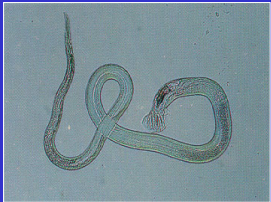
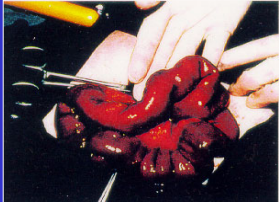


Biomedical Parasitology

PARASITIC WORMS





Prof. Peter O'DONOGHUE

1

HELMINTHS
defining characteristics

- eukaryotes
- metazoa
- bilateral
- triploblastic
- protostome
- invertebrate

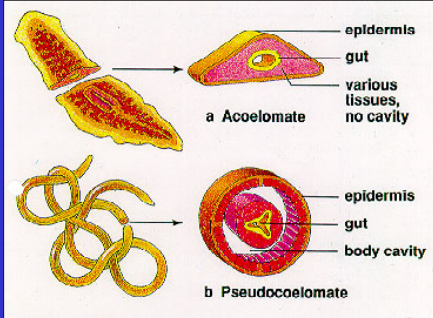


2

WORM ANATOMY (body cavity)

flatworms

roundworms




a Acoelomate

b Pseudocoelomate

3


Three main assemblages

nematodes




roundworms

cestodes



tapeworms

trematodes



flukes

4

INTENSITY OF INFECTIONS

Helminth infections accumulate but do not amplify

Unlike viral, bacterial, protozoal or fungal infections, worms do not proliferate within their hosts

Within a given generation, they grow, moult, mature, copulate, reproduce and lay eggs, but do not replicate

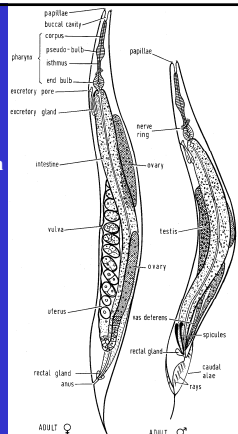
The intensity of infection (and severity of disease) depends solely on intake (number of eggs or larvae)

5

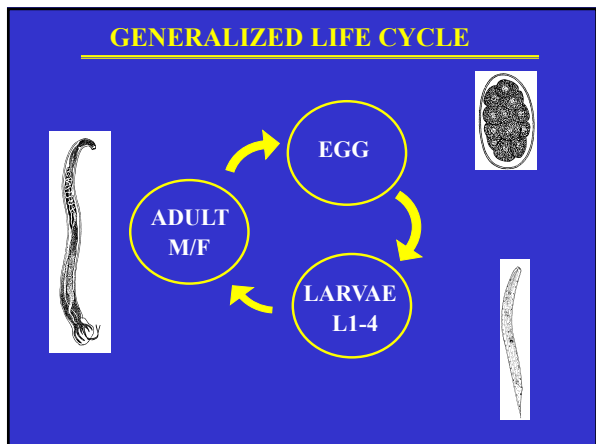
NEMATODES (roundworms)

Characteristics

- long thin tube, a hydrostatic skeleton
- morphological elaboration concentrated around openings
- straight gut with highly variable pharynx (oesophagus)
- sexes separate



6

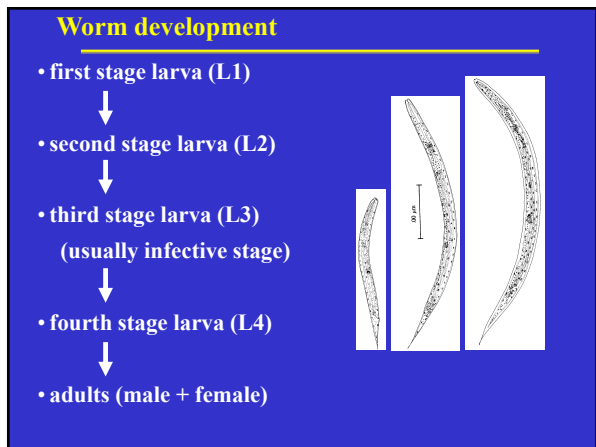


7

Female worms produce:

- unembryonated eggs
- embryonating eggs
- embryonated eggs
- larvae

8



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Nematodes - 6 Orders

Strongylida Oxyurida Ascaridida Rhabditida Spirurida Enoplida Trichocephalida

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Nematode infections

gastro-intestinal	vascular	tissues, organs
simple cycle (egg infective) diarrhoea/obstruction complex cycle (larvae infective) blood loss/anaemia	vector-borne (microfilariae) oedema	intermediate hosts (larval stages) lesions/malfunction

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ENTERIC NEMATODES

<i>Trichuris trichiura</i> <i>Enterobius vermicularis</i> <i>Trichostrongylus orientalis</i> <i>Capillaria philippinensis</i> <i>Ascaris lumbricoides</i>	} enteritis
<i>Ancylostoma duodenale</i> <i>Necator americanus</i> <i>Strongyloides stercoralis</i>	

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ENTERIC NEMATODES

Simple life cycles	- eggs ingested - larvae/adults in gut e.g. <i>Trichuris</i> (whipworm) <i>Enterobius</i> (pin worm) <i>Trichostrongylus</i> (hair worm) <i>Capillaria</i> (round worm)
More complex	- egg ingested - larvae migrate through lungs - adults in gut e.g. <i>Ascaris</i> (round worm)
Most complex	- larvae penetrate skin - larvae migrate through lungs - adults in gut e.g. <i>Ancylostoma/Necator</i> (hookworm) <i>Strongyloides</i> (threadworm)

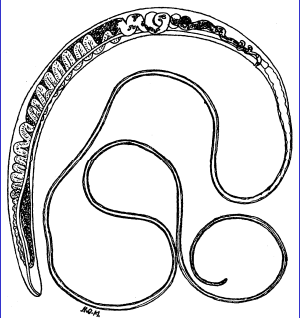
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Trichuris (whipworm)

Order: Enoplida (Trichocephalida)
Family: Trichuridae


Adults with distinctive shape

Is the handle of the whip:
the head?
or
the tail?




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Trichuris



adult worms 3-8 cm
(thin heads embedded in colonic mucosa)



egg 50 x 20 µm
(polar plugs)

important species in humans, sheep, cattle, pig, dog

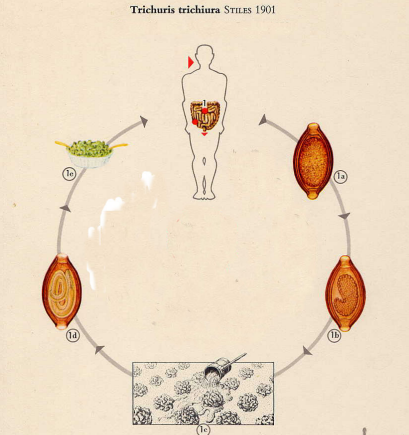
15

Faecal-oral transmission

cycle
1 month - years

esp. prevalent where night soil used to fertilize vegetable gardens

infections >200 worms can cause symptoms


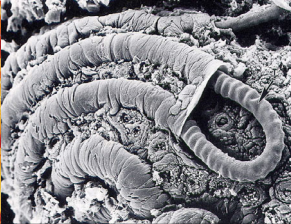


Trichuris trichiura STILES 1901

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Pathogenesis

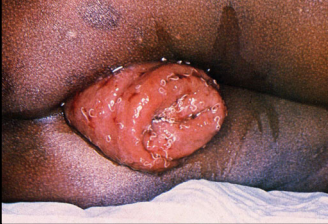

- asymptomatic
- inflammation, allergy
- mechanical damage to mucosa
- haemorrhage, anaemia, bloody diarrhoea

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Pathogenesis

- tenesmus, straining
- rectal prolapse


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***Enterobius* (pin worm)**

Order: Oxyurida


Small adults

Females lay eggs around anus at night-time




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***Enterobius* (pinworm)**



adult worms 1 cm in caecum



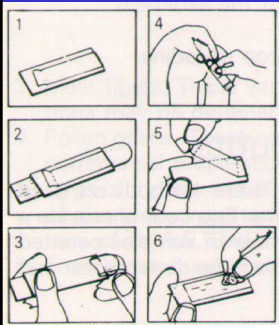
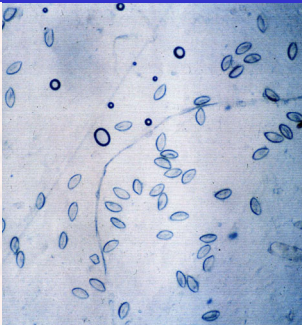
eggs 25 x 50 μm attached peri-anally

numerous pinworm species in vertebrate and invertebrate hosts

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Peri-anal sticky tape test

detect egg laid overnight around anus

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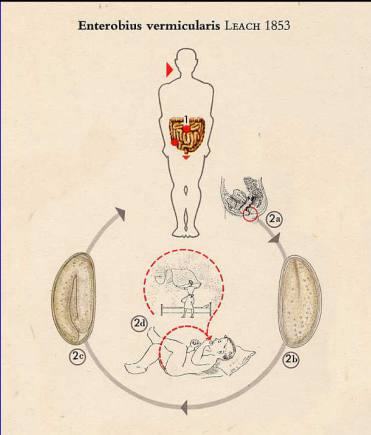
Faecal-oral transmission

Enterobius vermicularis LEACH 1853

cycle 2-13 weeks

esp. prevalent in children with poor hygienic standards


infections accumulate



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Pathogenesis

- asymptomatic
- perianal pruritis (itching)
- insomnia, restlessness
- irritability
- sometimes diarrhoea
- rarely, extra-intestinal granuloma



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***Trichostrongylus* (hair worm)**



Order: Strongylida
Family: Trichostrongylidae

small adults 'hair-like'

males bursate

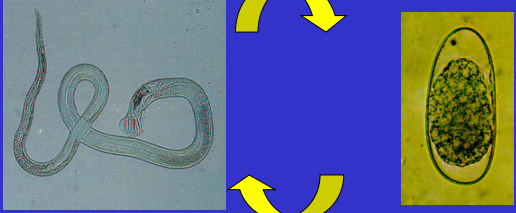
common in herbivores

worldwide

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Trichostrongylus (hair worm)



adult worms 4-7 mm
(embedded in small intestinal mucosa)

egg 80 x 40 μm

many pathogenic species in herbivores, several in humans

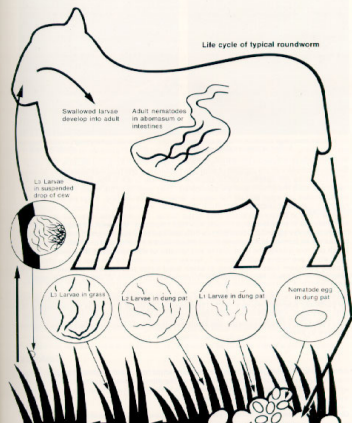
25

Transmission via contaminated vegetation

cycle
2 weeks - months

prevalent in rural areas in third world countries

infections accumulate



Life cycle of typical roundworm

Swallowed larvae develop into adult

Adult nematodes in abomasum or intestine

L1 Larvae in dung pats

L2 Larvae in dung pat

L3 Larvae in dung pat


hatched egg in dung pat

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Pathogenesis

Trichostrongylus spp. (similar in all mammals)

- worms disrupt integrity of small intestinal mucosa
- desquamation, villous atrophy, malabsorption
- diarrhoea (scours), emaciation
- haemorrhage, anaemia, bottle-jaw oedema




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Ascaris (roundworms)

Order: Ascaridida

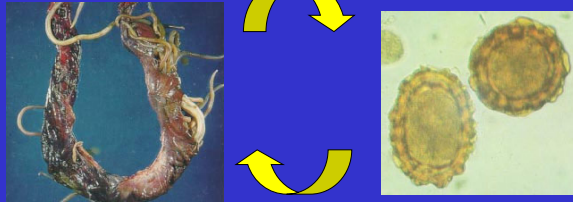
Big "roundworms"

- infect small intestine
- three anterior lips
- generally eat food of their hosts
- heavy infections cause obstructions



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Ascaris (roundworm)



adult worms 15-30 cm
(in small intestinal lumen)

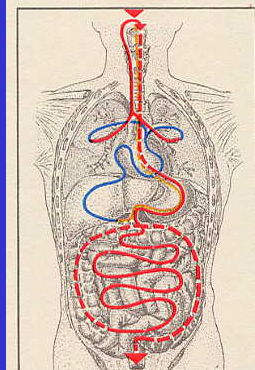
egg 60 x 40 μm
mammillated coat

important species in humans and pigs

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Tracheal migration (pulmonary cycle)

- ingested eggs hatch in intestines
- larvae migrate through gut to blood/lymph and carried to lungs
- perforate alveoli, molt, grow, migrate to epiglottis and swallowed
- larvae reach small intestines and mature to adults



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Faecal-oral transmission

cycle
2 months – 5 years

esp. prevalent in communities where nightsoil is used to fertilize vegetable gardens

heavy infections cause symptoms

Ascaris lumbricoides LINNÉ 1758

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Pathogenesis

- allergic reactions (urticaria, eosinophilia)
- larval migration (pneumonitis)
- mechanical blockage (gut obstruction)
- malnutrition (impaired carbohydrate absorption)

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Pathogenesis

Single worms may migrate:

- obstruct biliary or pancreatic ducts
- regurgitated under anaesthesia

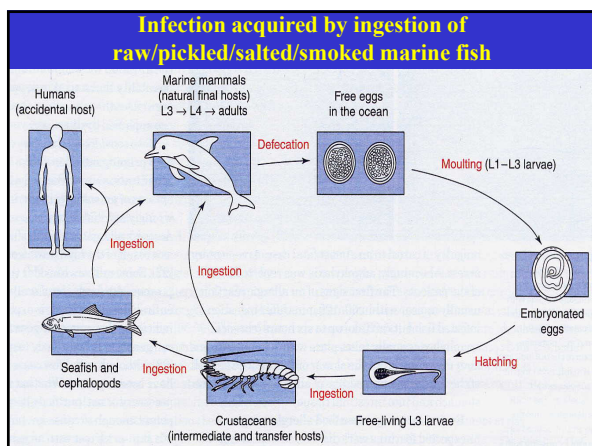
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Anisakis

Order: Ascaridida
Anisakis/Phocanema/Contracaecum spp.

- larval nematodes acquired from marine fish
- form granulomas

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Pathogenesis

- larvae penetrate gut wall (occasionally throat)
- become embedded in eosinophilic granulomas
- nausea, vomiting (mimic ulcer/carcinoma/etc)
- low grade eosinophilia, positive stool occult blood
- surgical removal required

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TREATMENT - nematocides			
Anthelmintic	mebendazole	albendazole	pyrantel
<i>Trichuris</i> (whipworm)	++	+	-
<i>Enterobius</i> (pinworm)	++		++
<i>Ascaris</i> (roundworm)	++	++	++

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