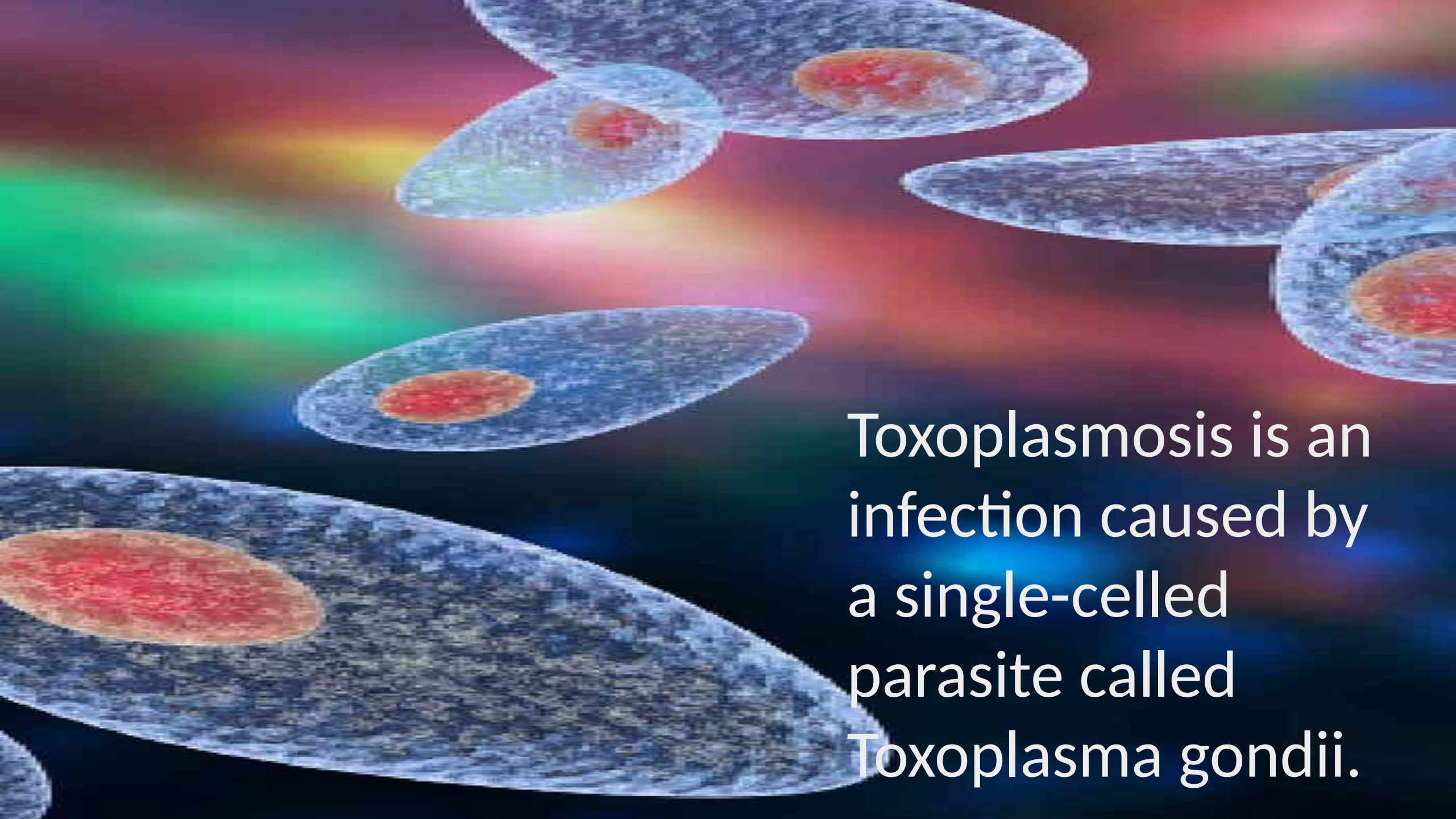


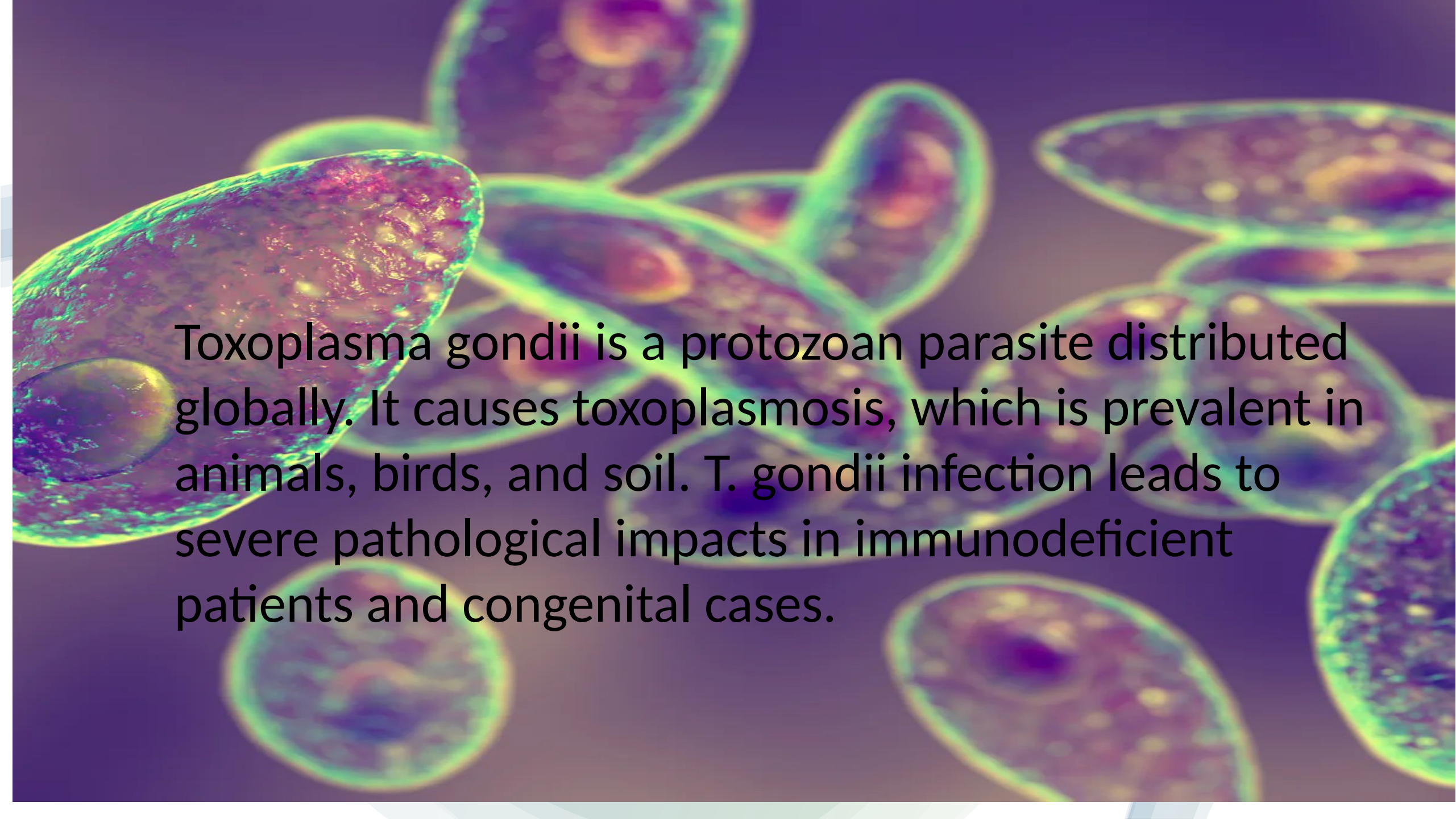


TOXOPLASMOSIS

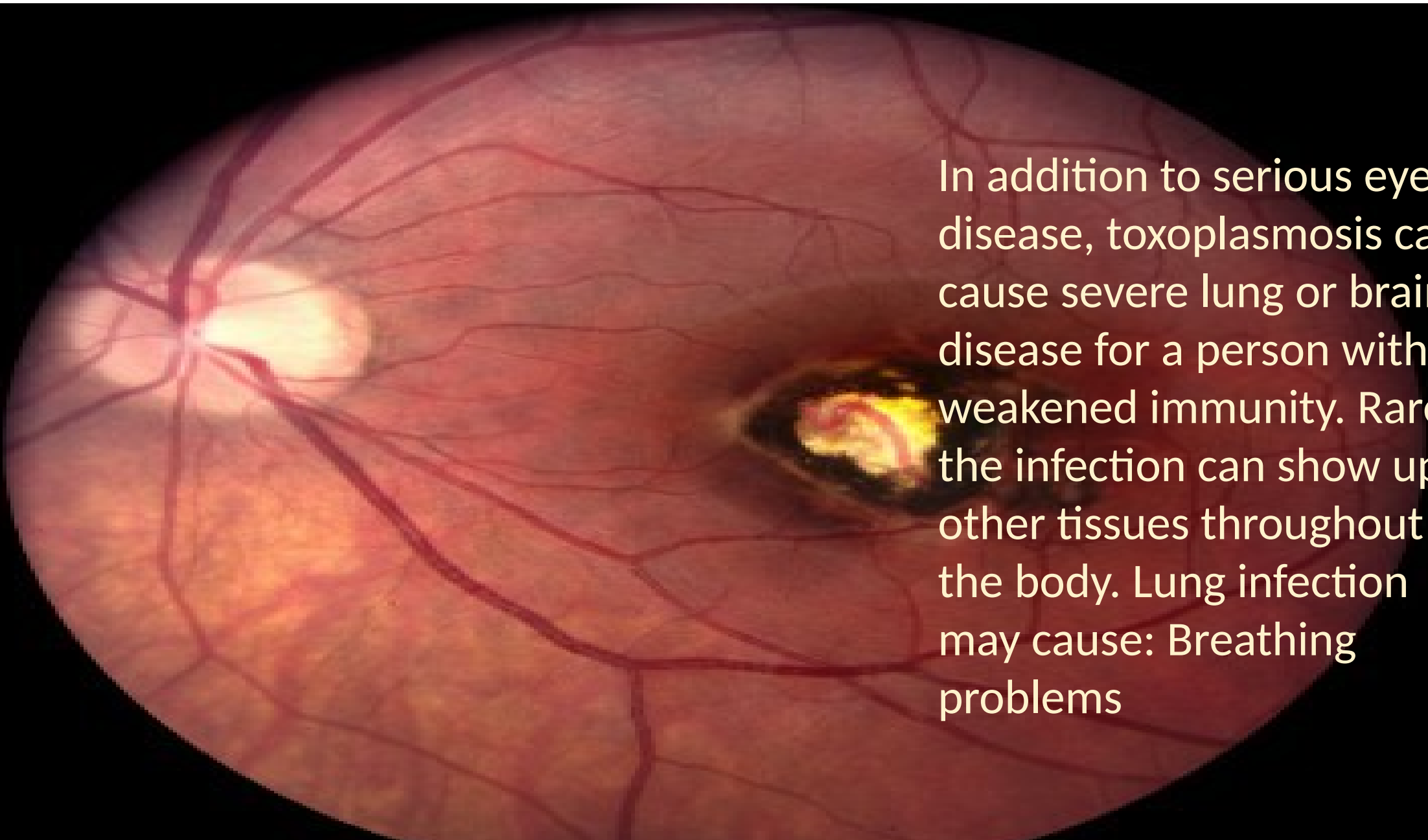
BY DR WAJEEHA RAHMAN



Toxoplasmosis is an infection caused by a single-celled parasite called *Toxoplasma gondii*.

The background of the slide is a microscopic image of several Toxoplasma gondii oocysts. These are oval-shaped structures with a distinct outer layer and internal granular contents. One oocyst in the foreground is particularly large and detailed, showing a clear nucleus and a smaller, denser structure within it. The other oocysts are scattered in the background, some in focus and some blurred, creating a sense of depth. The overall color palette is dominated by shades of blue, green, and yellow, with some red and purple highlights, giving it a scientific and somewhat ethereal appearance.

Toxoplasma gondii is a protozoan parasite distributed globally. It causes toxoplasmosis, which is prevalent in animals, birds, and soil. *T. gondii* infection leads to severe pathological impacts in immunodeficient patients and congenital cases.

A fundus photograph of the eye showing a chorioretinal lesion. The lesion is a well-defined, oval-shaped area of yellowish-white discoloration, located in the posterior pole of the eye. The surrounding retina appears normal with visible retinal vessels. The optic disc is visible on the left side of the image.

In addition to serious eye disease, toxoplasmosis can cause severe lung or brain disease for a person with weakened immunity. Rarely, the infection can show up in other tissues throughout the body. Lung infection may cause: Breathing problems

Learning goals to know by the end of the lecture

- What is toxoplasmosis
- Transmission
- Pathogenesis
- Life cycle
- Prevention

High prevalence groups had close contact with cats, dogs, consumed uncooked raw fruits, meat, or vegetables and the socio-economic level noted to be one of the crucial factors that influence toxoplasmosis. Toxoplasmosis infection is high in low-income countries and low in developed European countries. Immunosuppressed groups and pregnant women were the highly vulnerable groups.

toxoplasmosis



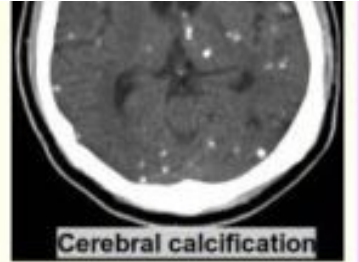
Enlarged spleen and liver (hepatosplenomegaly)

Liver

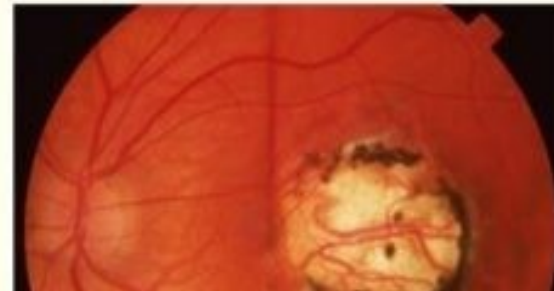
Spleen

Jaundice in Newborns

Yellow coloring of skin and eyes



Cerebral calcification



Acute toxoplasmosis infection in the immunocompetent individual leads to asymptomatic infection in skeletal and encysts in cardiac muscles, retina, parenchyma, and brain tissues. **The latent infection** has been reported among such patients, had a rapid conversion of bradyzoites into tachyzoites leading to severe mortality if not treated. Latent infection was reported among immunocompetent patients' retina, leading to a severe loss of visual acuity. Symptoms such as headache, fever, and muscle pain were reported, lasting for a few weeks. Though the severity of this disease is reported to be controlled by medication, prevention is recommended to avoid any parasitic exposure.



•Nicolle and Manceaux initially reported *T. gondii* in 1908 (Nicolle and Manceaux, 1908) from the North African rodent, *Ctenodactylus gondii* (gundi), and rabbits in Brazil by Splendore (Ferguson, 2004) and was widely recognized as a common infection in various warm-blood animals, including rodents and mammals. The clinical implications of toxoplasmosis were first reported in early 1920s among children with encephalitis, retinochoroiditis and hydrocephalus. In the 1980s, it was observed as one of the major opportunistic infections among patients with immune suppression due to HIV infection



Toxoplasmosis Risk Factors



undercooked meat



cat feces



unwashed produce



infected water



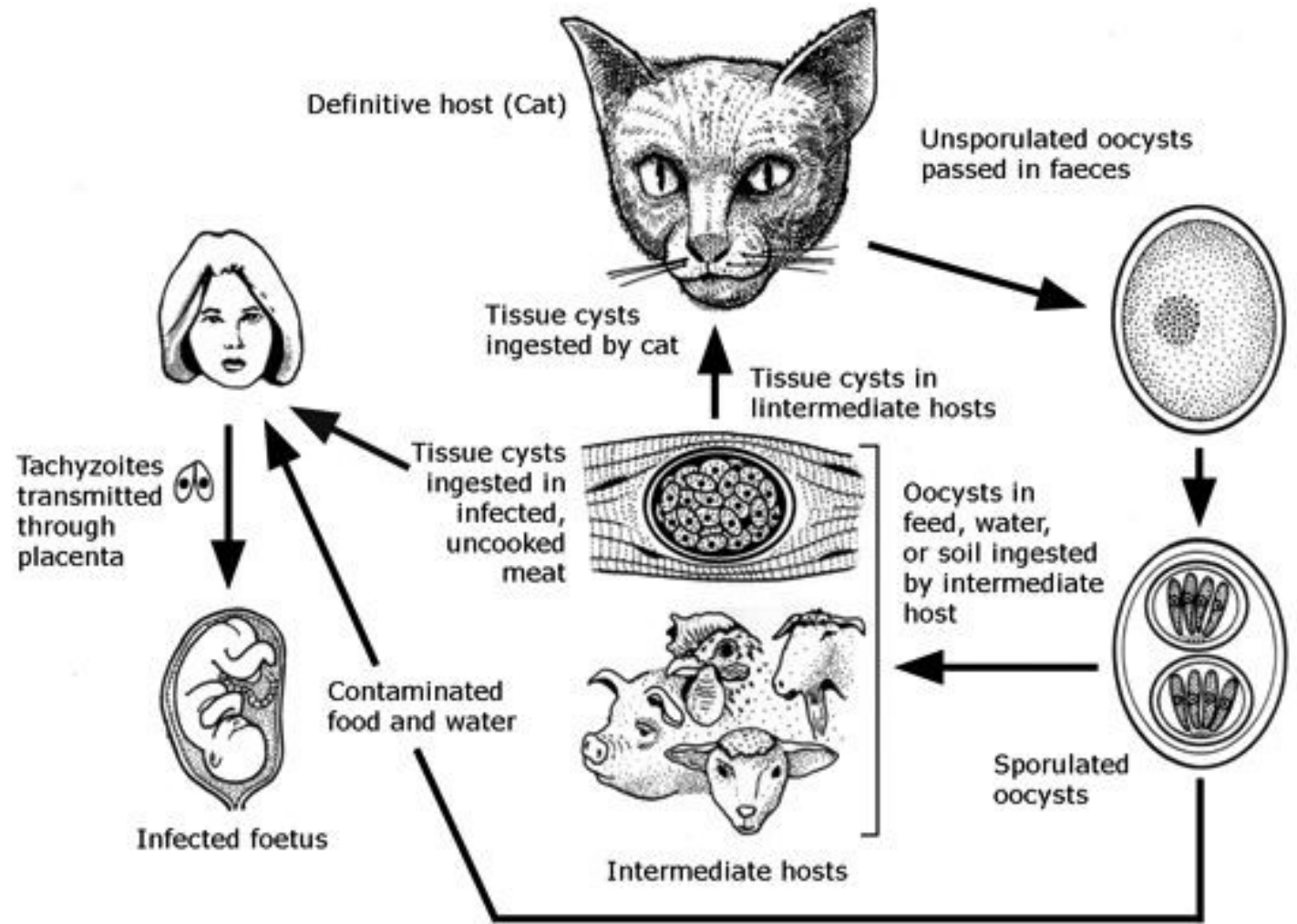
unpasteurized dairy



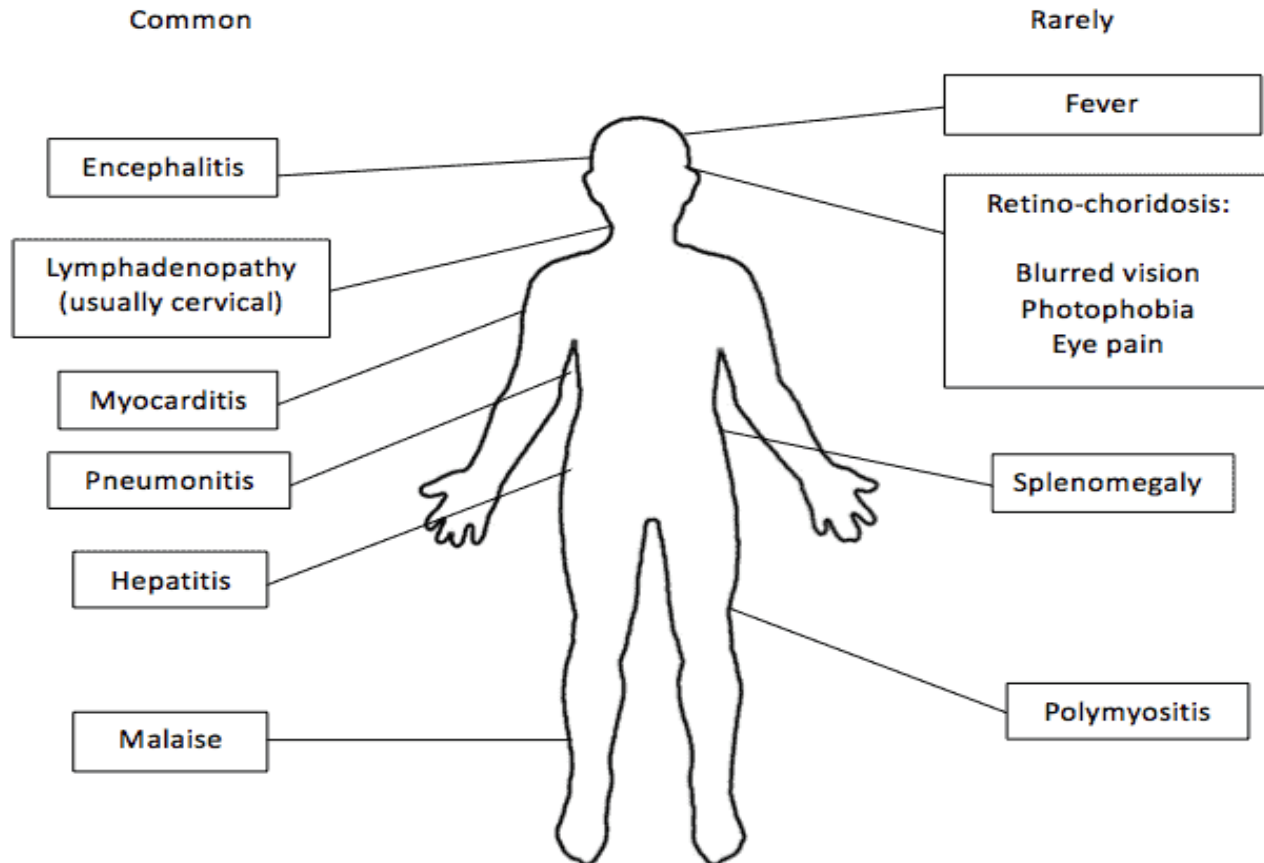
raw seafood



- LIFE CYCLE OF TOXOPLASMOSIS



SIGNS AND SYMPTOMS



Toxoplasmosis

Common Symptoms



fever



fatigue, malaise,
and headaches



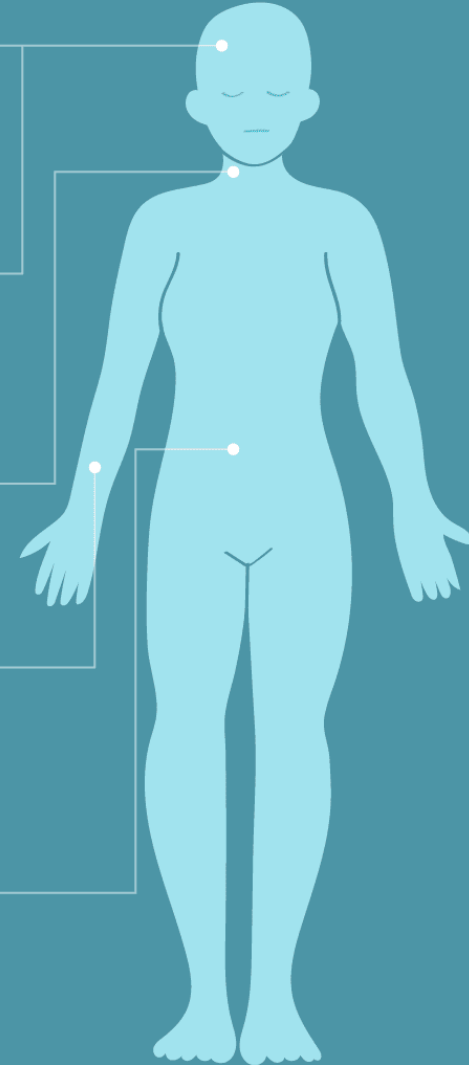
swollen lymph
nodes



myalgia

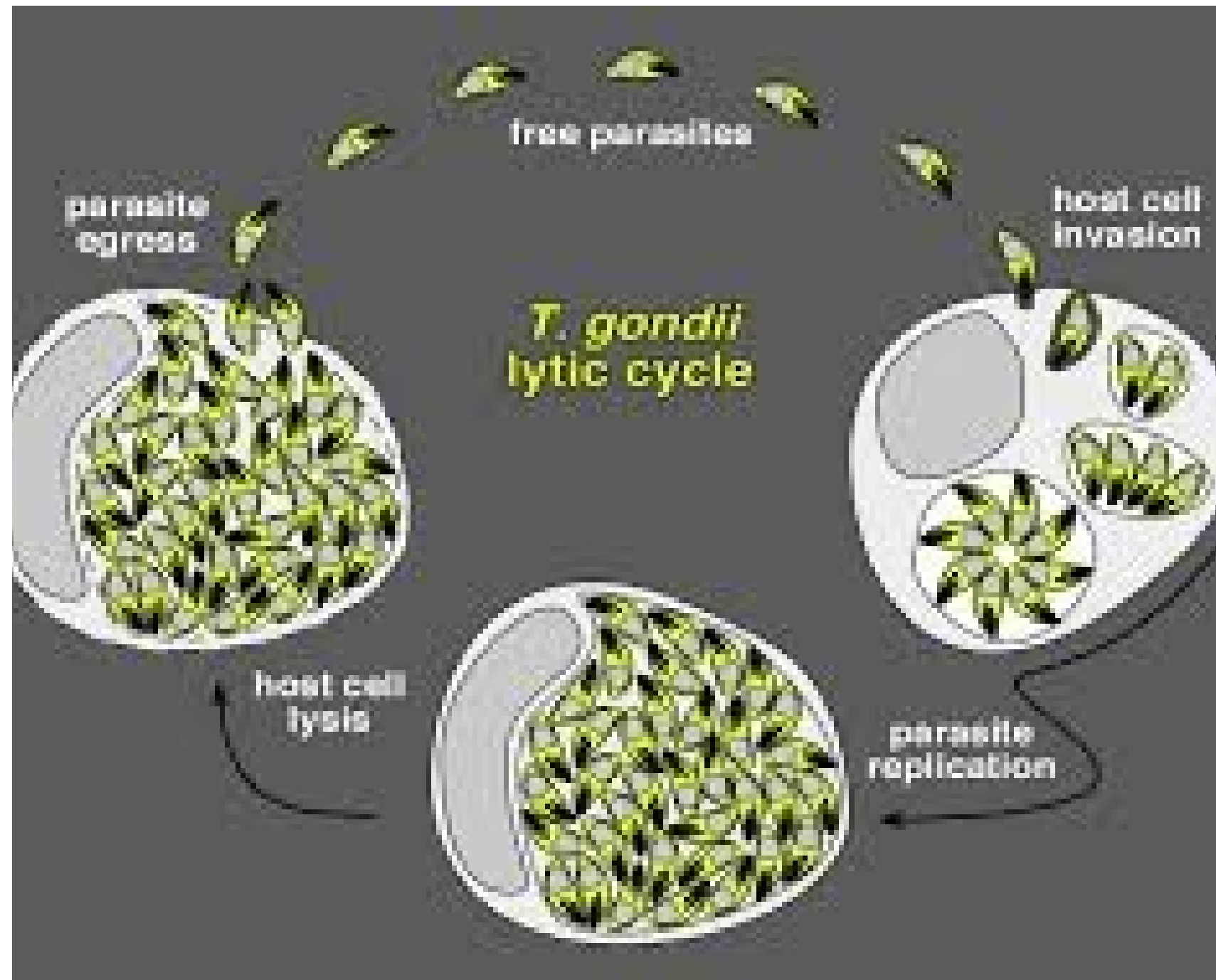


congenital
impacts

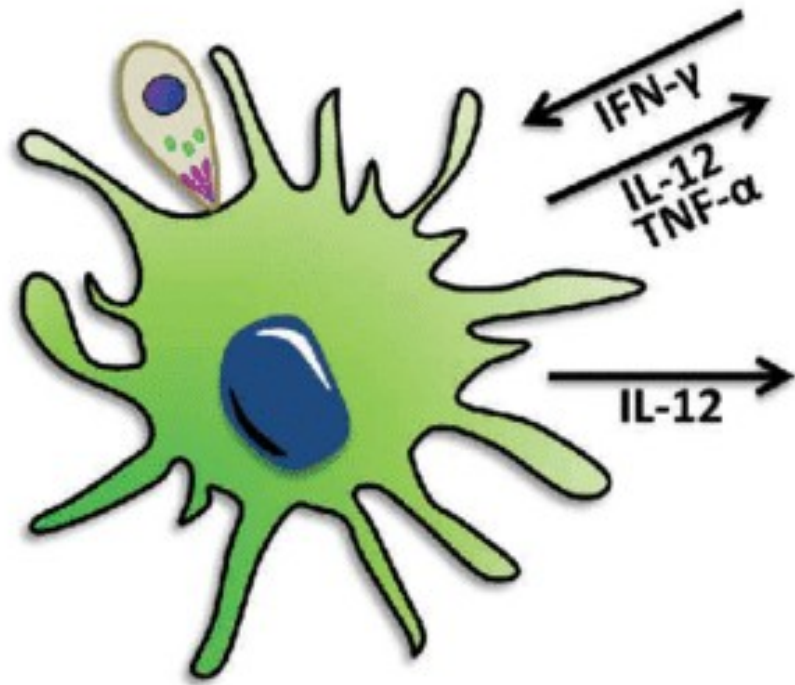


PATHOGENESIS

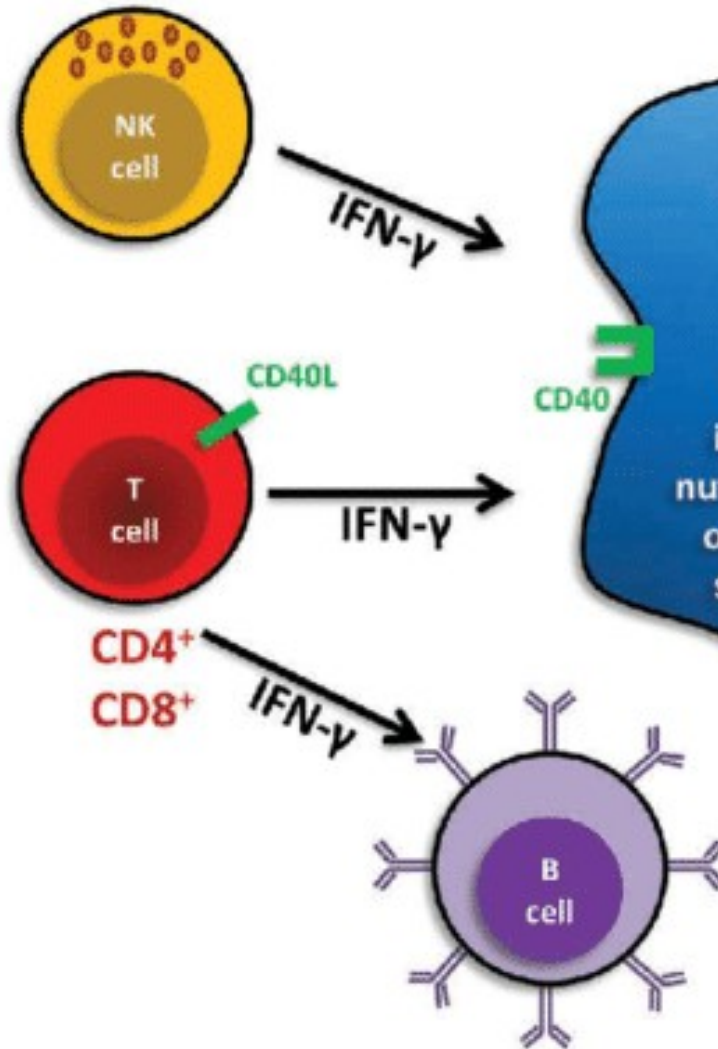
Host cells are destroyed by active multiplication of *T gondii*. Necrotic foci may result. Congenital infection often involves the retina and brain; focal chorioretinitis may result in impaired vision.



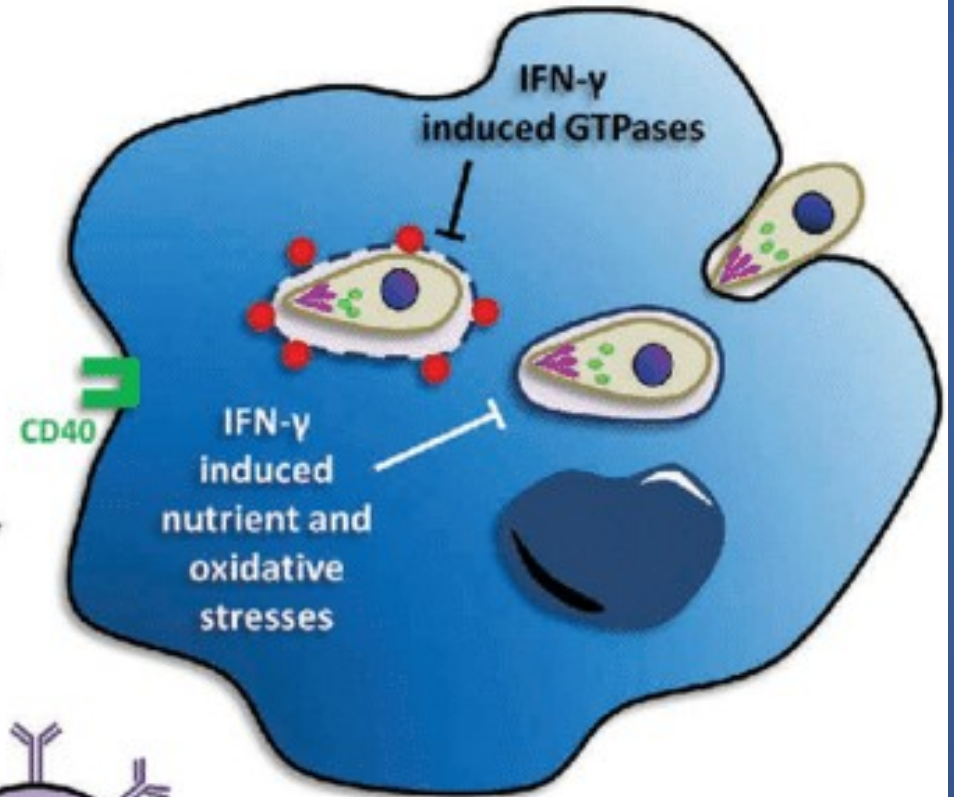
Initial parasite recognition by monocytes, macrophages and dendritic cells



Innate and adaptive responses

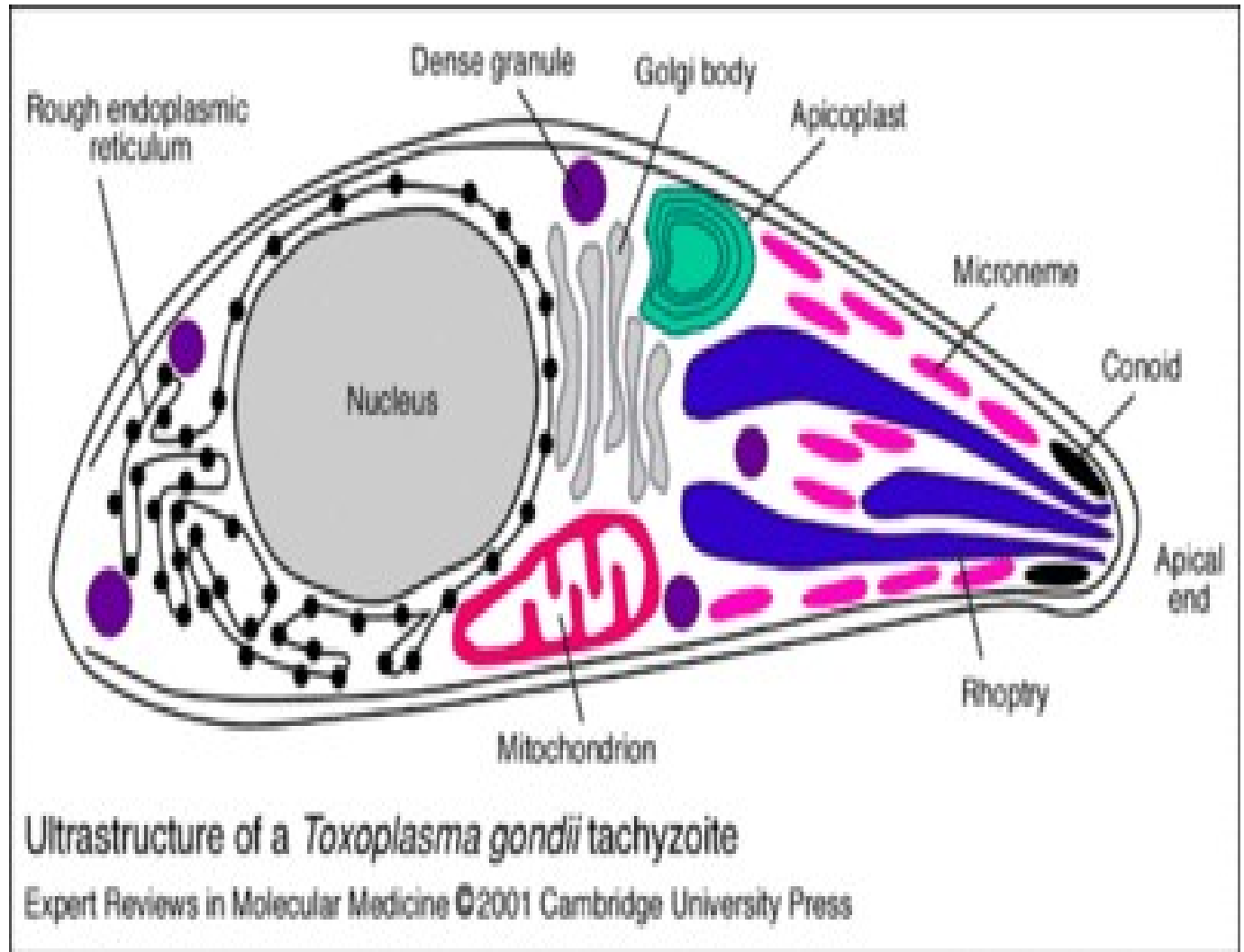


Activated cell



PATHOGENESIS

Host cells are destroyed by active multiplication of *T gondii*. Necrotic foci may result. Congenital infection often involves the retina and brain; focal chorioretinitis may result in impaired vision.



- Most people who become infected with *Toxoplasma gondii* are not aware of it because they have no symptoms at all.
- Some people who have toxoplasmosis may feel as if they have the “flu” with swollen lymph glands or muscle aches and pains that may last for a month or more.
- Severe toxoplasmosis, causing damage to the brain, eyes, or other organs, can develop from an acute *Toxoplasma* infection or one that had occurred earlier in life and is now reactivated. Severe toxoplasmosis is more likely in individuals who have weak immune systems, though occasionally, even persons with healthy immune systems may experience eye damage from toxoplasmosis.



immunocompetent individuals

In immunocompromised individuals

Acute toxoplasmosis

Primary acute toxoplasmosis acquired following immunosuppressive therapy

Chronic toxoplasmosis

Reactivation of chronic toxoplasmosis following immunosuppression

Toxoplasma gondii
Instigated diseases

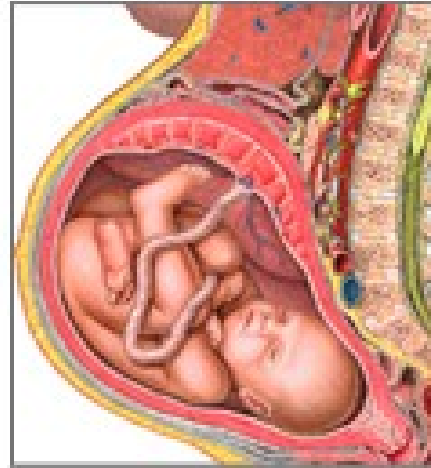
Congenital toxoplasmosis

Ocular toxoplasmosis

Primary acute toxoplasmosis acquired after transplantation of an infected organ

TRANSMISSION

- Accidental ingestion of oocysts after cleaning a cat's litter box when the cat has shed *Toxoplasma* in its feces. Accidental ingestion of oocysts after touching or ingesting anything that has come into contact with a cat's feces that contain *Toxoplasma*.



A fetus may contract toxoplasmosis through the placental connection with its infected mother



The mother may be infected by:

Improper handling of cat litter



Handling or ingesting contaminated meat

CONCLUSION/SUMMARY