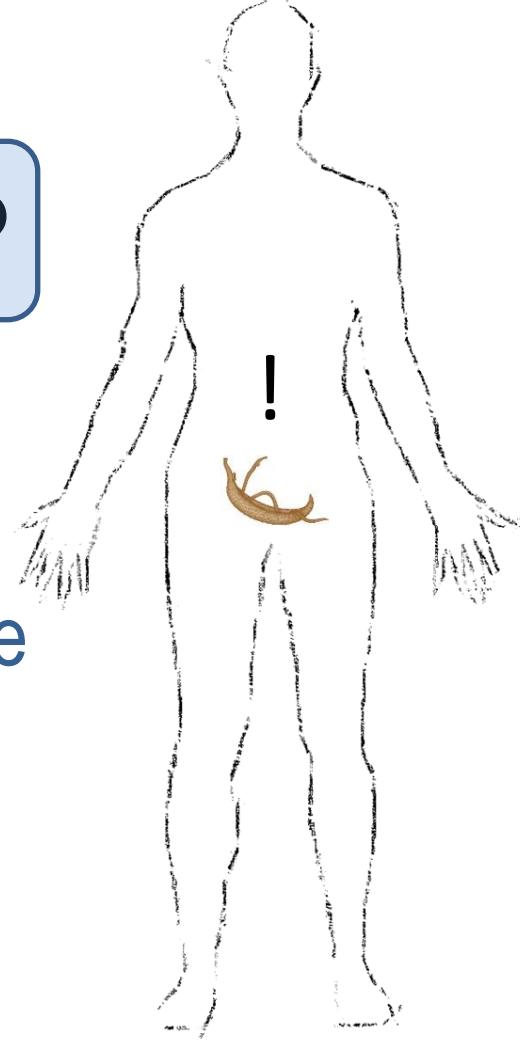


Worm of anti-Worm?

Daniëlle Hanssen

AIOS Medische Microbiologie

MUMC +





21 jaar

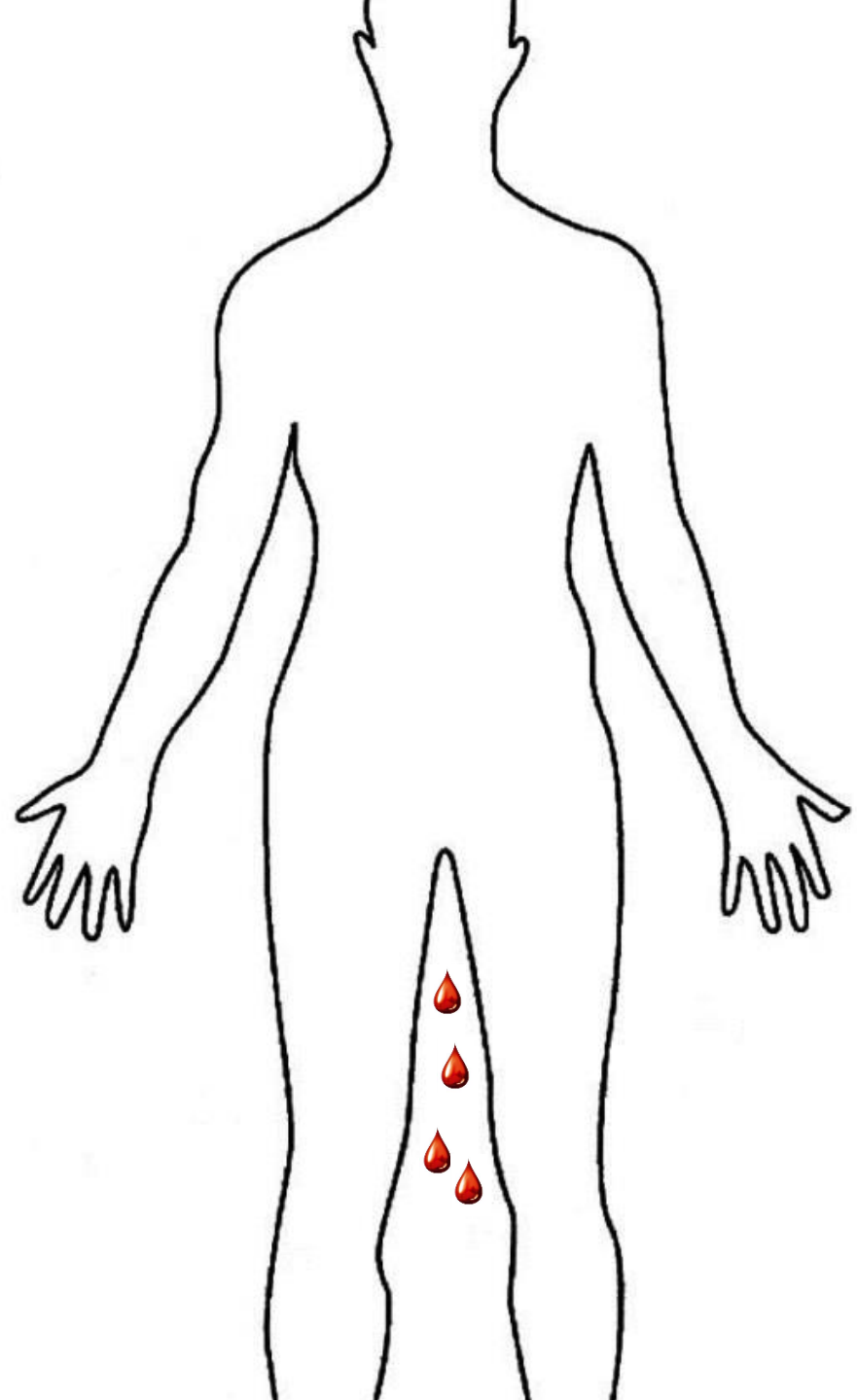
Sierra Leone

8 maanden NL

6 maanden
Intermitterend hematurie

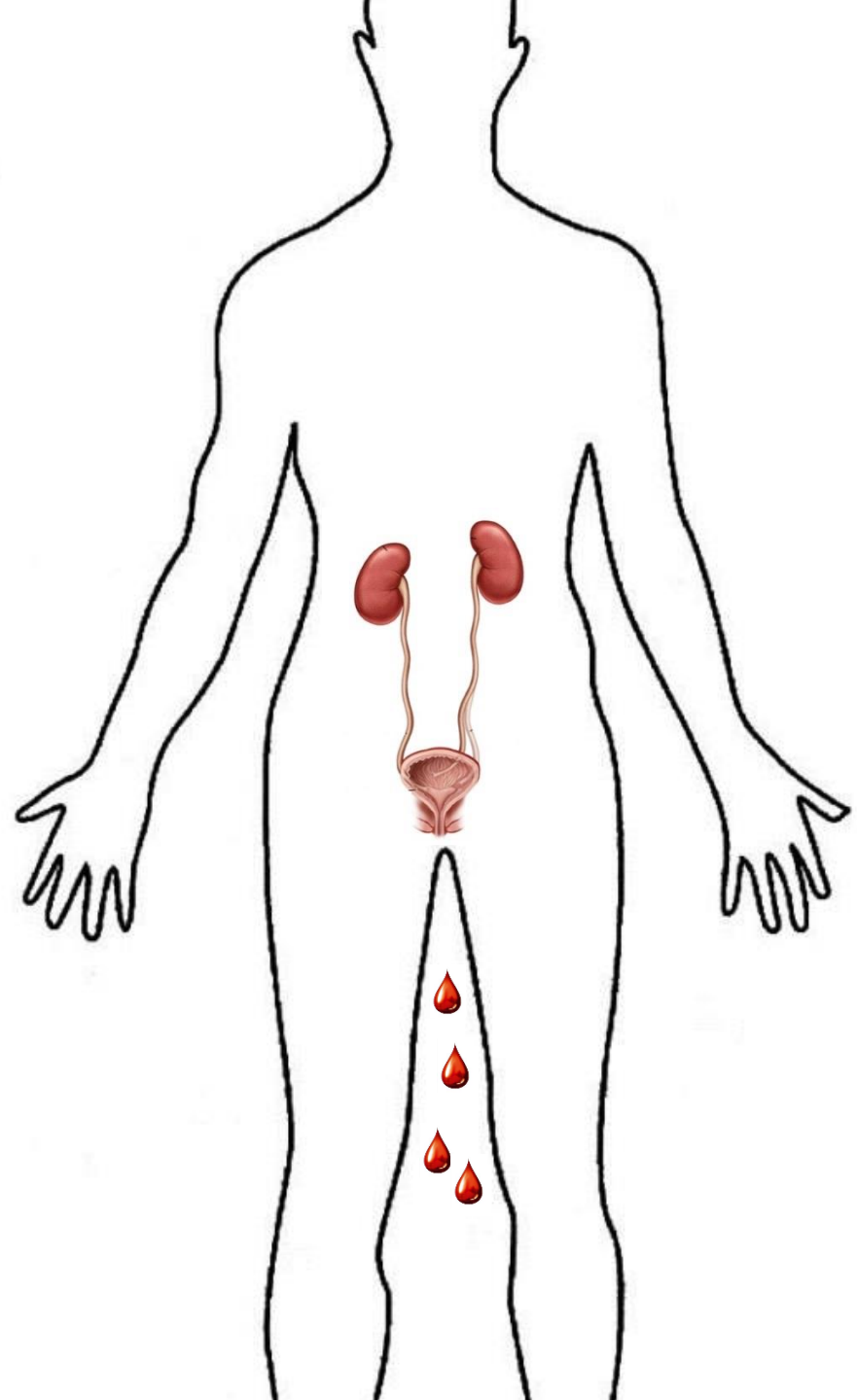
Oriënterend
laboratoriumonderzoek

Urinesediment, urinekweek

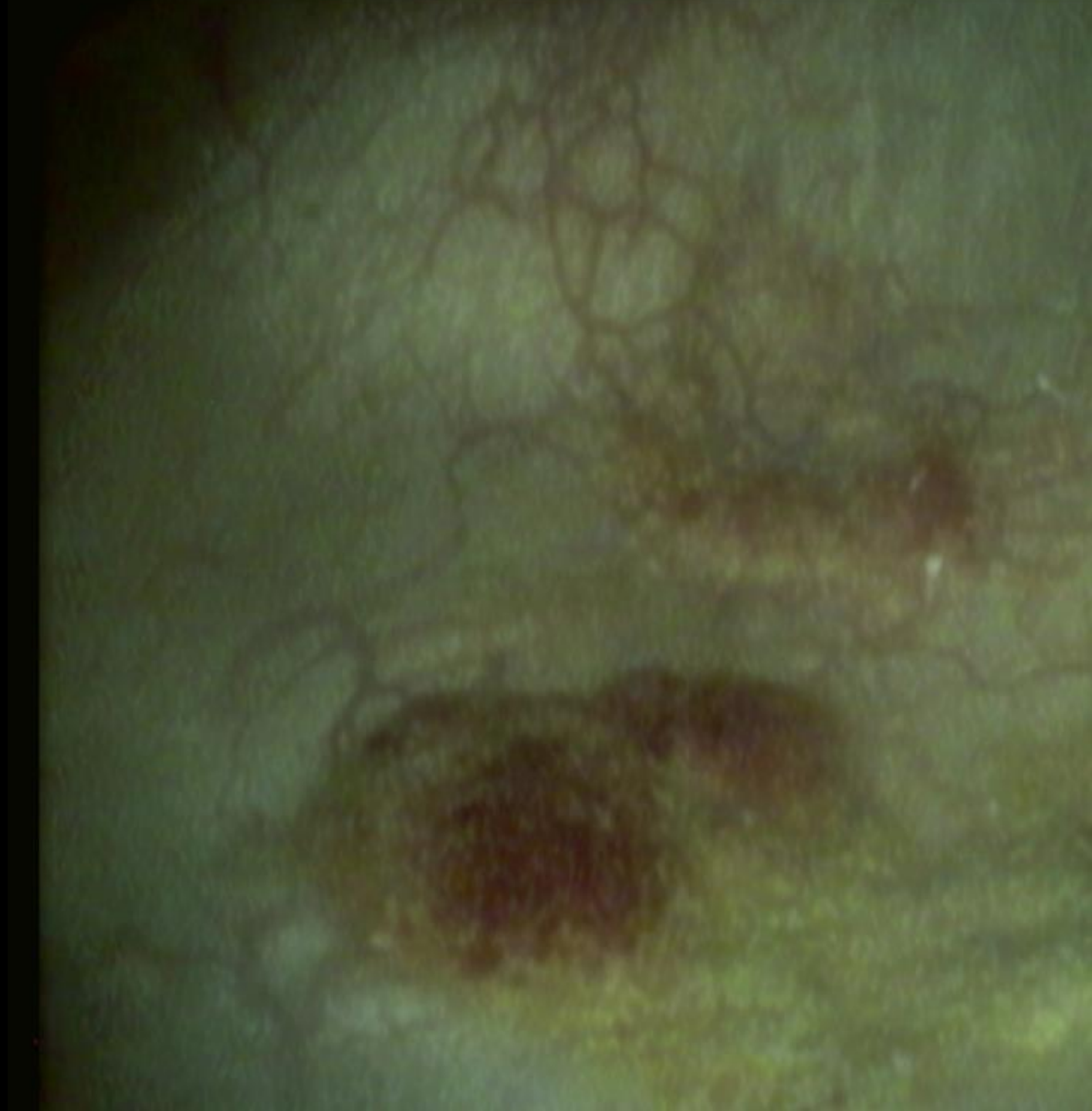


Echo urinewegen

CT urinewegen, cystoscopie

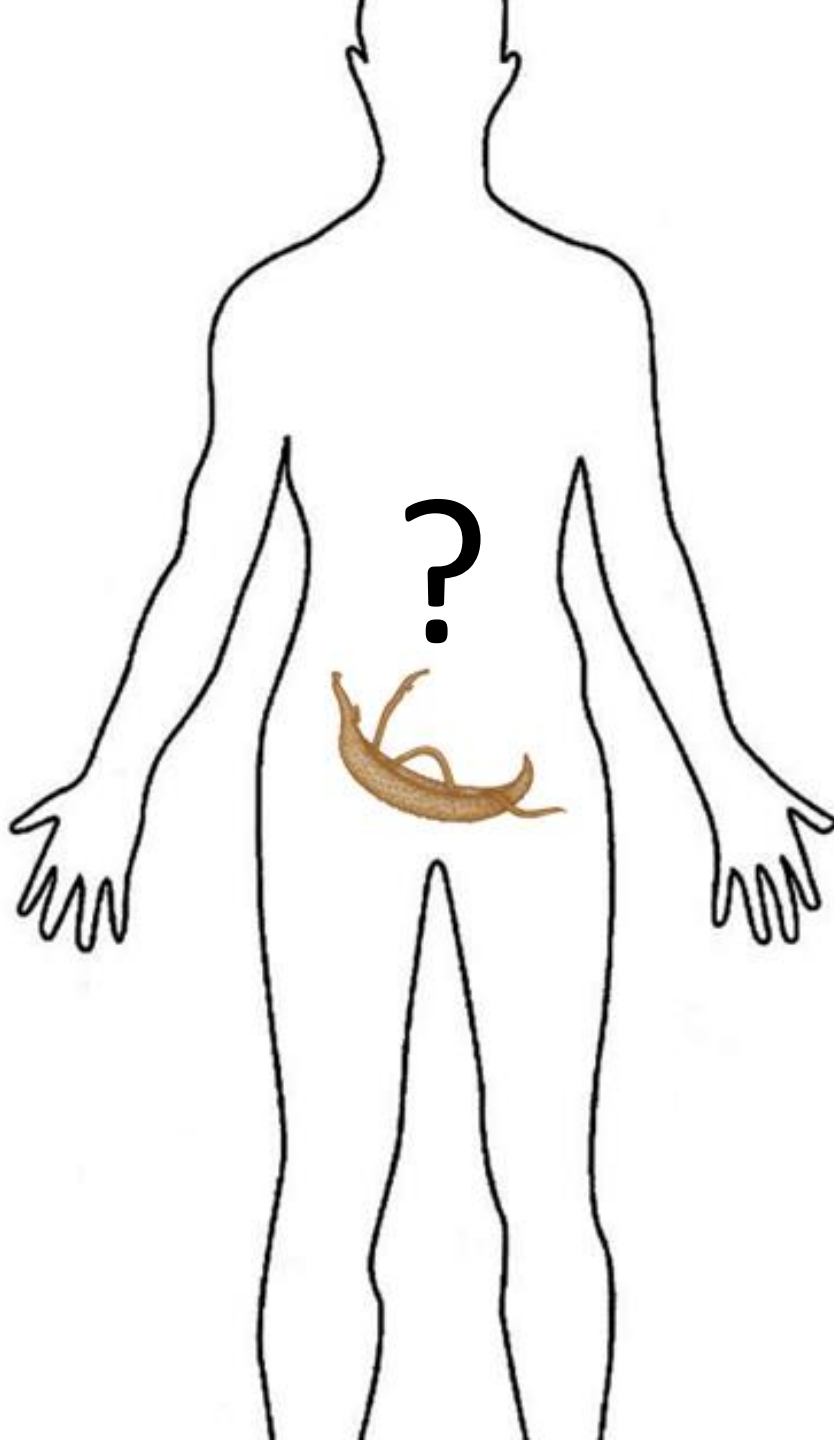






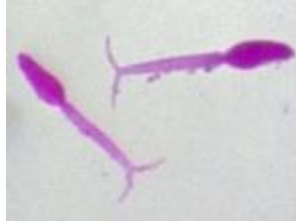


Schistosoma
haematobium?



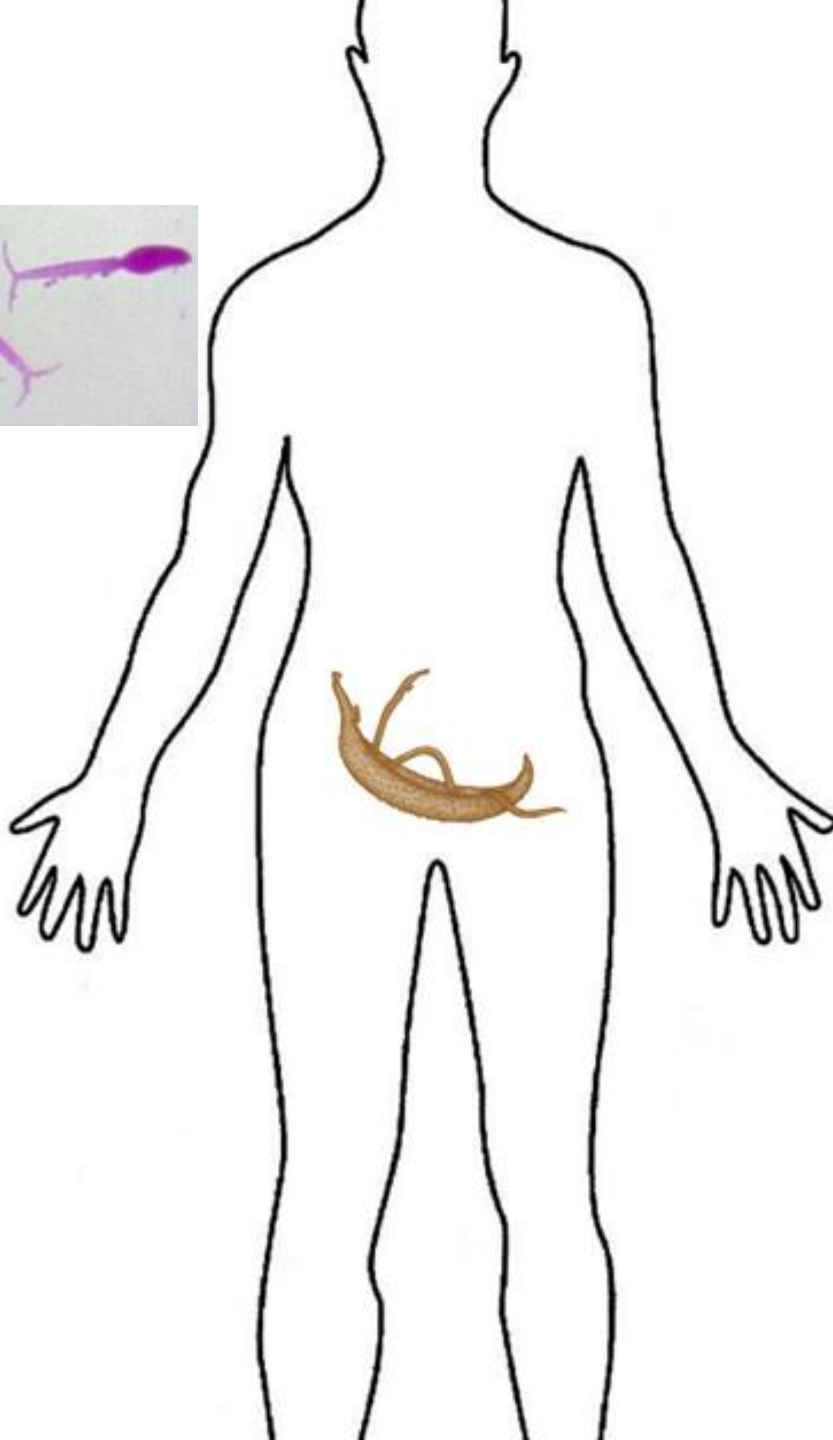


Bulinus



Acute

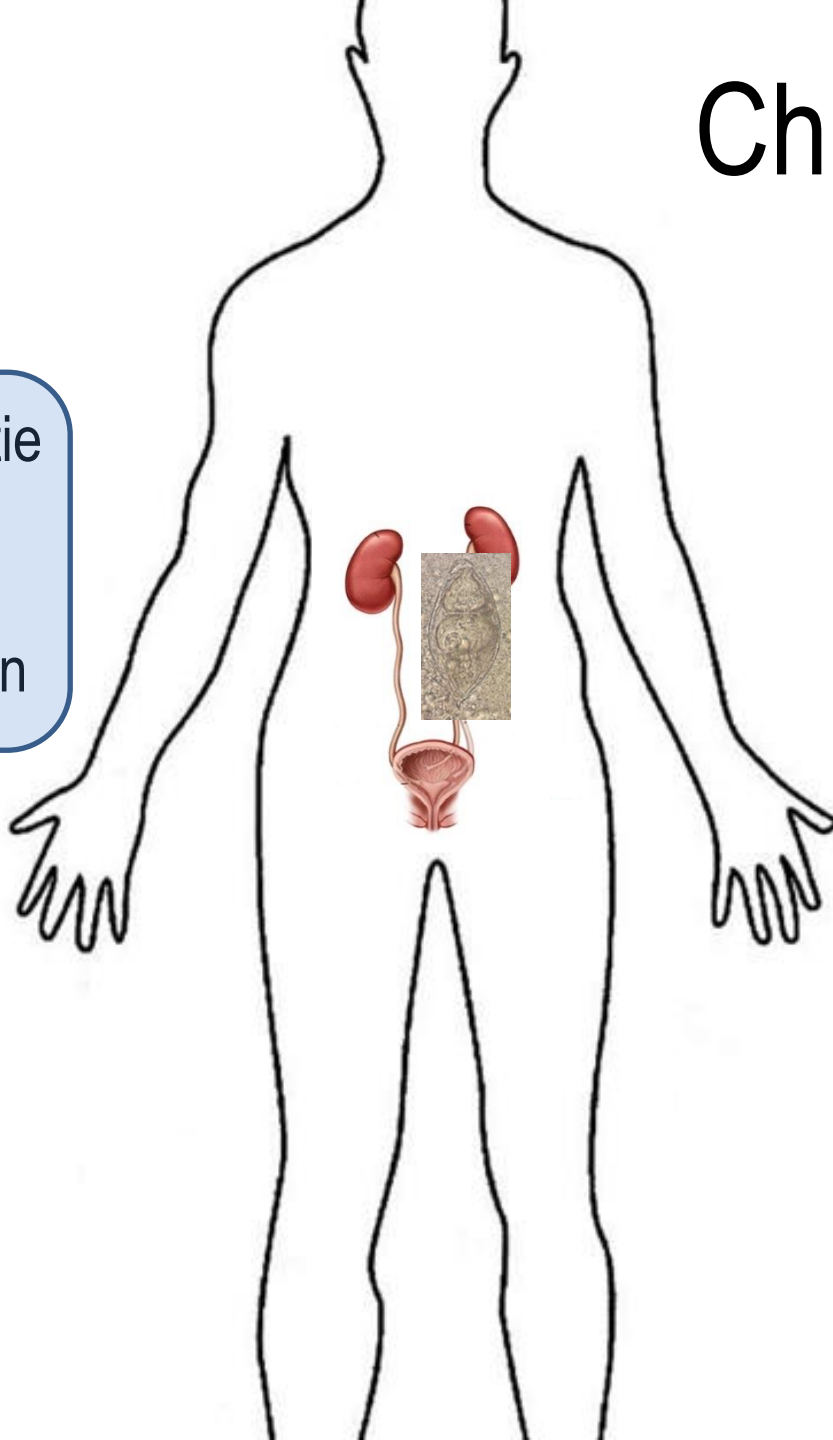
“Swimmers itch”
“Katayama fever”



Chronisch

Symptomen door reactie
op eieren

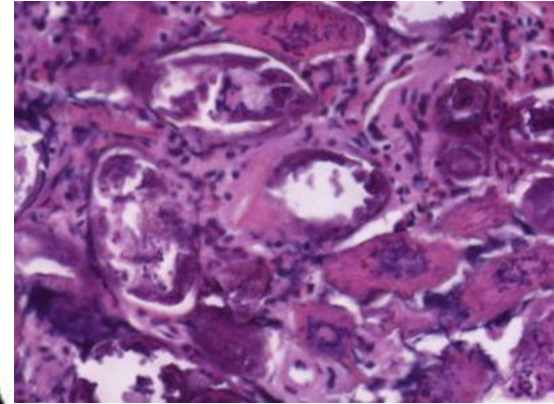
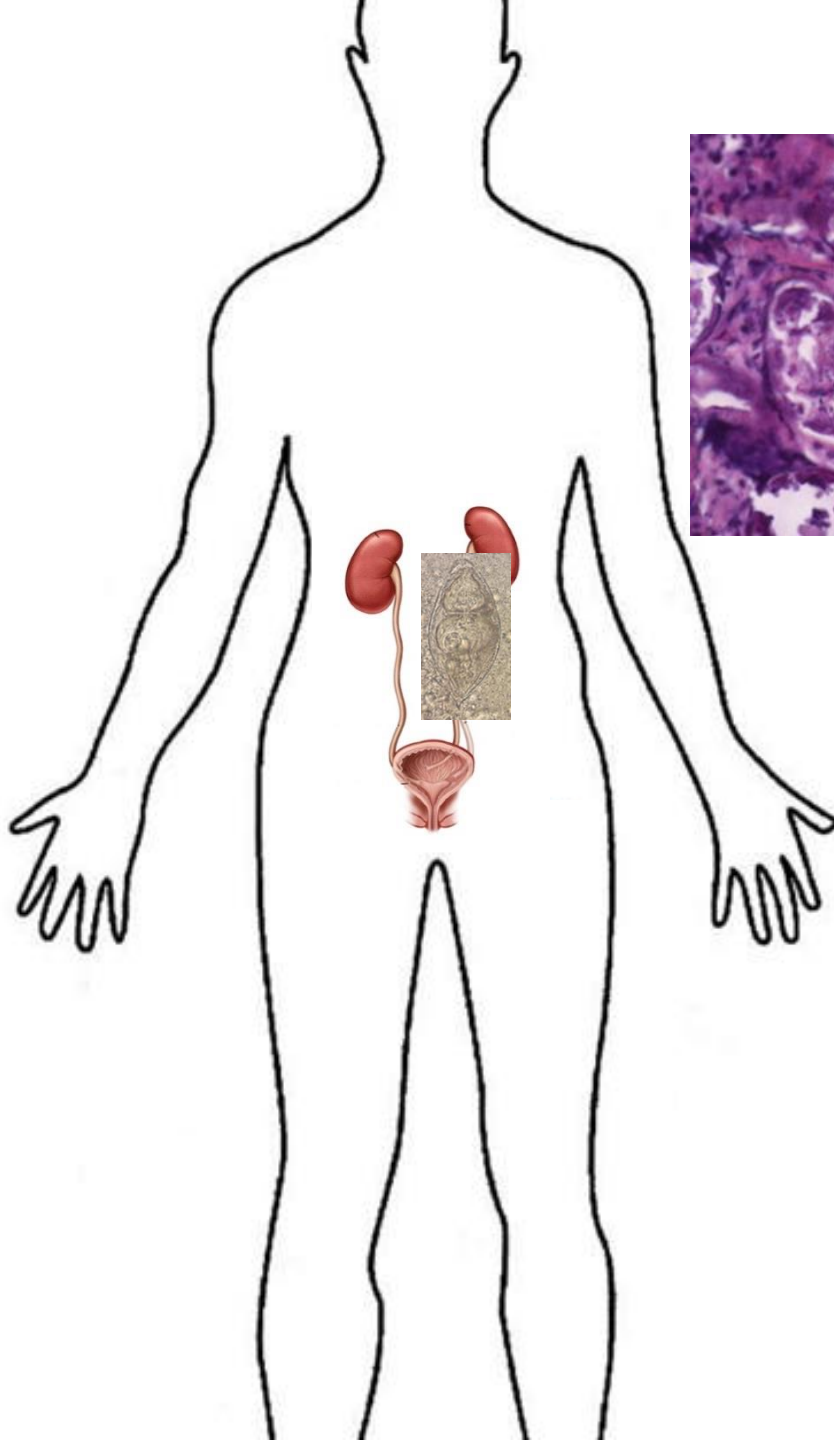
Proteolytische enzymen



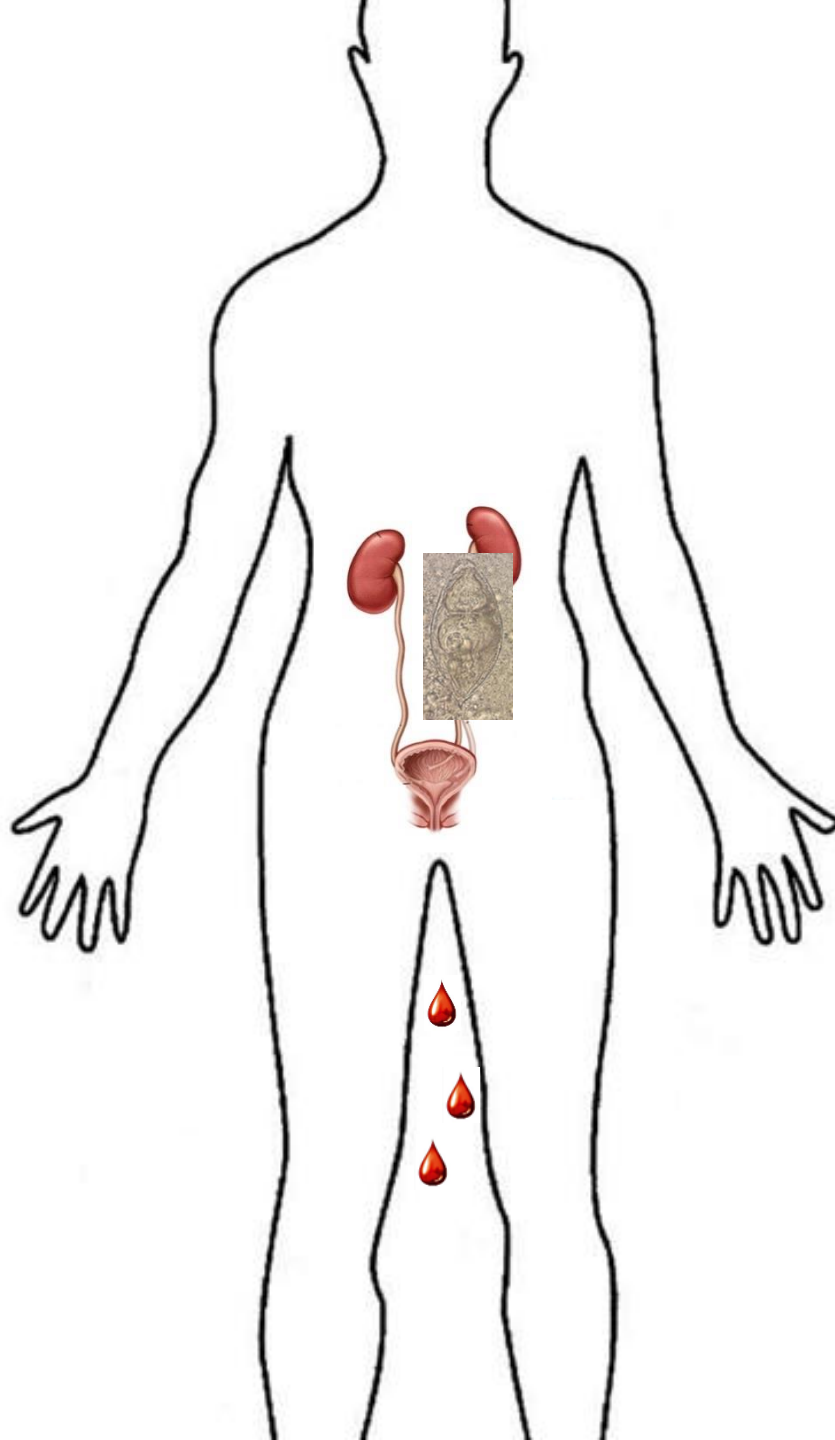
Inflammatoir respons

Granulomateuze
reactie

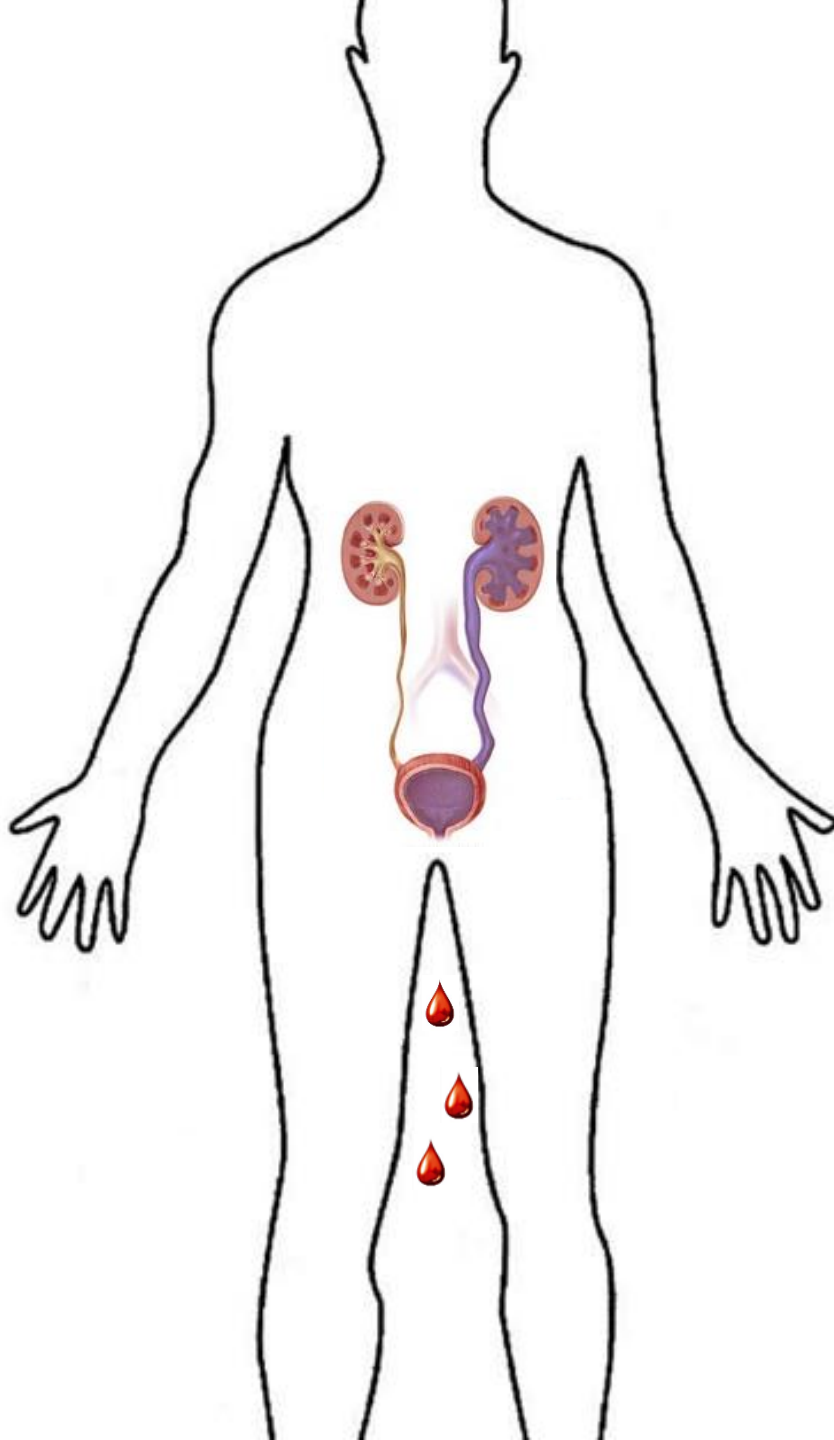
Fibrotische deposits



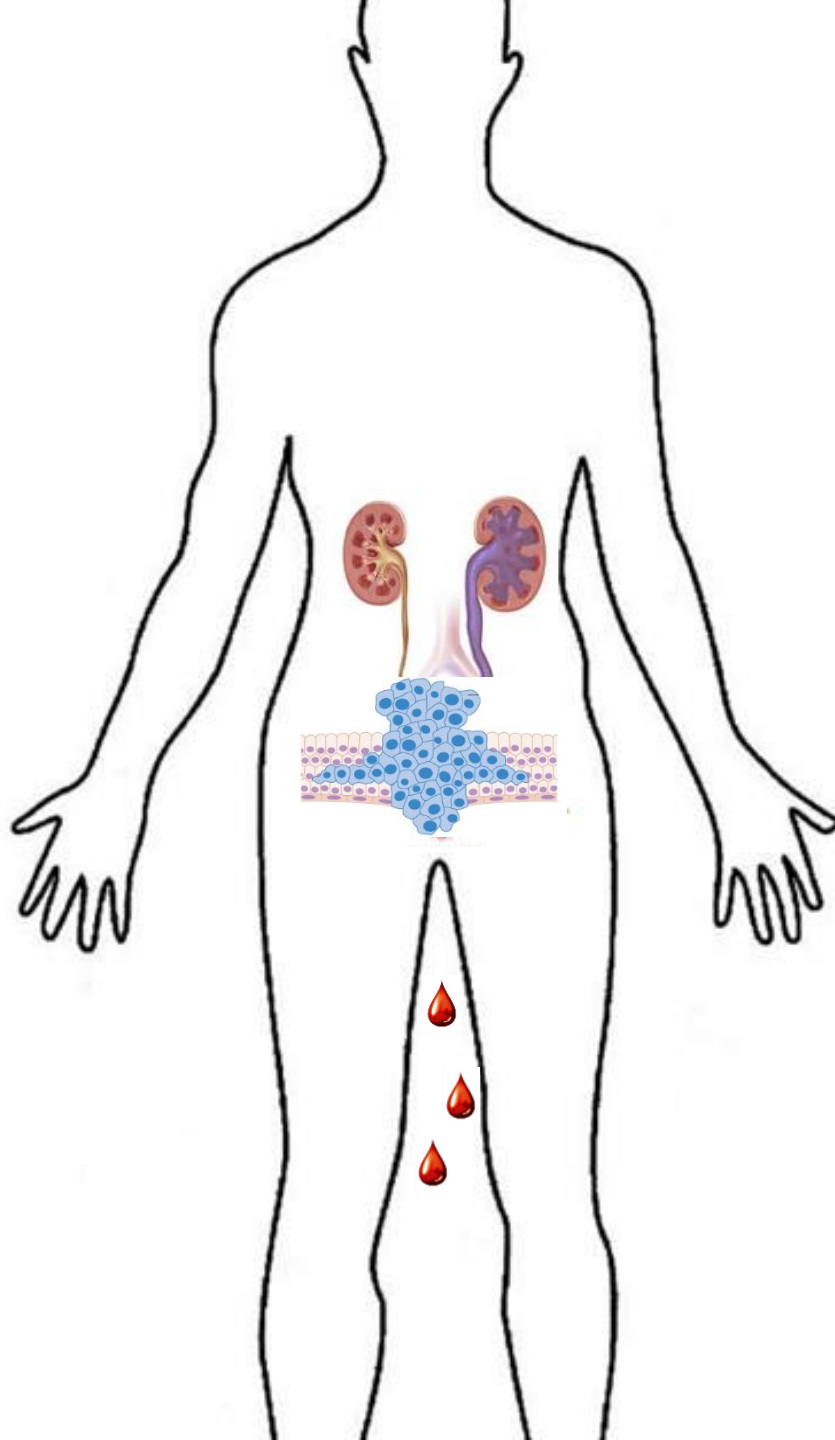
Hematurie



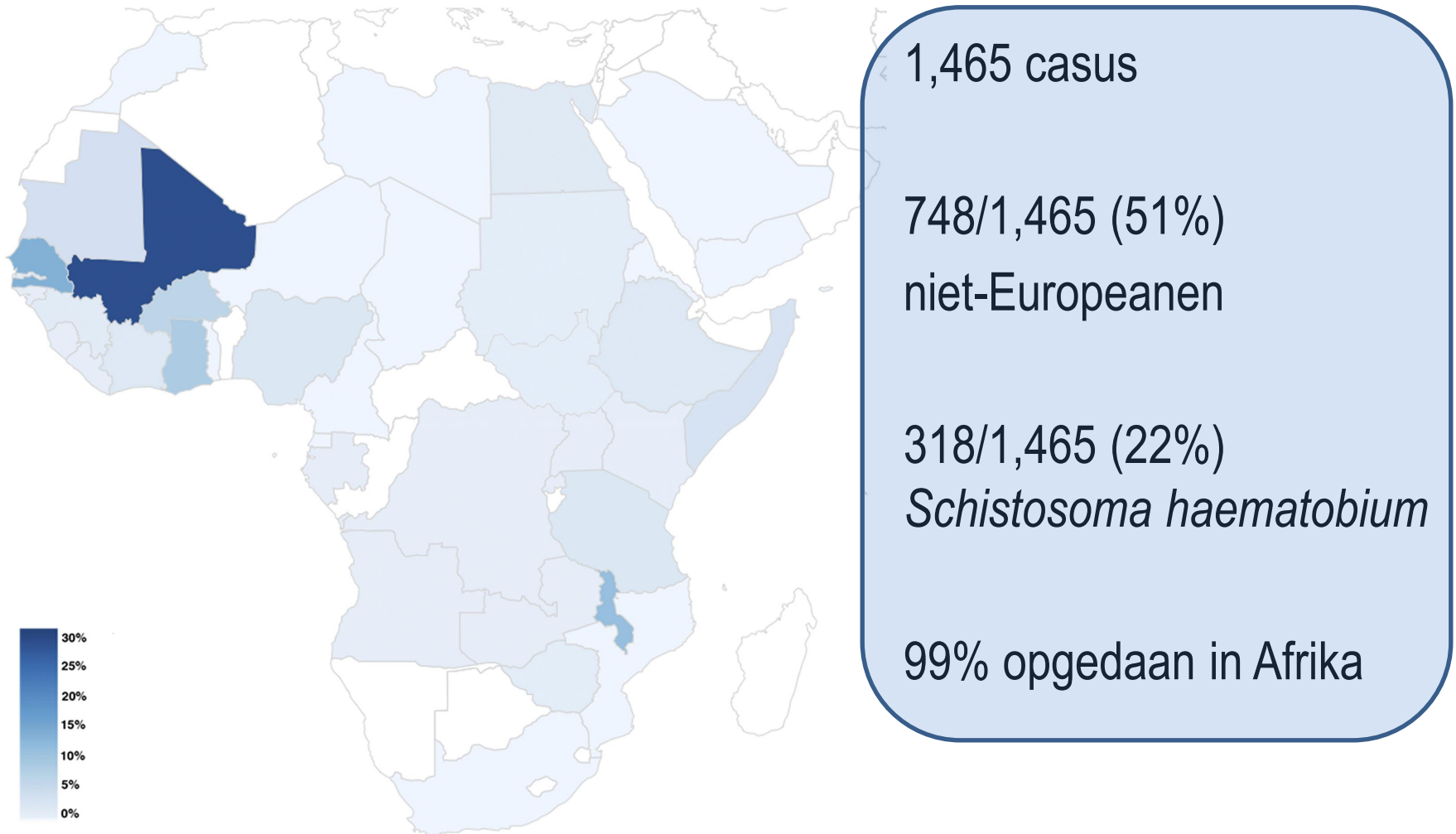
Hematurie
Hydronefrose



Hematurie
Hydronefrose
Plaveiselcelcarcinoom



TropNet Surveillance Data 1997-2010



TropNet Surveillance Data 1997-2010

Klachtenpresentatie

Chronic symptoms in cases of schistosomiasis urogenitalis (*Schistosoma haematobium*, $N = 318$)

Specific chronic symptoms	Total $N = 318$	European (%) $N = 100$	Expatriates (%) $N = 15$	Non-Europeans (%) $N = 203$
Chronic/urogenital symptoms	166 (52 %)	40 (40%)	3 (20%)	123 (61 %)

Subgroep urogenitale schistosomiasis meer niet-Europeanen

Significant vaker presentatie chronische/urogenitale symptomen

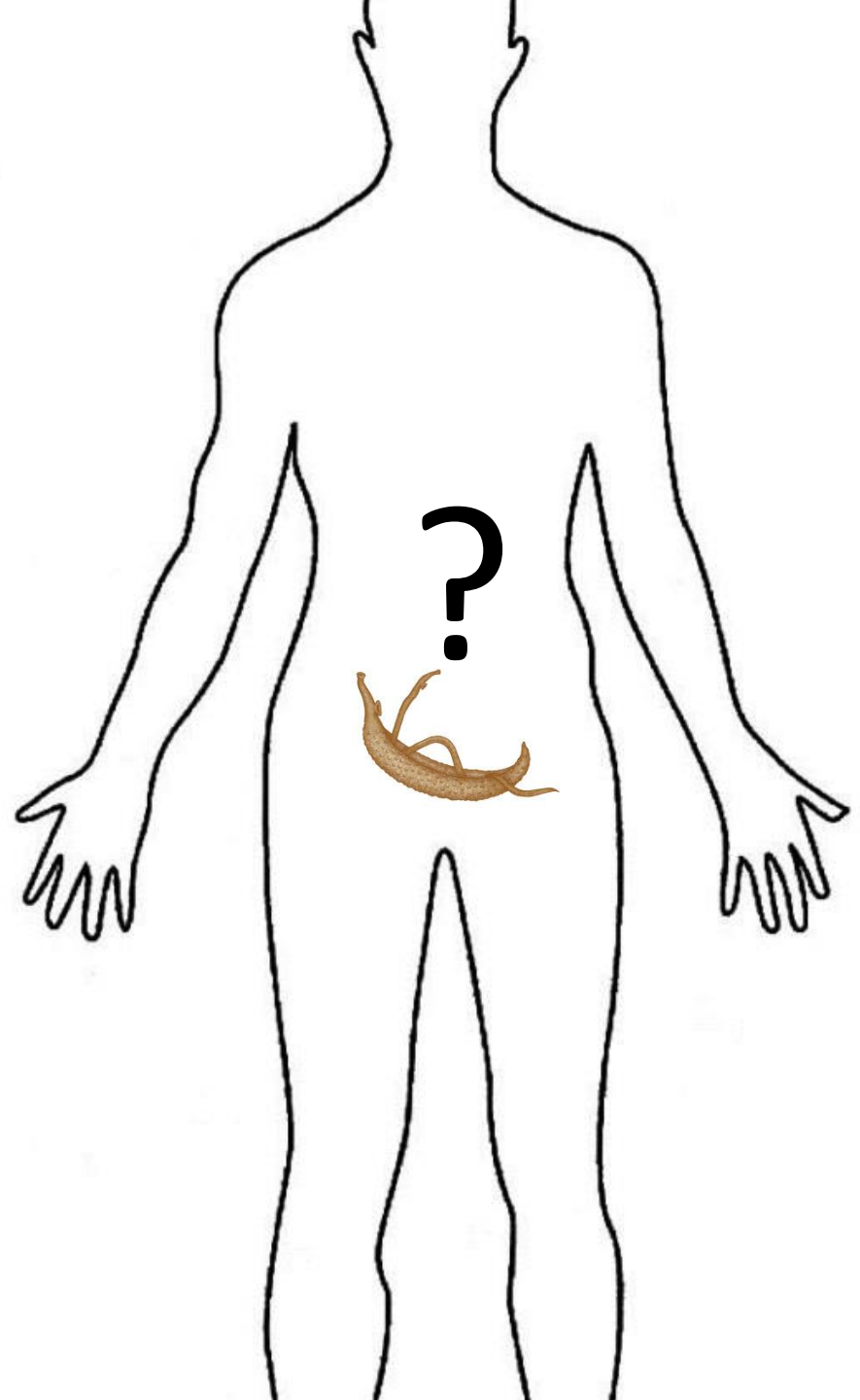
TropNet Surveillance Data 1997-2010

Methode van diagnostiek

Directe pathogeen detectie
Niet-Europeanen 55.5%
Europeanen 43.3%

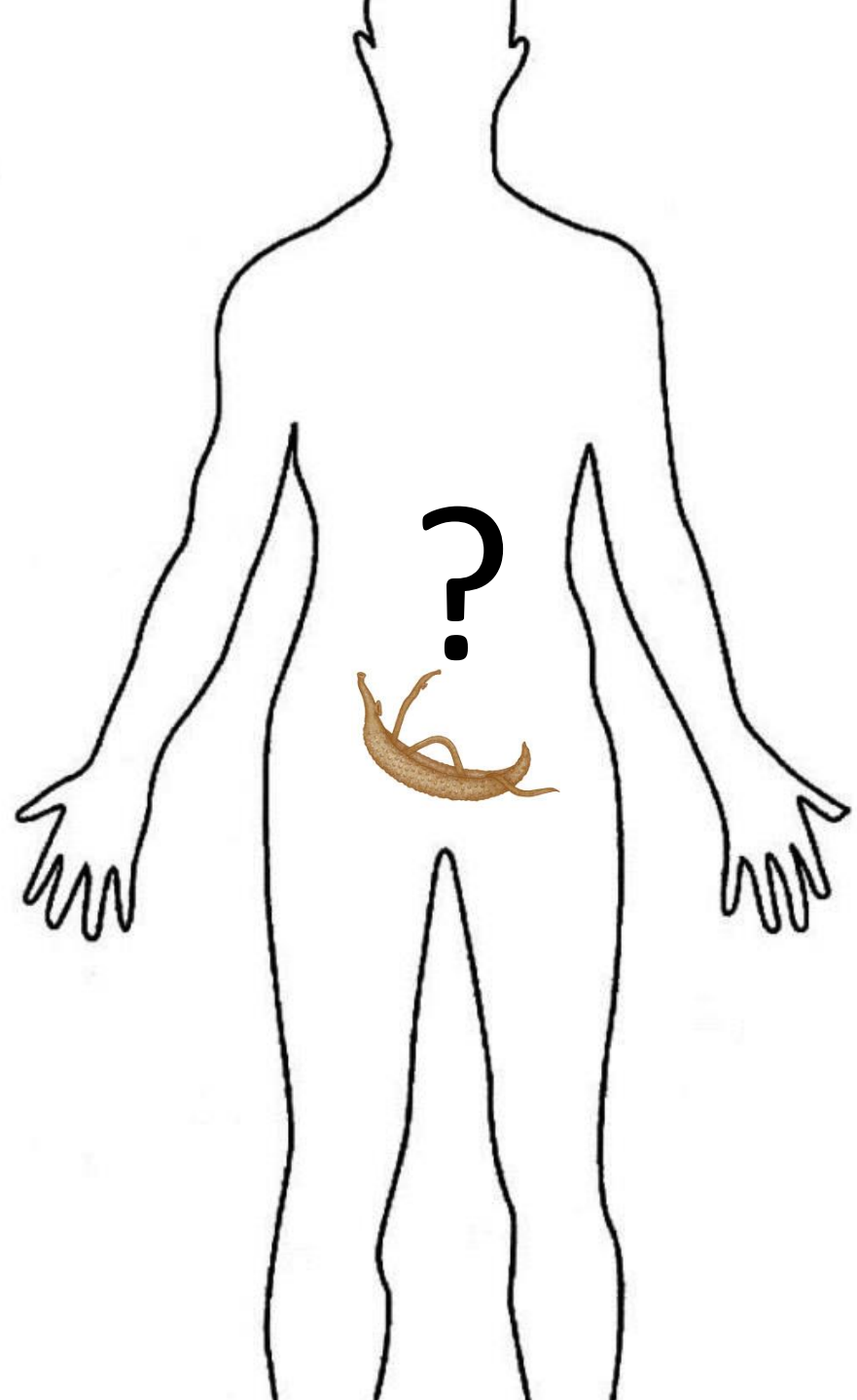


Asymptomatische patiënten (N = 623)	Non-Europeanen (N = 287)	Expatriates (N = 144)	Europeanen (N = 192)
Microscopie	62.4% (179/287)	52.1% (75/144)	21.3% (41/192)
Serologie / antigeen detectie	29.3% (84/287)	47.9% (69/144)	57.8% (111/192)





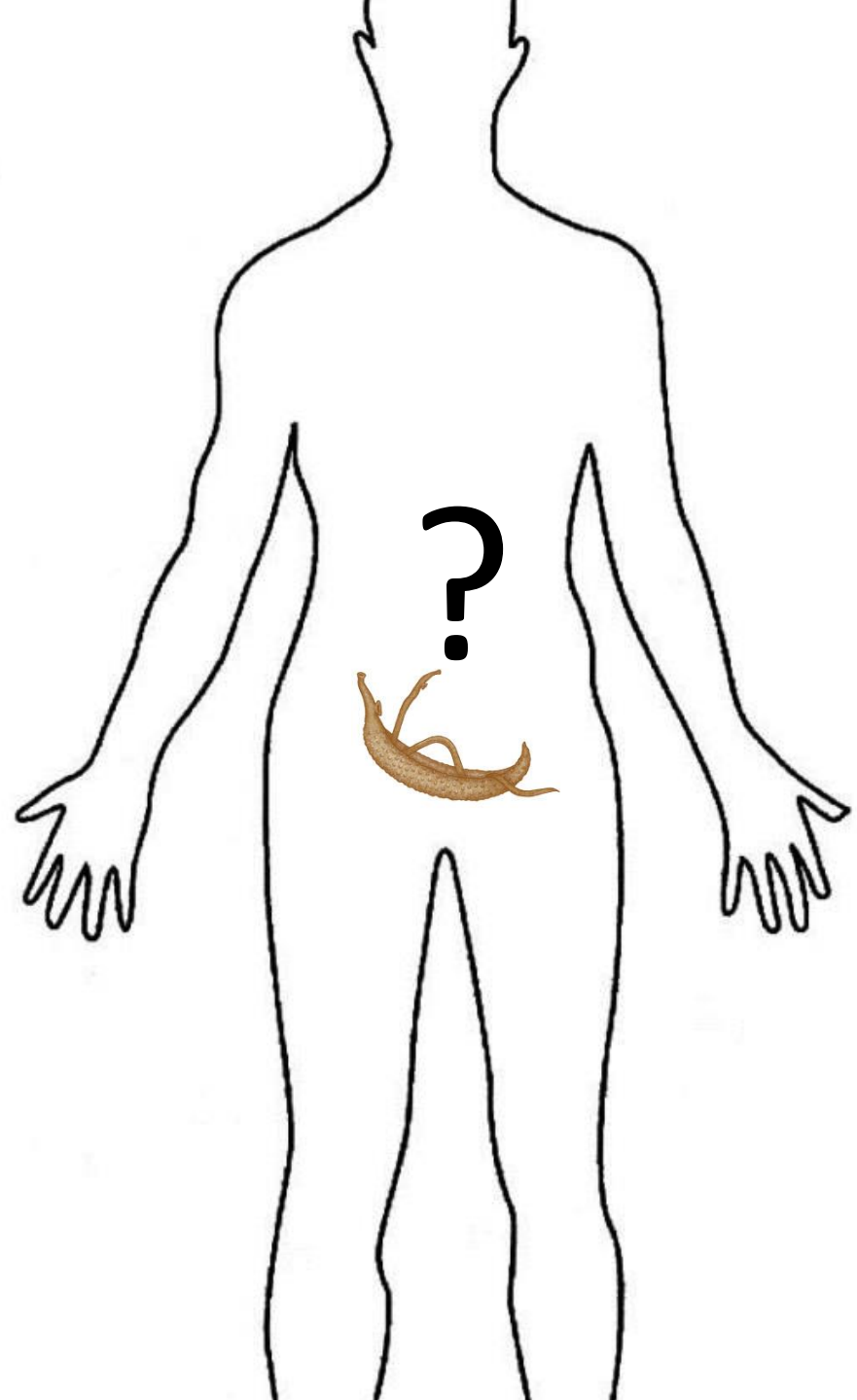
24 uurs urine: geen wormeieren





24 uurs urine: geen wormeieren

Variërende uitscheiding
Infectie met lage parasiet
aantallen



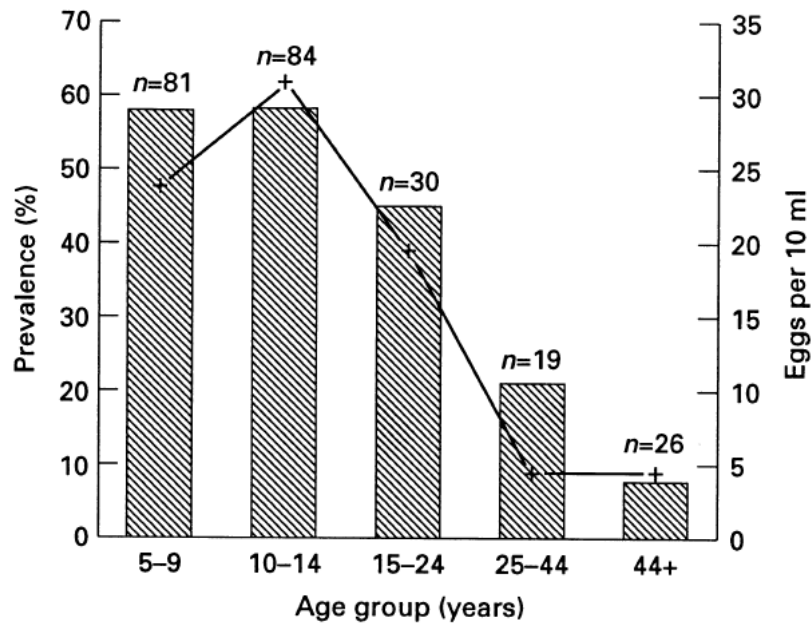
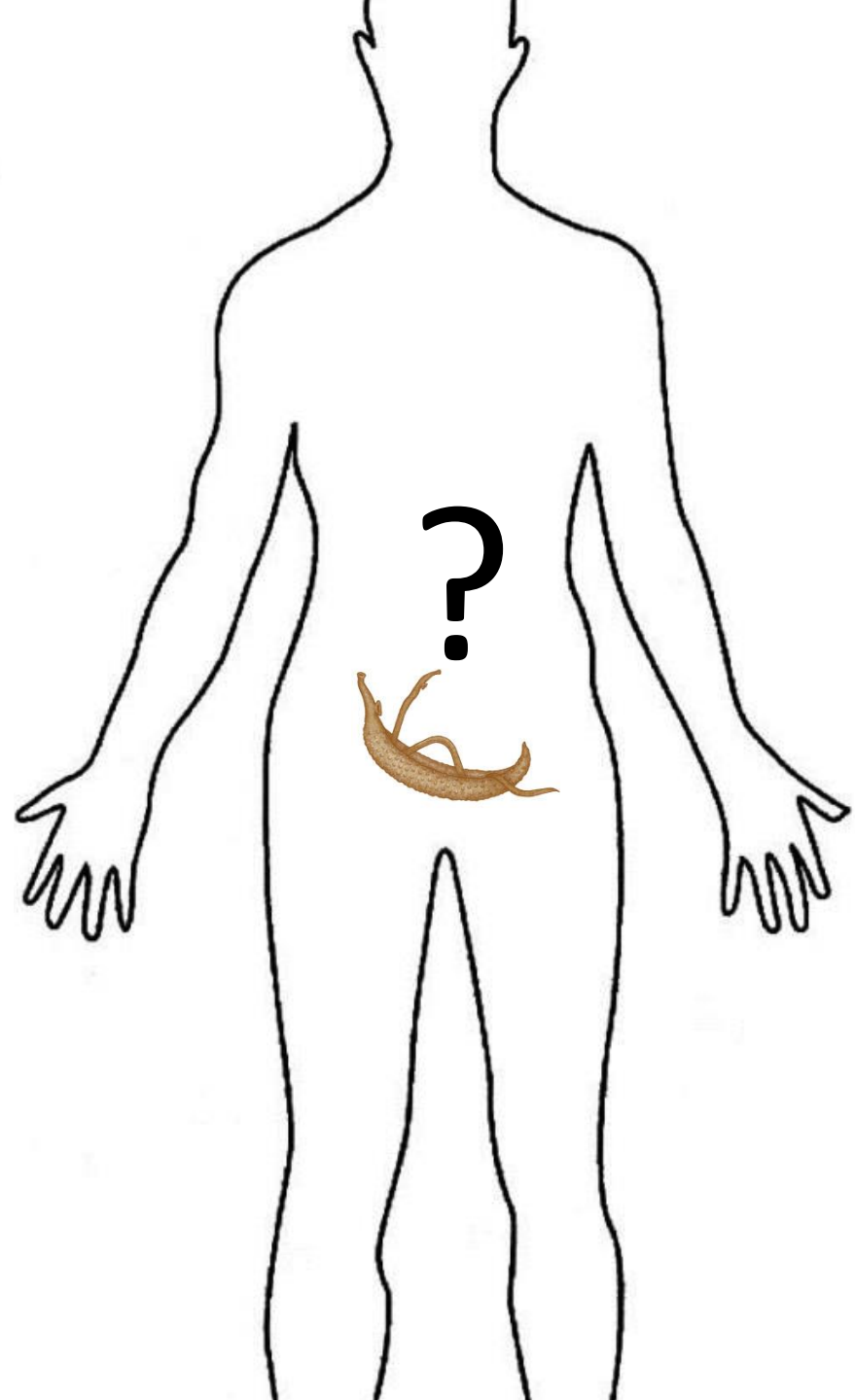
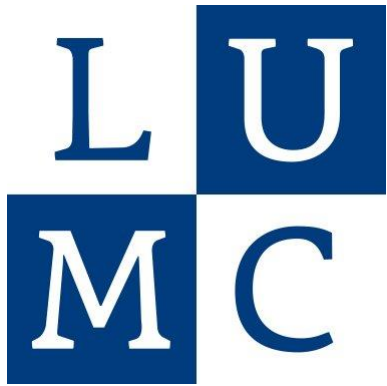


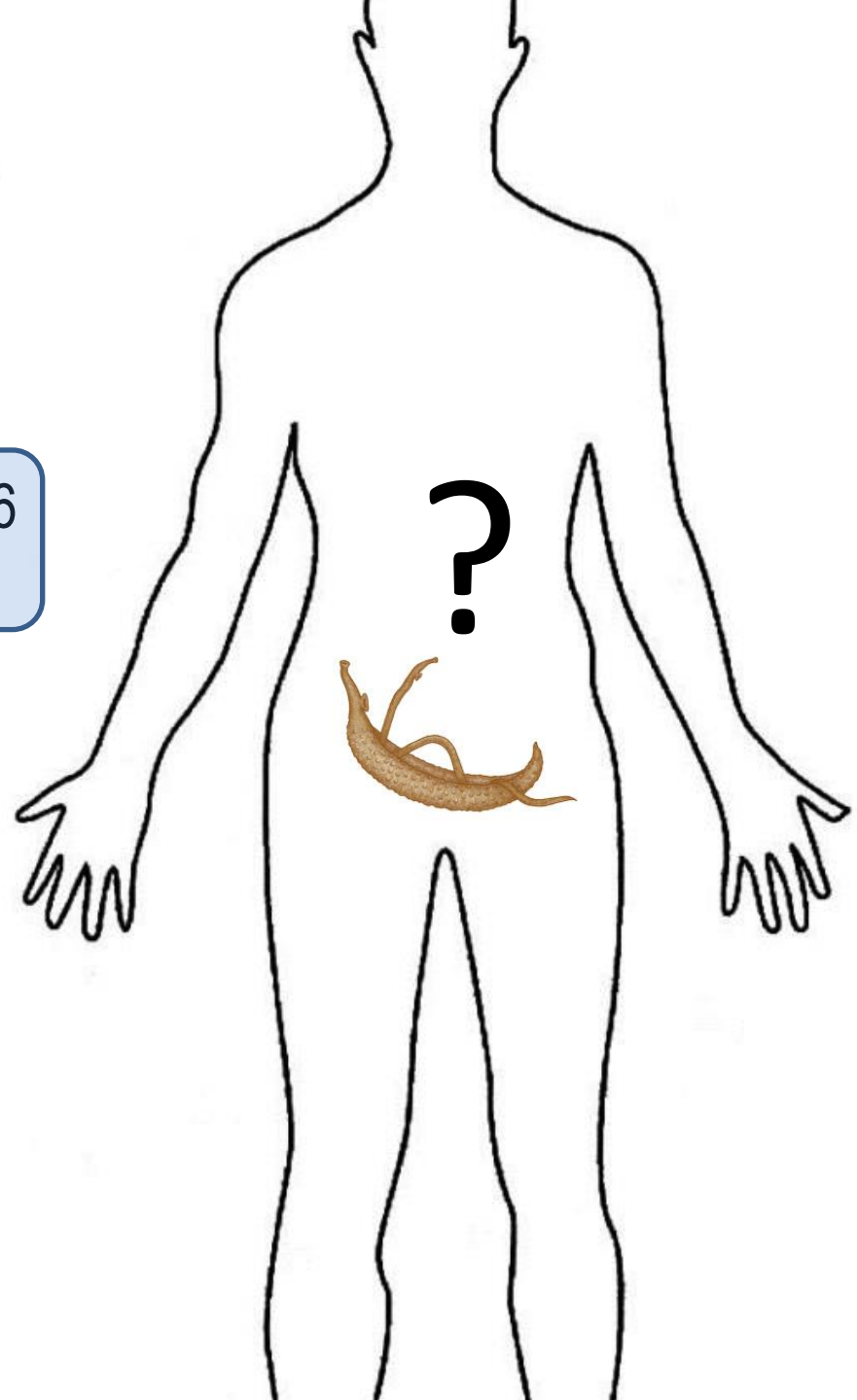
Figure 1 Age-related prevalence and intensity (geometric mean egg counts, positives only) of *Schistosoma haematobium* infection in the Dzvete village study population ($n = 240$). ▨ Prevalence; + Egg count.

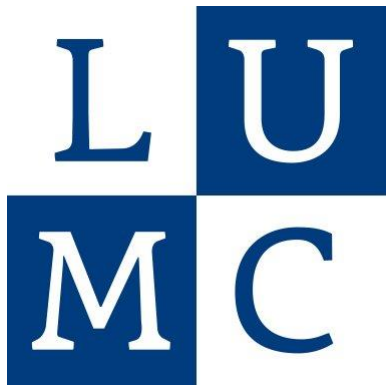
Ndhlovu et al. *Parasite Immunol.* 1996 &
Marchese et al. *Infect Dis Poverty* 2018





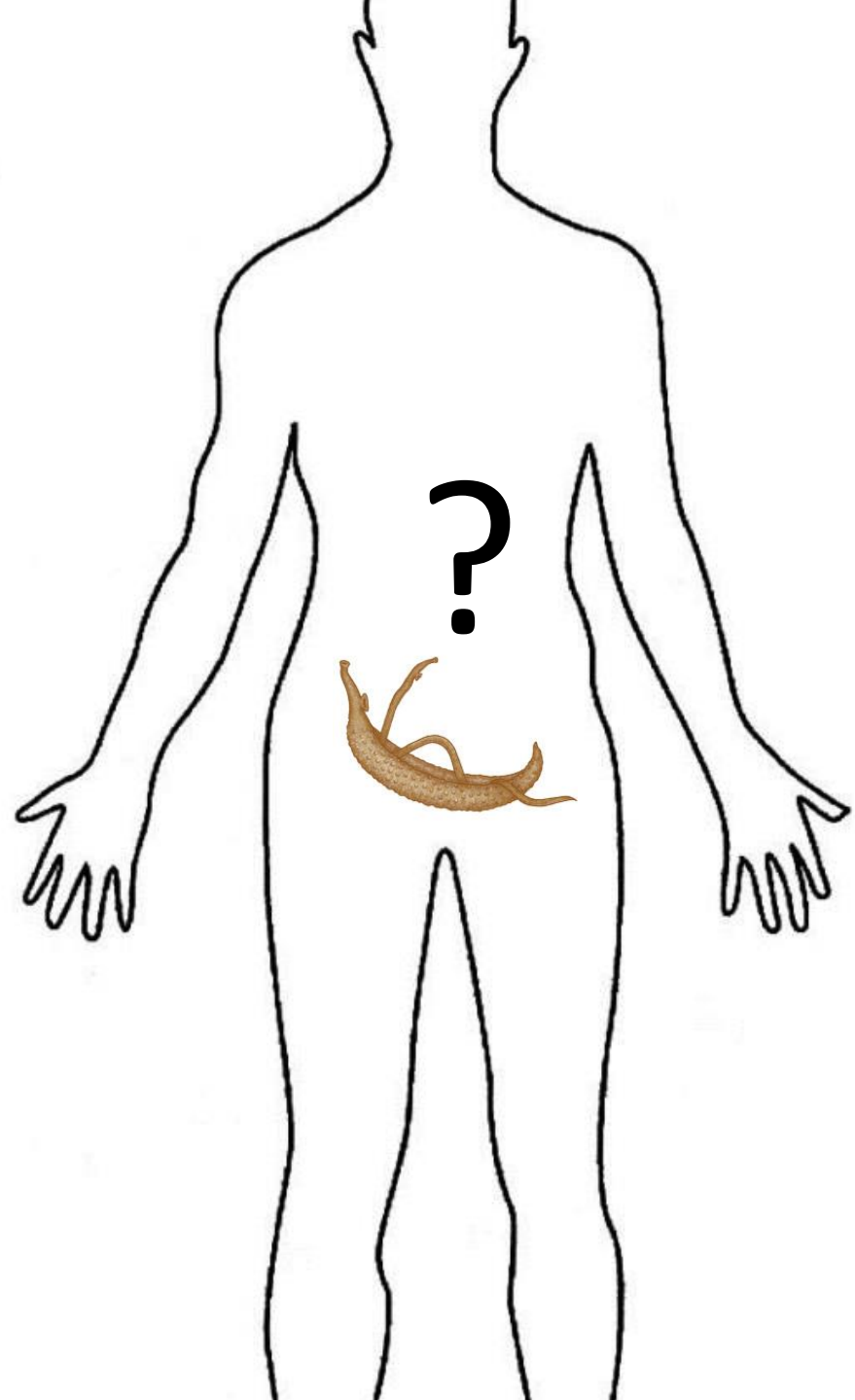
IFA IgM Schistosoma Worm-Ag <1:16
ELISA IgG Schistosoma Ei-Ag <1:32

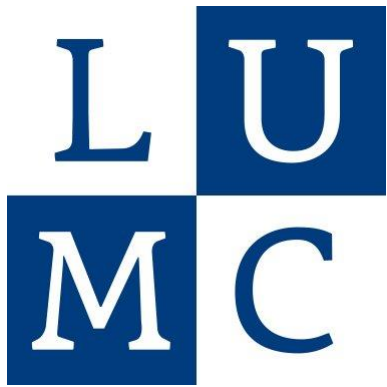




IFA IgM Schistosoma Worm-Ag <1:16
ELISA IgG Schistosoma Ei-Ag <1:32

Auteur	Van Gool et al. 2002	Kinkel et al. 2012
N	25	14
Worm-Ag	92% IHA	21.5% (5.7-51.2%) ELISA
ELISA Ei-Ag Sensitiviteit	92%	57.1% (29.6-81.2%)

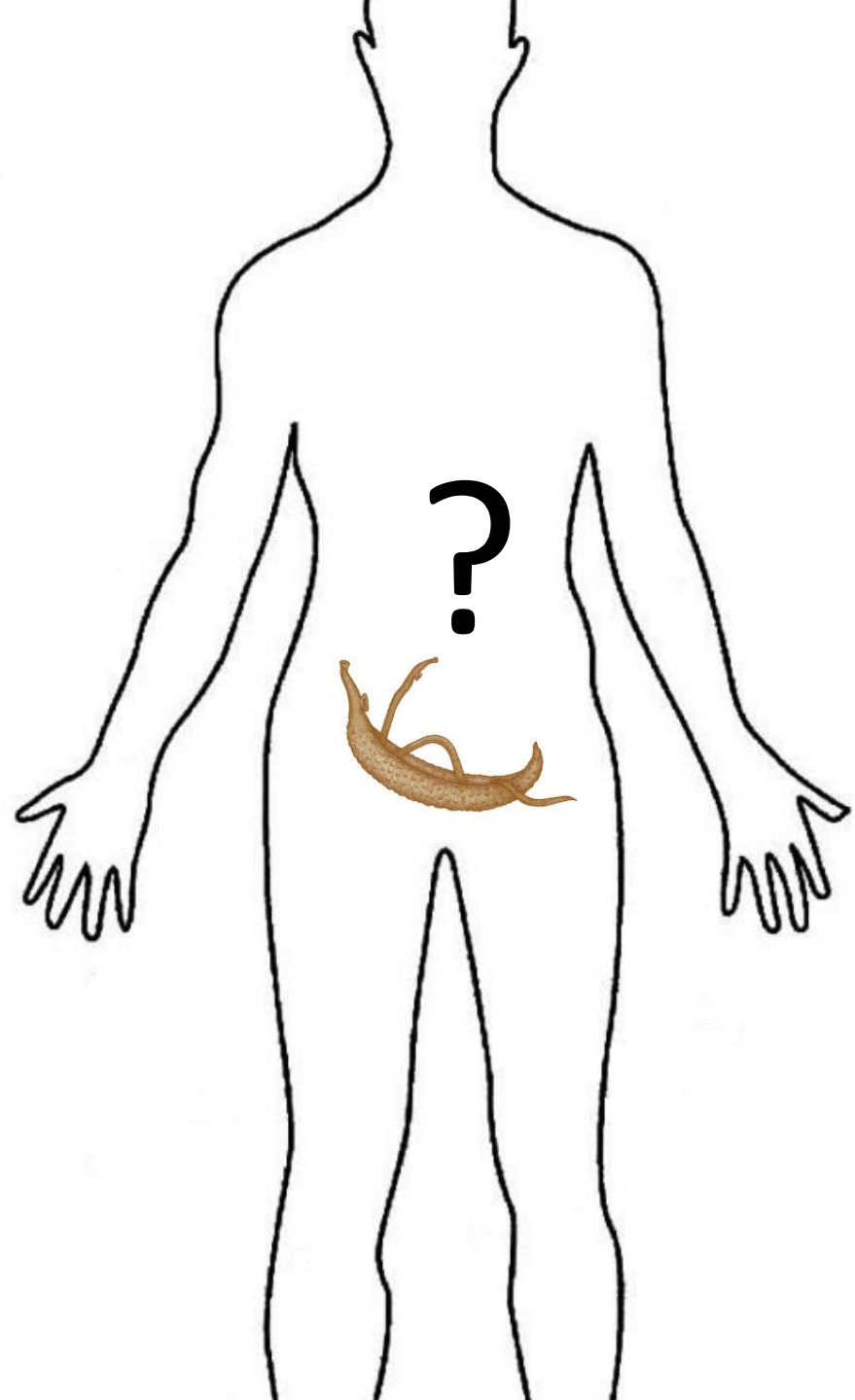


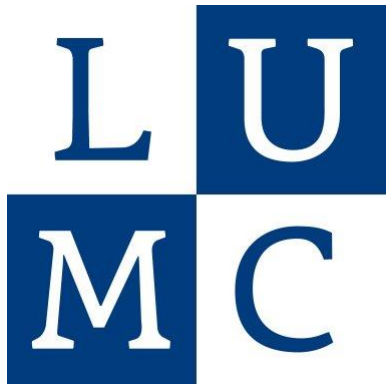


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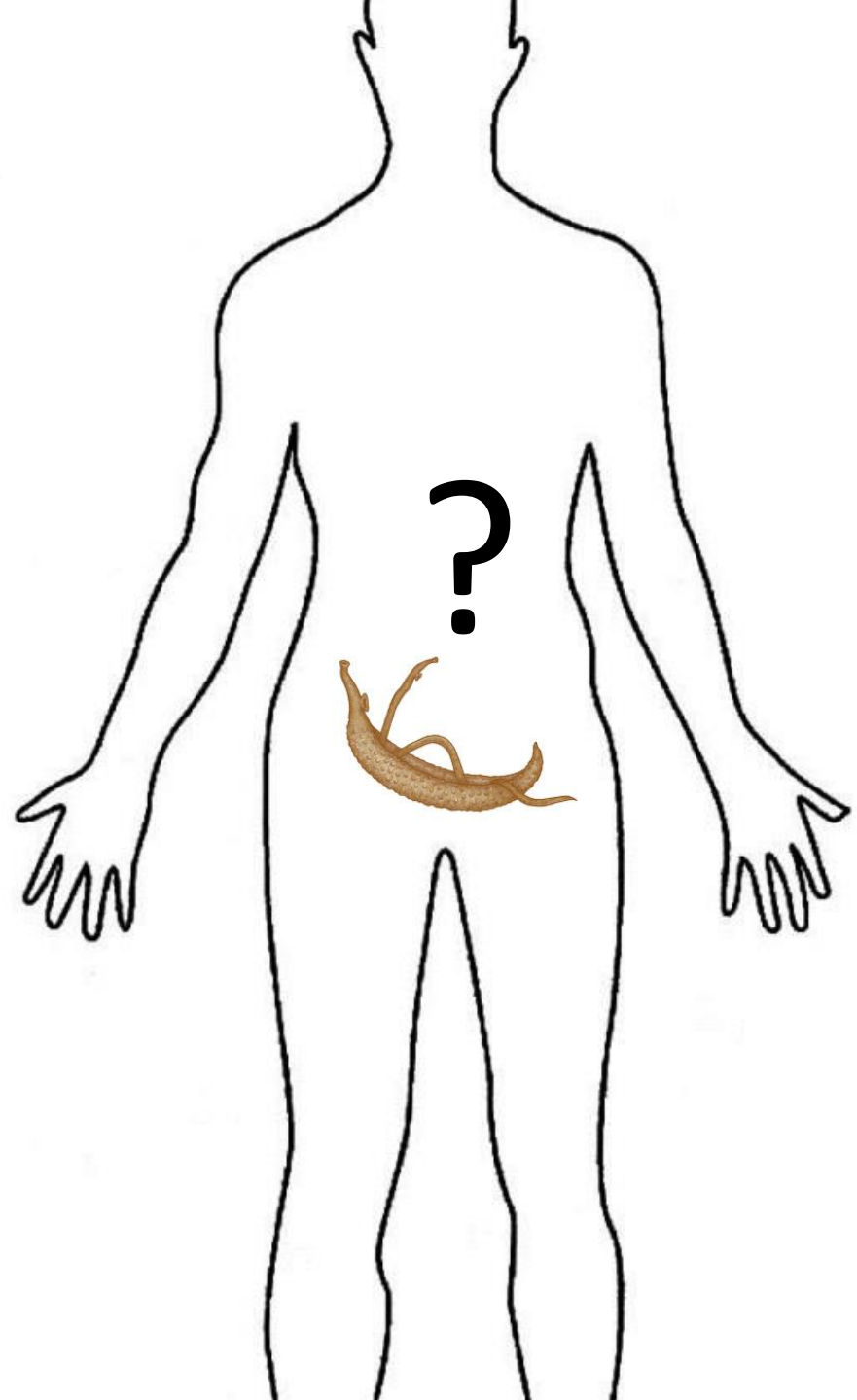
Reizigers!

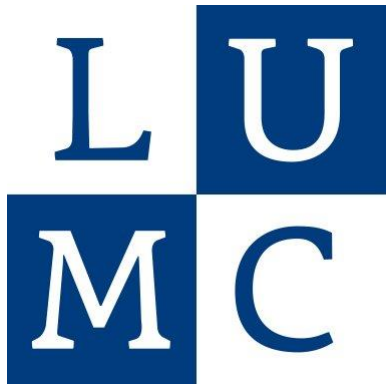




IFA IgM Schistosoma Worm-Ag <1:16
ELISA IgG Schistosoma Ei-Ag <1:32

HIV?
Expositie maternale antilichamen?
Shift naar IgE respons?
Uitgedoofde immuunrespons?



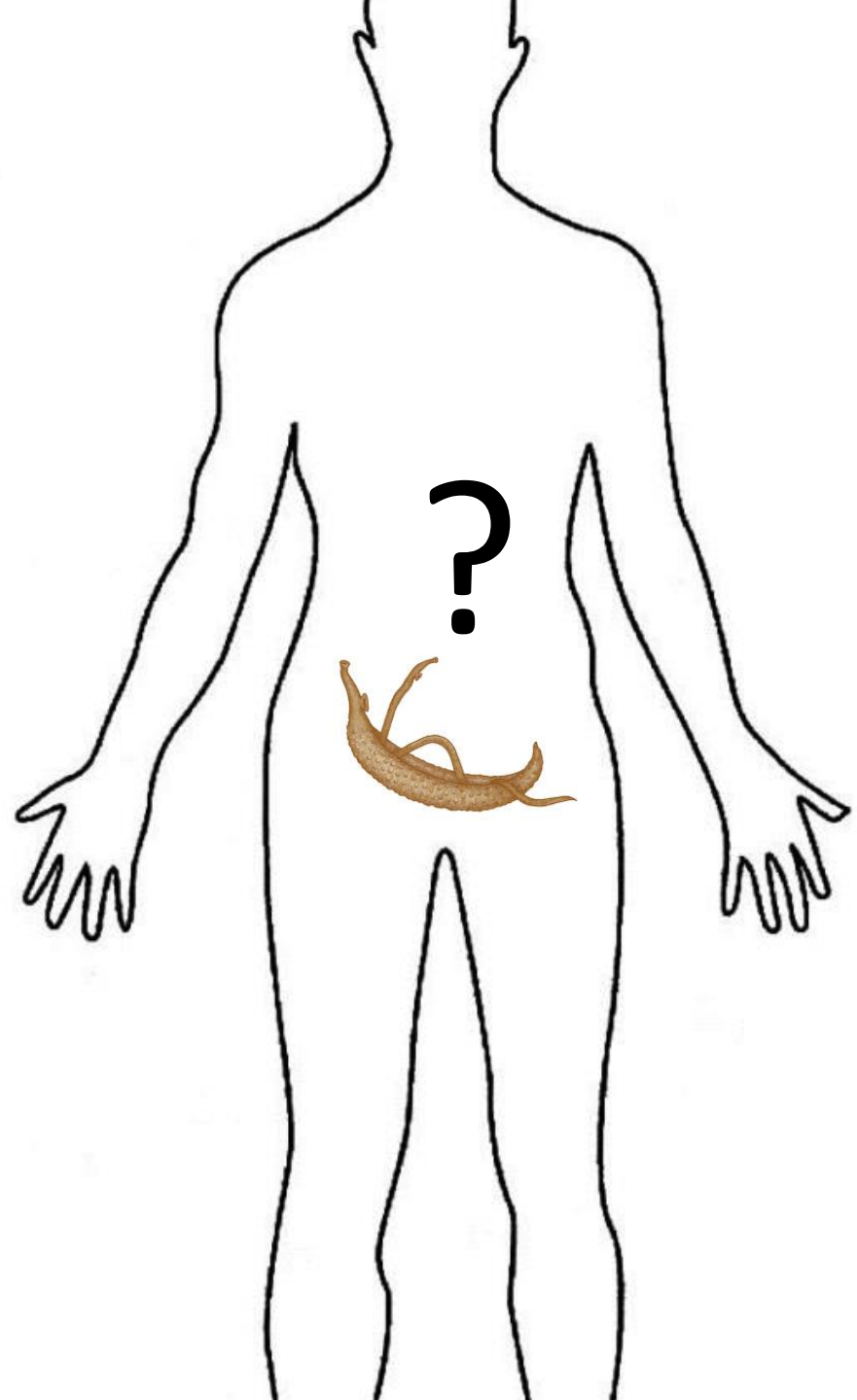


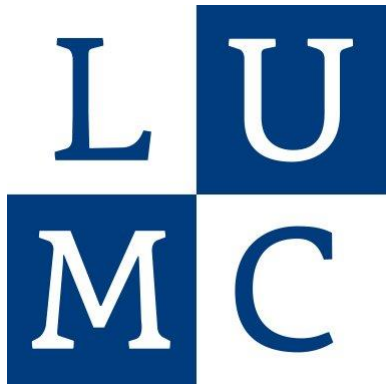
IFA IgM Schistosoma Worm-Ag <1:16
ELISA IgG Schistosoma Ei-Ag <1:32

Marchese et al. 2018
2010-2014
N = 272 (234 endemisch)

Positieve microscopie N = 103
18/103 (17.5%) serologie negatief
11/18 *S. haematobium*

Marchese et al. *Infect Dis of Poverty* 2018

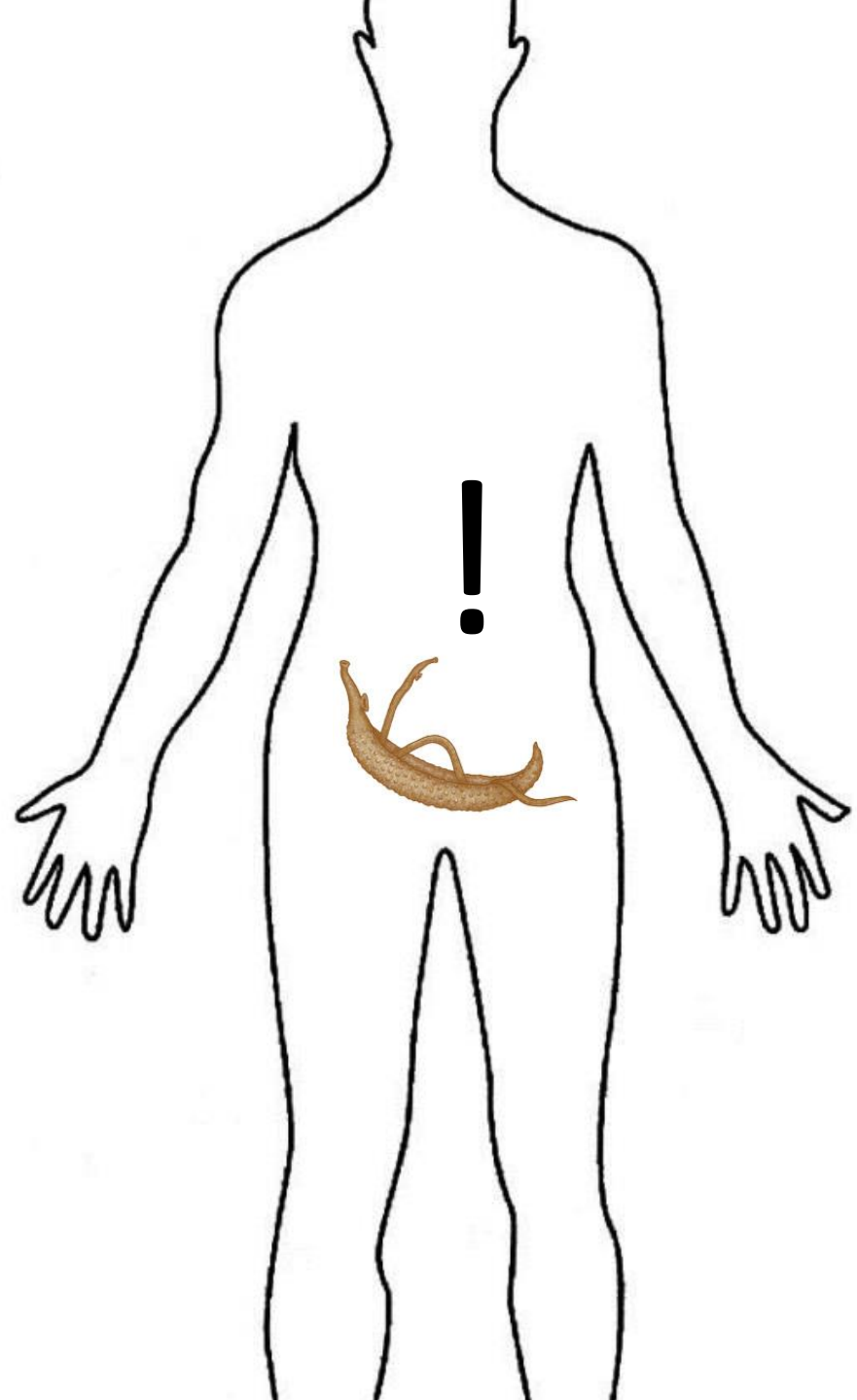




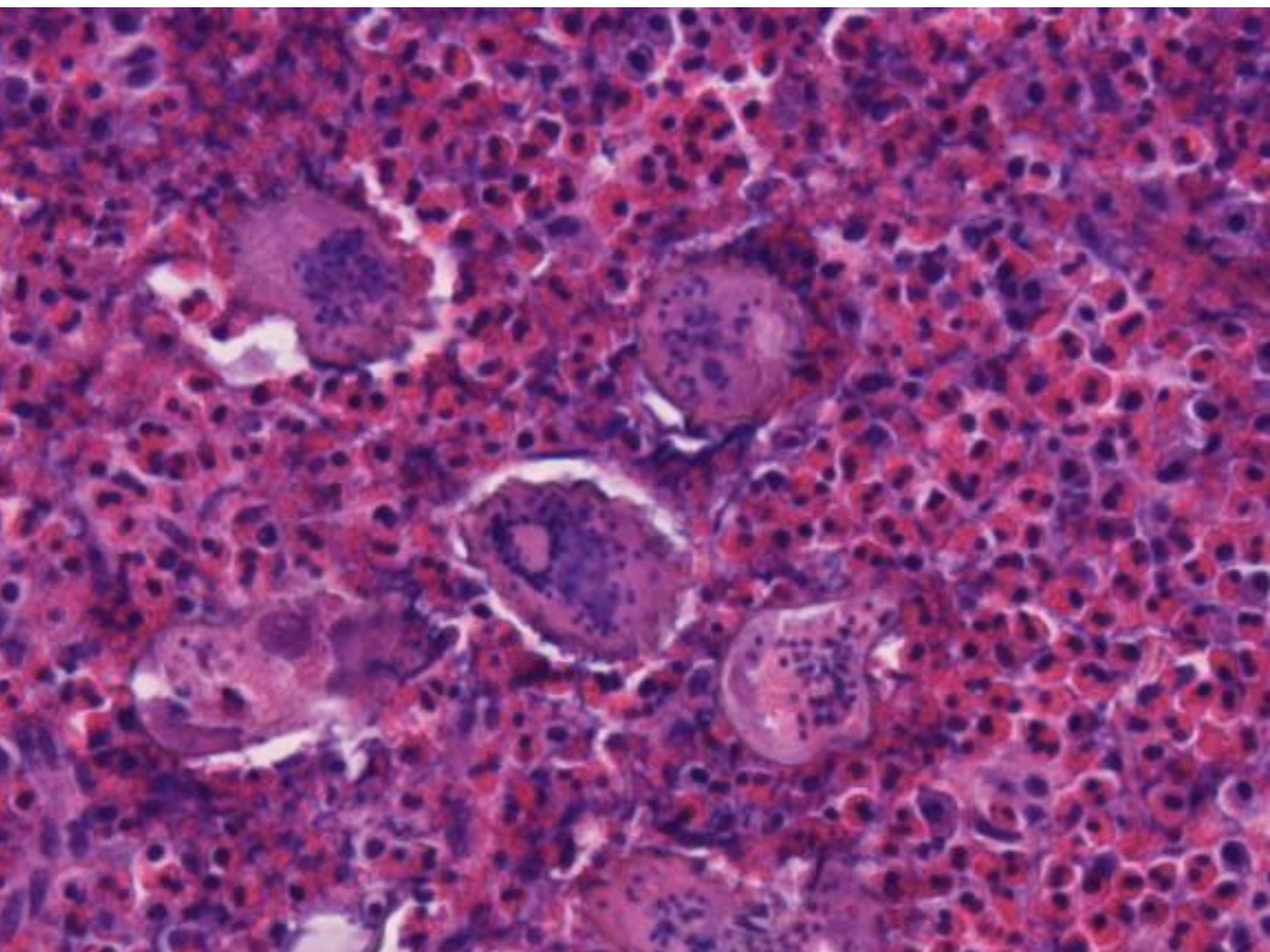
PCR urine *Schistosoma* spec.:
Positief
Ct 30

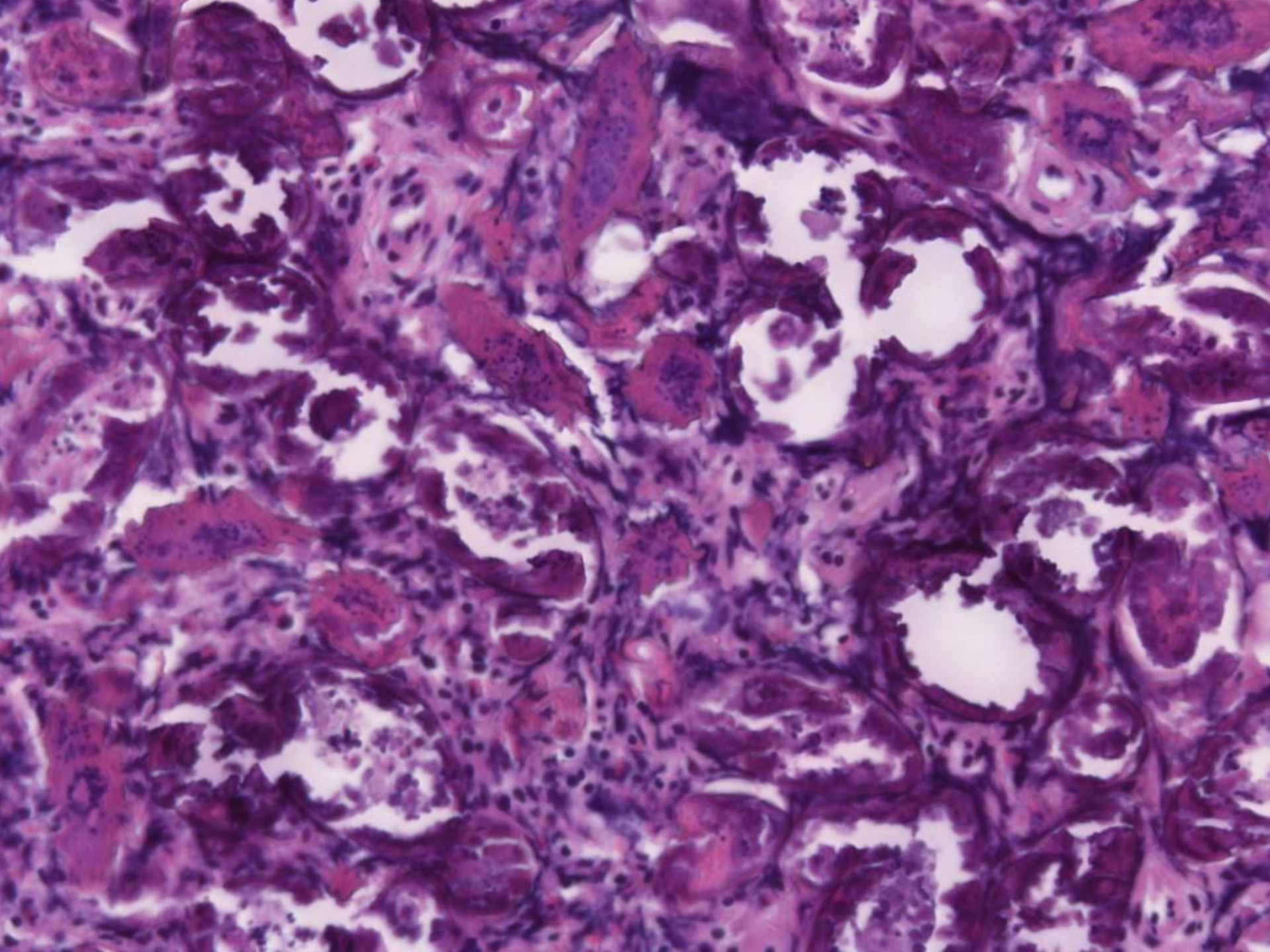
Microscopie urine:
Schistosoma haematobium, nog
levende eieren

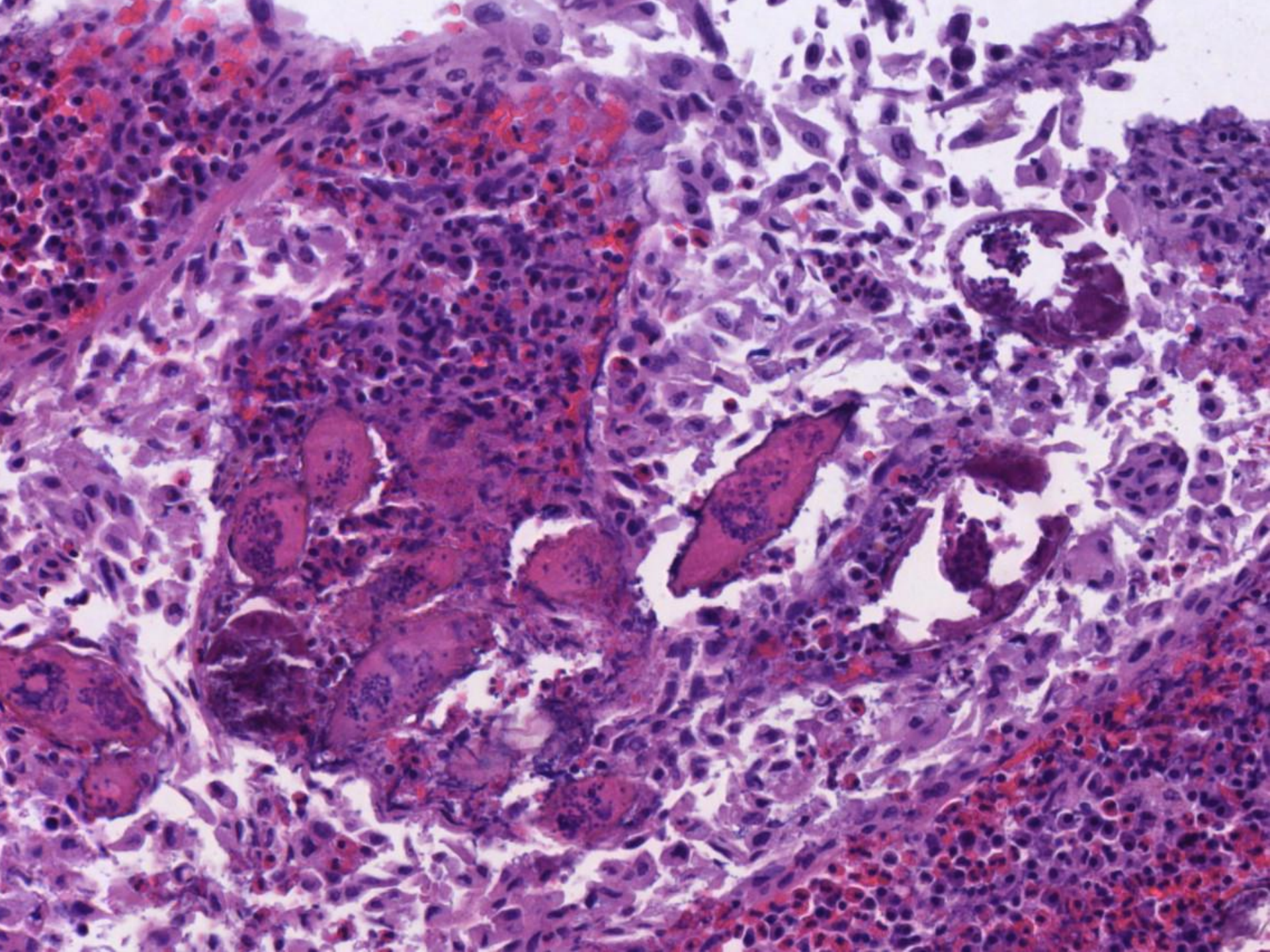
CAA urine: Positief, 10 pg/ml
CAA serum: Positief, 30 pg/ml

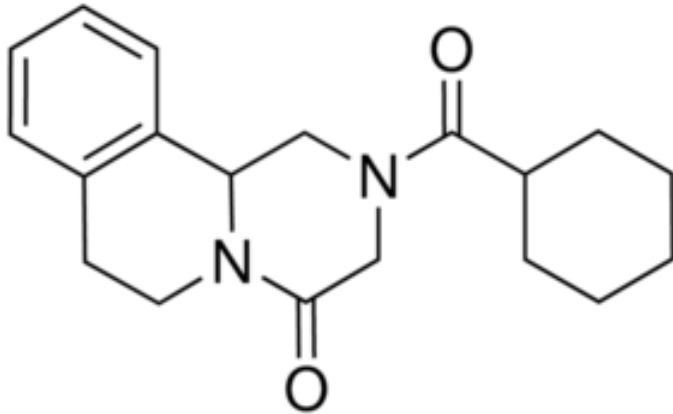




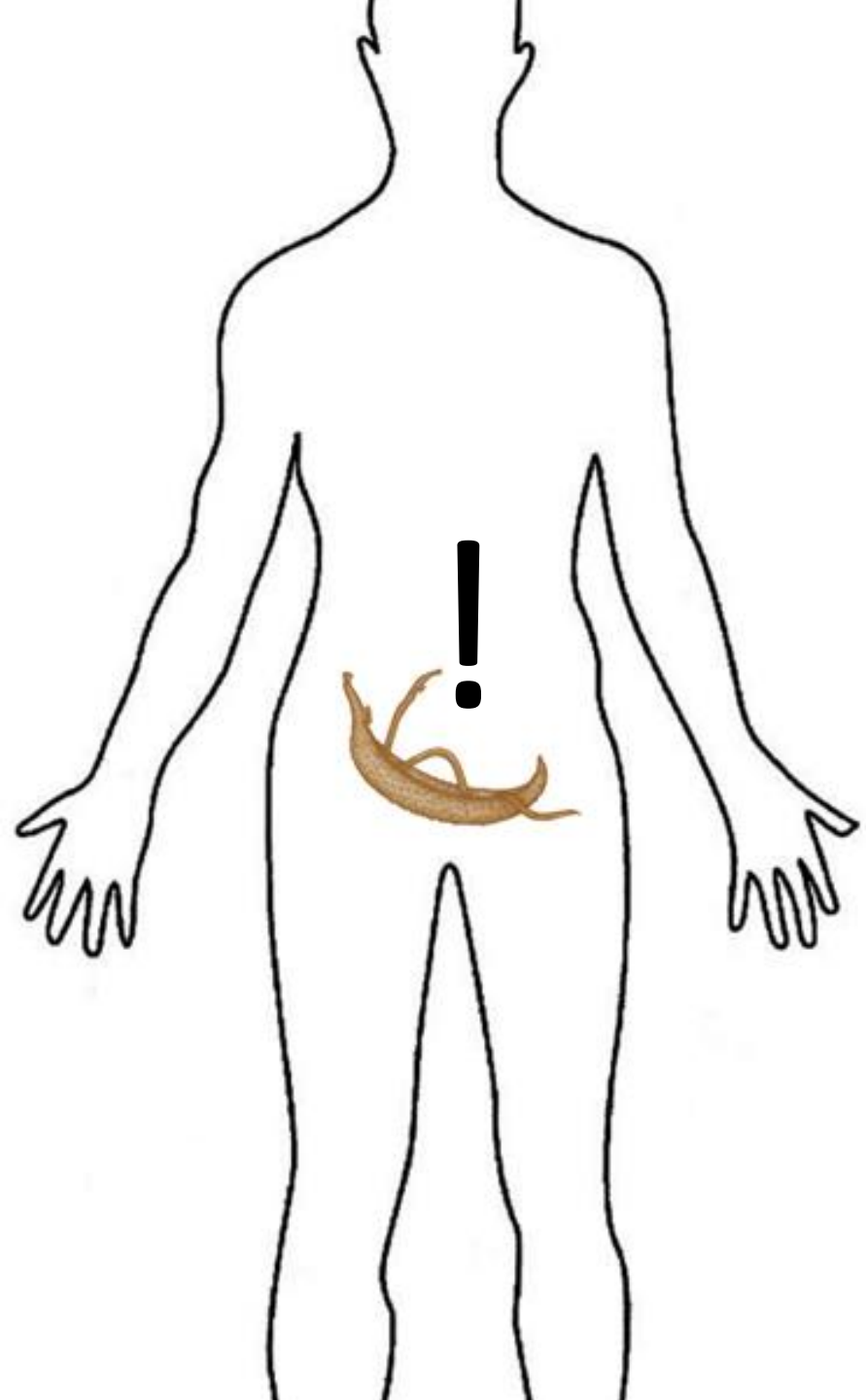








Praziquantel 60 mg/kg 3 dagen



Worm of anti-Worm?

Take home messages



Chronische infectie → verminderde ei-uitscheiding



Fout negatieve serologie mogelijk



Herhaling microscopie, biopt, PCR, CAA

Met dank aan:

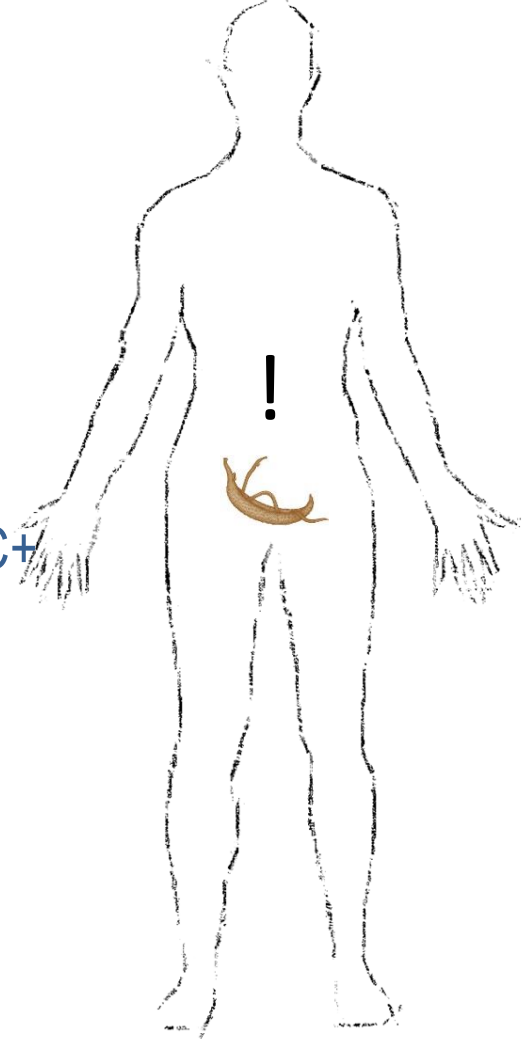
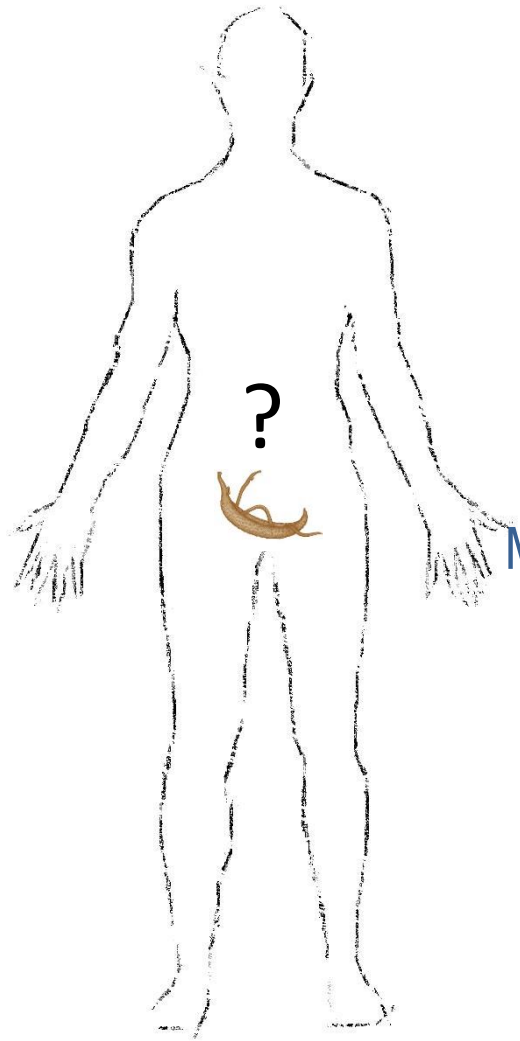
Dr. Callewaert, Uroloog MUMC+

Dr. Van den Hout, Patholoog MUMC+

Wanda Vriese, Analist MUMC+

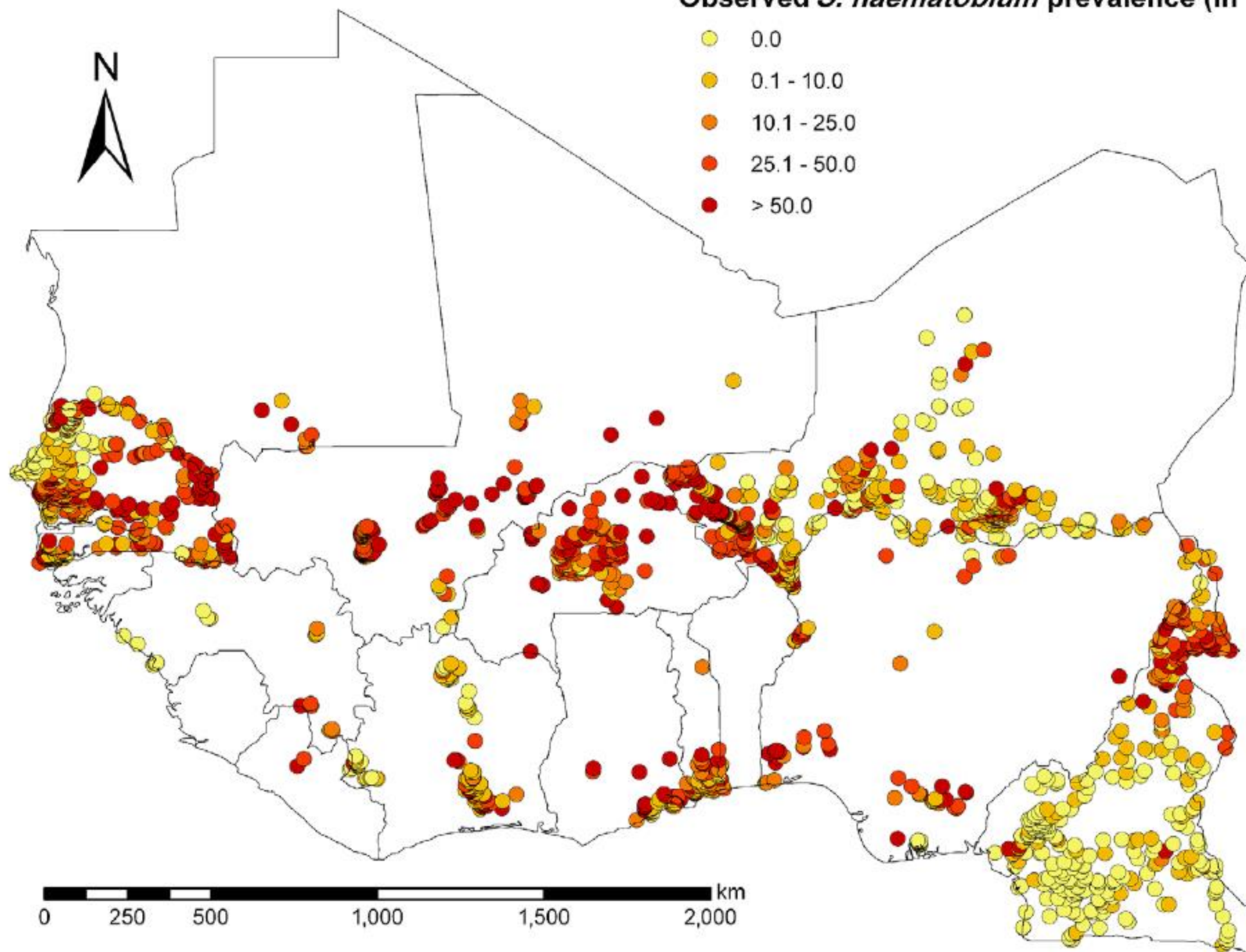
Mariëlle Habets – Janssen, Analist MUMC+

Dr. van Lieshout, Parasitoloog LUMC

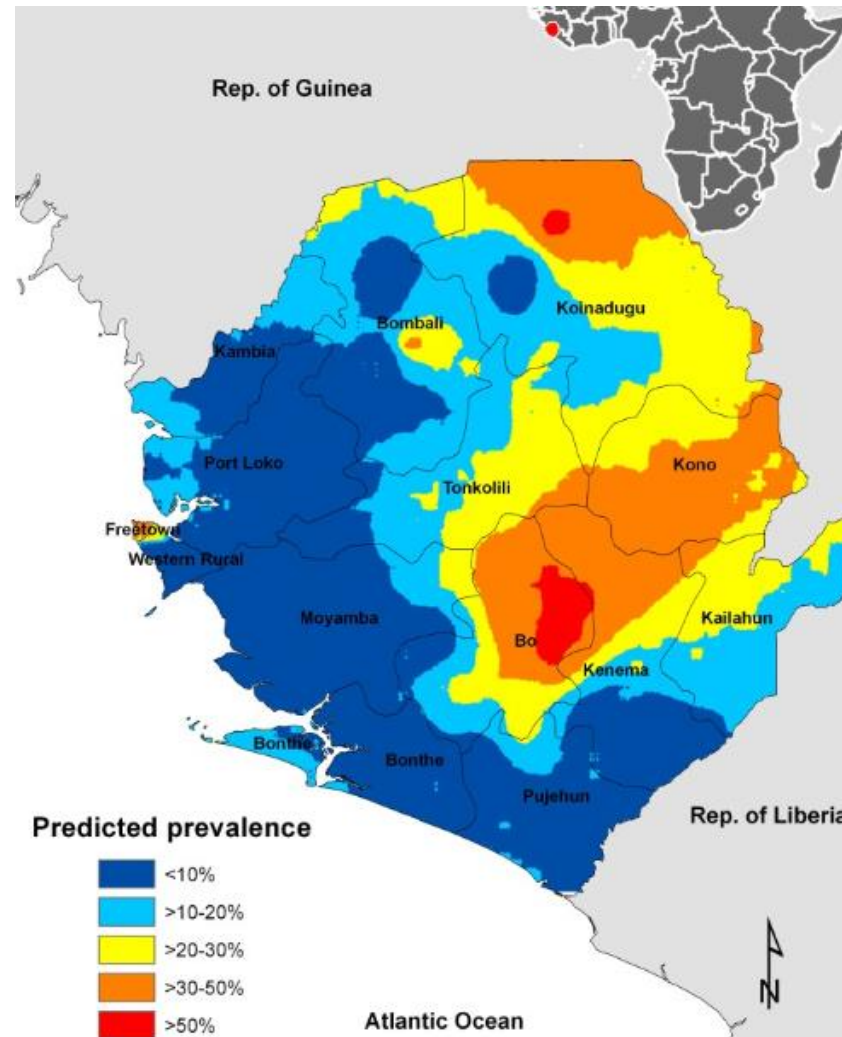


Observed *S. haematobium* prevalence (in

- 0.0
- 0.1 - 10.0
- 10.1 - 25.0
- 25.1 - 50.0
- > 50.0



Prevalentie Sierra Leone



Schur et al. PLOS Negl trop Dis. 2011
&
Hodges et al. PLoS Negl Trop Dis. 2012

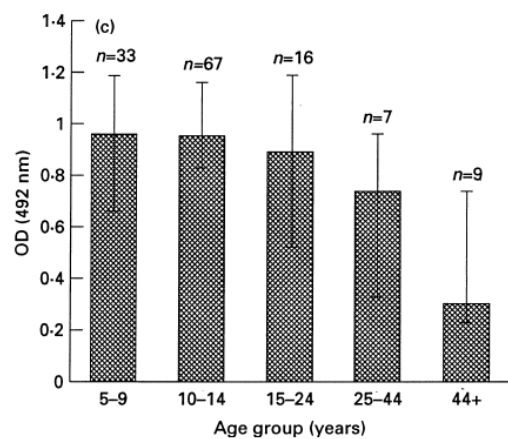
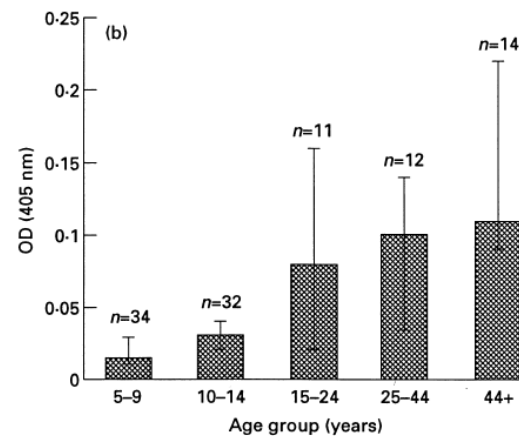
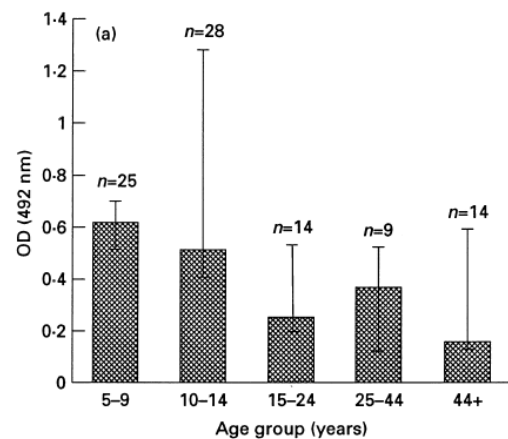


Figure 2 (a) Specific IgG4 responses (OD 492 nm), (b) specific IgE responses (OD 405 nm) and (c) specific IgM responses (OD 492 nm) to *Schistosoma haematobium* soluble egg antigens (medians, 95% CI) of different age groups of the Dzvetse village study population (n = number of individuals sampled).