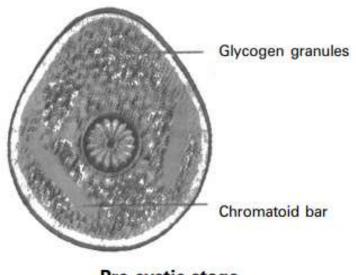
•It is single, spherical shape and size ranging from (4- 6 μ) Nucleus contains central karyosome and fine peripheral chromatin.





Precyst:

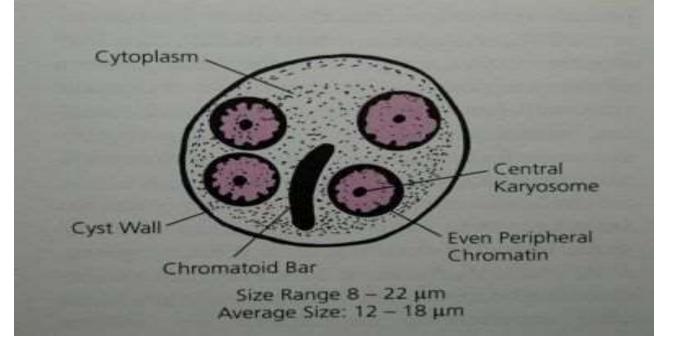
- It is the intermediate stage between trophozoite and cyst
- ■It is smaller in size; 10-20µ
- It is round or slightly ovoid with blunt
- pseudopodium projecting from periphery
- No RBC or food materials are found on its endoplasm.



Pre-cystic stage

Cyst:

- •It is the infective form of parasite.
- •Shape: It is round or oval in shape.
- •Size: 12-15 µm in diameter.
- •It is surrounded by a highly refractile membrane called cyst wall.
- •The cyst wall is resistant to digestion by gastric juice in human stomach.
- •Nucleus: A mature cyst is quadrinucleated.
- •Cytoplasm: Cytoplasm shows chromatid bars and glycogen masses but no RBCs or food particles.
- •Mature cyst passed out in stool from infected patient and remained without further development in soil for few days.







Laboratory Diagnosis

- > Entamoeba histolytica must be differentiated from other intestinal protozoa including pathogen and non-pathogen.
- ➤ Differentiation is possible, but not always easy, based on morphologic characteristics of the cysts and trophozoites.
 - >Amebiasis is most commonly diagnosed by examining stool samples under a microscope in a laboratory.
 - Sometimes, several stool samples from several different days must be collected and tested because the number of E. histolytica parasites found in the stool changes from day to day.

1. Microscopy method:

- * Microscopic identification
- This can be accomplished using:

1. Fresh stool (Stool smear):

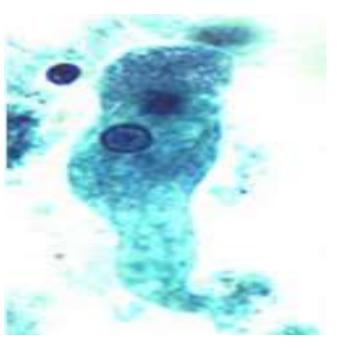
wet mounts and permanently stained preparations (e.g., trichrome).

2. Concentrates:

from fresh stool: wet mounts, with or without iodine stain, and permanently stained preparations (e.g., trichrome).

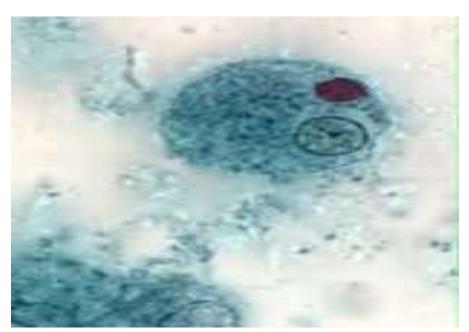
Trophozoites of *Entamoeba histolytica* (trichrome stain)

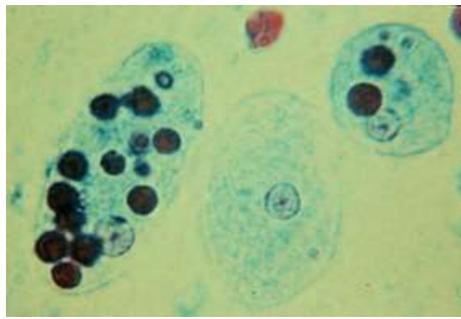






Trophozoites of *Entamoeba histolytica* with ingested erythrocytes (trichrome stain)

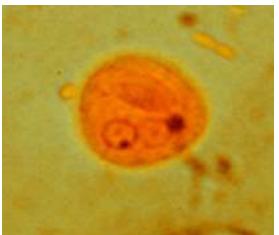


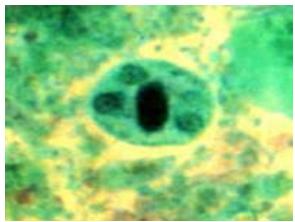


Cysts of Entamoeba histolytica

Cysts of Entamoeba histolytica, permanent preparations stained with trichrome.









2. Immunodiagnosis:

- 1. Antibody detection
- 2. Antigen detection may be useful as an adjunct to microscopic diagnosis
- 3. The indirect hemagglutination (IHA)
- 4. The EIA test detects antibody specific for *E. histolytica*.

3. Molecular diagnosis

➤ In reference diagnosis laboratories, PCR is the method of choice for discriminating the pathogenic species (*E. histolytica*).