Tikrit University

College of Nursing

Basic Nursing Sciences



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Microbiology

(Isospora belli)

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Isospora belli.

Phylum: Apicomplex

Class: coccidia

Introduction:

Cystoisosporiasis or isosporiasis is an intestinal disease caused by

the microscopic parasite Cystoisospora belli. This is the same parasite

that used to be called *Isospora belli* (isos=equal+sporos, seed). The

parasite can be spread by ingesting food or water that was

contaminated with feces (stool) from an infected person. Isospora can

be found worldwide. It is most common in tropical and subtropical

areas.

People become infected by swallowing mature oocyst, for

example, by ingesting contaminated food or water. Infected people

shed the immature form of the oocyst in their feces. The immature

oocyst usually needs about 1 or 2 days in the environment (outside of

people) to mature enough to infect someone else. In some settings, the

oocyst might mature in less than a day.

Isospora usually is spread indirectly, such as through

contaminated food or water. This is because the parasite needs time

to mature. However, oral-anal contact with an infected person might

pose a risk for transmission. It causes mucous diarrea .People with

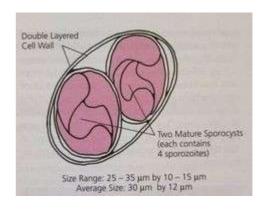
weak immune systems, such as people with AIDS, may be at higher

risk for severe or prolonged illness.

Habitat: lower part of the ileum in small intestine(intracellular

development)

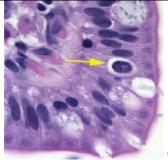
Morphology: A fully mature (sporulated) ooeyst of genus Isospora is a spindle-shaped body that has two sporocysts that contain four sporozoites each. The oocysts of Isospora belli are long and oval



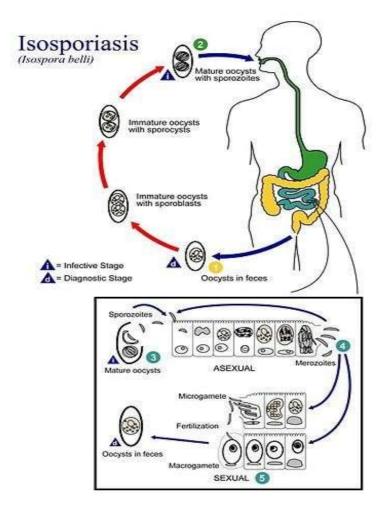
shaped. They measure between 20 and 33 micrometers in length and between 10 and 19 micrometers wide.



Mature oocyst with four sporozoites in each of two sporocysts



Oocyst of *C. belli* in the epithelial cells



Life cycle

At time of excretion, the immature oocyst contains usually one sporoblast (more rarely two).

In further maturation after excretion, the sporoblast divides in two (the oocyst now contains two sporoblasts); the sporoblasts secrete a cyst wall, thus becoming sporocysts; and the sporocysts divide twice to produce four sporozoites each. Infection occurs by ingestion of sporocysts-containing oocysts: the sporocysts excyst in the small intestine and release their sporozoites, which invade the epithelial cells and initiate schizogony.

Upon rupture of the schizonts, the merozoites are released, invade new epithelial cells, and continue the cycle of asexual multiplication 4.

Trophozoites develop into schizonts which contain multiple merozoites. After a minimum of one week, the sexual stage begins with the development of male and female gametocytes.

Fertilization results in the development of oocysts that are excreted in the stool o

Diagnosis

Isospora is too small to be seen without a microscope. The immature oocyst is diagnosed by examining stool (fecal) specimens under a microscope. More than one specimen may need to be examined to find the mature oocyst which sporolates after 48hr

<u>Treatment</u> The infection is treated with prescription antibiotics.

The usual treatment is with trimethoprim160mgsulfamethoxazole800mg twice daily for 2-3 weeks.

Prevention and control; Avoiding food or water supply that might be contaminated with stool may help prevent infection. Wash your hands with soap and warm water after using the toilet, changing diapers, and before handling food. Teach children the importance of