

# **Stool examination for intestinal parasitic infections.**

**Prof. Victor Mwanakasale  
(BSc, MB, ChB, MSc, Dip, PhD)**

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## **Objective of the lecture:**

Students to learn:

1. Laboratory methods for the diagnosis of intestinal parasitic infections.
2. Methods of preserving stool samples for deferred parasitological examination.

## **Format of the lecture.**

- 1. Macroscopic examination of stool**
- 2. Microscopic examination of stool**
- 3. Non-routine (Special laboratory diagnostic tests)**
- 4. Staining of protozoan parasites**
- 5. Diagnostic features of intestinal protozoa**
- 6. Diagnostic features of intestinal helminths**
- 7. Collection and preservation of stool specimens**

## Indications for stool examination\*.

- Requested when investigating :
  1. Infections (bacteria, fungus, virus, **parasites**).
  2. GIT bleeding
  3. Metabolic disorders.

## Intestinal parasites.

1. Protozoa (single celled parasites)
2. Helminthes (worms)

## Stages examined in stool samples:

### 1. Protozoa:

- Cyst (resistant stage)
- Trophozoite (fragile and motile stage)

### 2. Helminthes:

- Ova (eggs)
- Larva (immature worm)
- Adult worm (whole, segments)

## Examination of stool.

1. **Macroscopic (gross)**
2. **Microscopic**

## **Macroscopic examination.**

- Features examined:
  - i. Consistency
  - ii. Composition
  - iii. Colour
  - iv. Presence of adult worms/segments.



## Consistency\*:

- Physical status of the stool .
- Stool can be:
  - i. Formed**
  - ii. Semi-formed/unformed**
  - iii. Liquid**

## Formed stool

- Normal shape (More water has been reabsorbed and there are more cysts and few)

## Semi-formed or unformed

- Soft and no regular shape -diarrhea

## Liquid

- Note colour, flakes of mucus or blood present

## Composition\*.

### **i. Blood and mucus:**

- ulceration or colitis
- E.g blood diarrhoea may be caused by bacteria/parasites

### **ii. Bulky stool:**

- Malabsorption
- It signals a parasitic infection

## Colour\*.

### i. **Pale yellowish:**

- **Steatorrhoeic conditions**
- **Examples:** Fat Malabsorption which occurs in certain parasite infections

### ii. **Dark or black stools:**

- **Examples:** May be caused by drugs that contain iron, bismuth, certain foods e.g biscuits like Oreos

## Adult worms.

i. Whole adult worm:

- *Ascaris* (roundworm)

ii. Segments:

- Tapeworm

## Microscopic examination.

1. Direct (**wet mount**)
2. Concentration

## Direct \*

- **No staining**
- **Observe cellular exudate, motile trophozoites, other parasitic stages, food, bacteria, yeast, fat globules.**

## Type of stool:

1. **All fresh stools-semi formed/unformed, liquid (less than 4 hrs old after voiding).**
  2. **Stool with blood and/ or mucous (dysenteric stool).**
- **For trophozoites examine unformed stool as soon as possible (< 1hr after voiding).**

## **Procedure:**

- Apply a sample of stool on a microscope slide
- Add a drop of normal saline
- Cover with coverslip
- Examine under the light microscope



## Concentration.\*

- To increase possibility of finding parasite stages (eggs/ova, cysts, larvae) in the stool **sample-too scanty** to be seen on Direct Microscopy.
- **Larger** volume of stool examined
- Trophozoites **destroyed** and cellular debris **distorted**- in most conc. methods.
- Does not work well on **liquid** stools
- Can be done on **preserved** stool.
- Should be performed on **every** stool examined.

## **Methods of concentration of stool.**

- 1. Sedimentation**
- 2. Flotation.**

## Sedimentation.

Chemical: Formol-ether

(low specific gravity).

## Procedure.

1. Mix small portion of stool with formol-ether.
2. Centrifuge
3. Parasite stages at **bottom** (sediment).
4. Debris on **top** (poured out)
5. Examine **sediment** on a microscope slide and covered with a coverslip under light microscopy.

## **Flotation.**

Chemicals with high specific gravity (any of the following):

1. Zinc sulphate
2. Sodium chloride
3. Magnesium sulphate
4. Sucrose solution
5. Sodium dichromate
6. Sodium nitrate
7. Hyper saturated sugar solution
8. Magnesium sulphate + 5% Potassium Iodide

## Procedure.

1. Mix a portion of stool with chemical
2. Centrifuge
3. Debris at **bottom** of tube
4. Parasite stages **float**-touch microscope slide on top of tube
5. Examine float on microscope slide under light microscopy

## Special laboratory diagnostic tests for intestinal parasites.\*

- Non-routine tests.
- Light Microscopy based:
  - i. Kato-Katz method (eggs/g of stool).
  - ii. Cellulose tape (cellotape/scotch tape) technique (eggs/ova).
  - iii. Perianal morning wash (eggs, adult worms).
  - iv. Rectal snip/biopsy (eggs/ova).
  - v. Entero-capsule/string test (trophozoites, larva).

## Diagnostic features of protozoan parasites.\*

Intestinal protozoa exist as:

1. **Trophozoites** (vegetative, motile)
  2. **Cysts or oocyst** (protective wall)
- Both cysts and oocysts are the **infective** stage of protozoa

## Features of the cyst.\*

- Round/oval in shape.

1. Size.

2. Nuclei.

3. Glycogen.

4. Chromatoid/chromidial bodies (bars/rods).



## Features of trophozoites.

- i. **Size**
- ii. **Organelles of movement** (flagella, cilia, pseudopodia)
- iii. **Shape**
- iv. **Nuclei** (number)
- v. **Presence ingested red blood cells**

## Staining of protozoa.\*

- Stains for **diagnostic features** of **cysts** and **trophozoites** in stool specimens:
  - i. Temporary.
  - ii. Permanent .

## Temporary stains.\*

- i. Lugol's Iodine
- ii. Burrow's stain
- iii. Acridine orange
- iv. Eosin
- v. Sargeaunt

## Permanent stains.

- i. Giemsa
- ii. Trichome (Modified Gomori)
- iii. Modified Ziehl neelsen

*yeast*



*Giardia lamblia cysts*

20µm



## Diagnostic features of intestinal worms\*.

### 1. Larva and eggs (ova):

- i. Size
- ii. Shape
- iii. Surface appearance

### 2. Adult worms:

- i. Segments
- ii. Shape (whole)-round/flat.

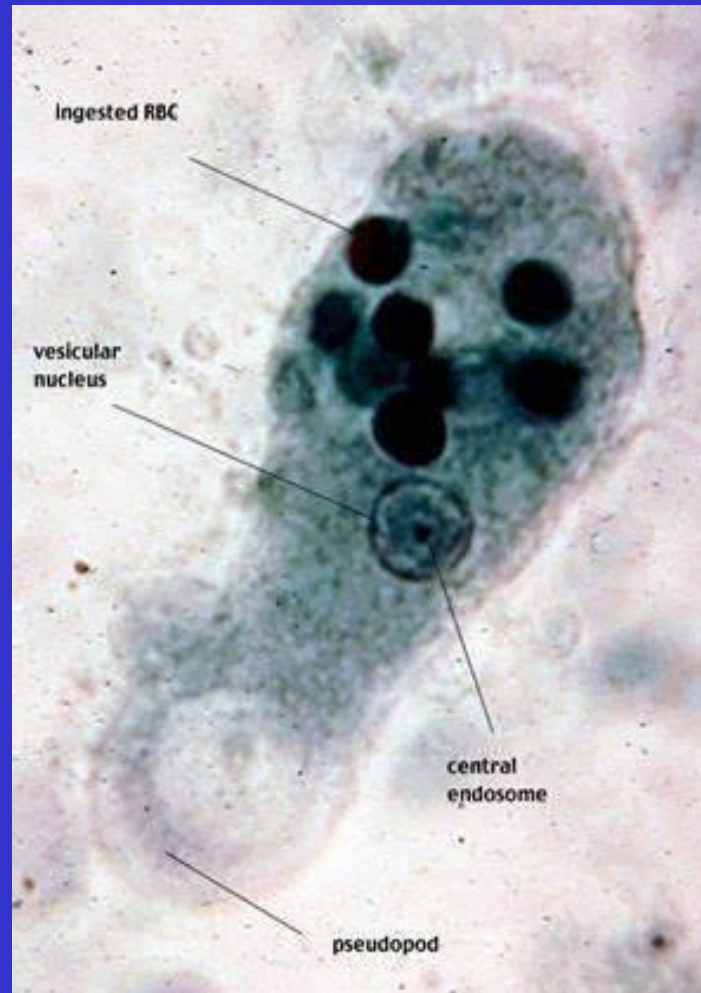
# *Trichuris trichiura* egg

*hyaline*  
*polar plugs*

20µm



# *Entamoeba histolytica* trophozoite





## **Collection and preservation of stool specimens.\***

- Stool samples not examined soon as passage
- To prevent alteration of characteristic morphology of different stages of parasites.
- **Methods**
  - i. Temporary
  - ii. Semi permanent
  - iii. Permanent

## Temporary preservation

- Refrigeration at 3-5°C in a closed container.
- Preserves protozoan cysts for several days.

## Semi permanent preservation\*.

1. Formalin (5%)
  2. Polyvinyl alcohol (PVA)
  3. Merthiolate-Iodine-Formalin (MIF).
- 
- All preserve for several months

## Formalin

- All helminthes stages & protozoan cysts)

## PVA

- Protozoan trophozoites & cysts

## MIF.

- All stages of helminthes & protozoa

## Permanent preservation.\*

➤ For **protozoan cysts** and **trophozoites**.

- Faecal smears **stained** with:

- i. **Iron-hematoxylin**

- ii. **Trichome**

## Type of specimen

1. Fresh faecal specimen

2. PVA preserved (not formalin)

**FIN**