

Opinion Article

Pregnancy and the incidence of protozoan parasites

Zere Bereket*

Department of Virology, St. Mary's University, Addis Ababa, Ethiopia.

Received: 06-Feb-2023, Manuscript No. AJIDD-23-92192; Editor assigned: 09-Feb-2023, Pre QC No AJIDD-23-92192 (PQ); Reviewed: 24-Feb-2023, QC No: AJIDD-23-92192; Revised: 03-Mar-2023, Manuscript No: AJIDD-23-92192 (R); Published: 10-Mar-2023

DESCRIPTION

Toxoplasmosis is regarded as the most common food-borne illness-related cause of mortality. Toxoplasma parasite, but very few people become ill from it since the immune system typically prevents it from doing so. Toxoplasmosis, however, can have serious effects and should be taken seriously by pregnant women who have recently contracted the toxoplasma parasite as well as anyone who has a weakened immune system.

Cause of Toxoplasma infection

- Consuming shellfish or undercooked, contaminated meat, particularly hog, lamb, and venison (for example, oysters, clams or mussels).
- Accidental consumption of tainted, undercooked meat or shellfish after handling them without adequately cleaning hands (Toxoplasma cannot be absorbed through intact skin).
- Consuming food that has come into touch with raw, contaminated meat or shellfish as well as utensils, cutting boards, and other contaminated items.
- Using water that has Toxoplasma gondi contamination.

Usually, if they had toxoplasmosis before getting pregnant, the immunity will protect the unborn child. Some professionals advise against getting pregnant for six months following a recent infection. Considering its great prevalence, its alleged involvement in neuropsychiatric conditions like schizophrenia, as well as the more deadly form of congenital toxoplasmosis, toxoplasma gondi infection is a clinically relevant illness. This finding of intact Toxoplasma gondi cysts in the ejaculate supports the idea that the infection might be transmitted sexually and encourages further research.

Spread of toxoplasmosis

A significant part of toxoplasmosis transmission involves cats. By consuming infected rats, birds, or other small animals, they

catch the disease. The parasite is then excreted by the cat in its waste. After infection, kittens and cats can continue to excrete millions of parasites in their faeces for up to three weeks. Infected mature cats are less prone to shed toxoplasma than uninfected ones.

If its touching the mouth after changing a litter box or after gardening without gloves, it can unknowingly expose into cats and kittens, who favour litter boxes, garden soil, and sandboxes for excretion. Fruits and vegetables may come into contact with polluted soil or water, and if anyone eat them raw, then risk contracting an infection.

Diagnosis of toxoplasmosis

Serologic testing is commonly used to diagnose toxoplasmosis. To ascertain whether an individual has been exposed to the infection, an immunoglobulin G (IgG) test is employed. A test that detects immunoglobulin M (IgM) is also used in conjunction with other tests, such as an avidity test, if it is required to try to estimate the time of infection, which is important for pregnant women in particular.

Direct examination of the parasite in stained tissue sections, cerebrospinal fluid (CSF), or other biopsy material can also be used to make the diagnosis. Due to the difficulties in collecting these specimens, these approaches are less frequently applied.

Additionally, parasites can be isolated from blood or other bodily fluids (such CSF), but this procedure can be challenging and requires special equipment a long period of time.

In cases of potential mother-to-child (congenital) transmission, molecular methods that can find the parasite's DNA in the amniotic fluid may be helpful.

The appearance of the lesions in the eye, symptoms, the progression of the disease, and frequently serologic testing are used to identify ocular disease.

*Corresponding author: Zere Bereket, Email: bereket20@gmail.com