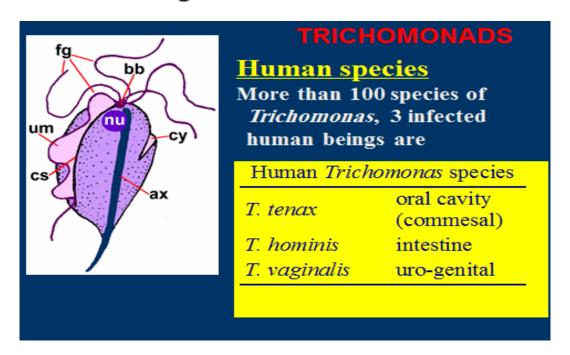
Trichomonas vaginalis



- T.vaginalis is a protozoan with flagella that is capable of surviving in an anaerobic environment.
- It is the most common pathogenic protozoan infection of humans in industrialized countries.
- *T.vaginalis* is one of the most frequently sexually transmitted organisms.

Trichomonas vaginalis is the causative organism of trichomoniasis or urethritis. Size: 7-23 Mm x 5-12Mm

Shape: pear-shaped colorless.

Motility: jerky, rapid, rotate on long axis lashing flagella at anterior end (wobbling or rotatory) movement

Nucleus: 1 near anterior, well defined, many chromatin granules.

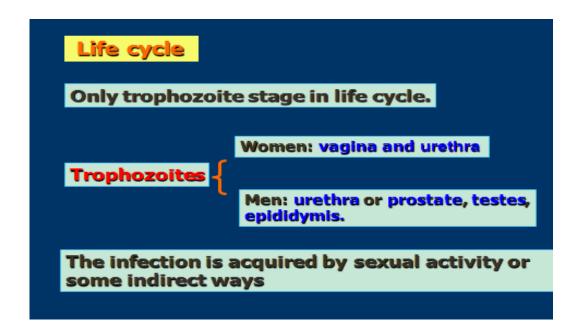
Flagella: 3-6 anterior, an undulating membrane extends ½ length of body.

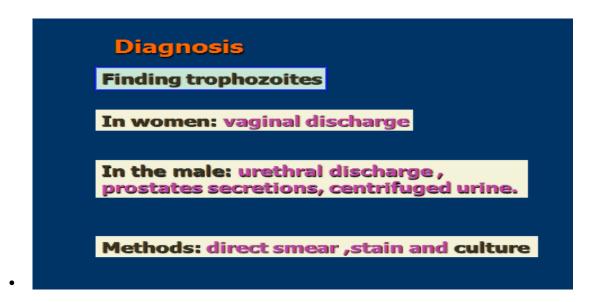
Axostyle extend posteriorly as long spindle

Chromatin (siderophil) : granules are present in the cytoplasm which numerous around the costa and exostyle.

Mode of transmission

- It is a venereal disease. In the absence of cystic stage ,transmission is possible only from direct person to person contact, sexual intercourse.
- Women can acquire the disease from infected men or women, whereas men usually contract it only from infected women.
- Humans and monkeys
- *T vaginalis* inhabits the vagina in women, the prostate and seminal vesicles in men, and the urethra in both sexes.





Diagnosis:-

- To diagnose Trichomoniasis, a health care provider must perform a physical examination and laboratory test (microscopic examination).
- In women, a pelvic examination can reveal small red ulcerations on the vaginal wall or cervix Specimens Suitable clinical specimens include, vagina endo cervical smear

Laboratory diagnosis

Direct microscopy smear:

Microscopic examination of a wet mount preparation is the most reliable technique for making the diagnosis because it is readily demonstrate the active, pear shaped trophozoite with their jerky movement.

Specimens collected from the posterior fornix of female and from urethra of male. A urine specimen is centrifuged and deposited examined

Stained smear examination:

To improve the sensitivity of microscopic evaluations, staining techniques have been used. The use of acridine orange, periodic acid-Schiff and Giemsa stains, have been shown to be more sensitive in some other have not found this technique to be as helpful

pH evaluation with pH paper can help to rapidly differentiate *T. vaginalis* from yeast .The vaginal pH, which is normally pH 4.5, is not altered by yeast infection but is elevated in bacterial vaginitis and often rises above pH 6 in trichomoniasis

Culture media :

Culture has been considered the standard method for diagnosing T. vaginalis infection. Several different media are available for culture (Diamond's modified).

Culture is more sensitive than wet mount preparation because of the lower minimum concentration of organism required for a positive result (100 organisms/mL).

The drawbacks to culture include greater cost and prolonged time to diagnosis (3–7 days).

Serological tests and PCR T. vaginalis has an estimated eight serotypes

(a wide variety of antigenic markers have been seen).

The serological response to *T.vaginalis* is variable among different people who could react to different parasitic antigens. These are not specific in determining recent from remote infection.

Nucleic acid amplification methods such as polymerase chain reaction (PCR) have been used .

Identification of *T.vaginalis* **in men**. Because the majority of men are asymptomatic carriers, the diagnosis of *T.vaginalis* is usually not made.

In the small number of males who are symptomatic urethral discharge collected with a swab would provide the best results using the broth culture technique, with sampling ideally done before first-voided morning urine.

