**Practical Medical Parasitology** 

### Third Stage/ A1 + B1

# **General Stool Examination (GSE)**

A stool analysis is a series of tests done on a stool sample to help diagnose certain conditions affecting the digestive tract, these conditions can include infection (such as from Parasites, Viruses, or Bacteria), poor nutrient absorption, or cancer.

### - Collection of Specimens :-

- 1- Collect stool into a clean, dry container and deliver the specimen to the lab immediately.
- 2- Label the container with name patient and the date.
- 3- Specimens must not be contaminated with water (contain many microorganisms) or urine (killed the motility of microorganisms).
- 4- During collection of specimens the patient must leave the treatment for (72 hour) before analysis.

### - General Stool Examination divided into :-

### 1// Macroscopic Examination

### **A- Chemical Examination :**

\* PH :

- Normal: The normal PH of the stool is 7.0 - 7.5.

- Abnormal: Stool with a high PH may mean inflammation in the intestine (colitis), cancer, or antibiotic use. A low PH may be caused by poor absorption of carbohydrate or fat.

### **B-** Physical Examination :

### 1- Color :

Normal: Brown (deep or light)

Abnormal:

- -Bloody (infection with Entamoeba histolytica).
- Milky or like rise water (infection with Vibirio cholera).
- Greenish with mucus (infection with Giardia lamblia).
- Black (occult blood ) ( some cases may be cancer ).

## 2- Consistency:

Normal: Semi Solid Abnormal: Liquid, Semi liquid and Solid.

## 3- Blood:

The blood appear in pathogenic cases only, it may be:

- **a- Flashing blood:** These cases may be a result of injury in the last part of digestive system or hemorrhoids near the anal opening.
- **b- Lytic blood:** mixed with the spacemen, this may be mean dysentery (bacterial or parasitic).

# 4- Mucus:

Normal: The stool does not contain mucus.

Abnormal: small amount may refer to infection in small intestine.

Large amount not well mixed with stool may indicate lesion in large intestine by *Giardia lamblia*.

Large amount mixed with stool + blood streak = amoebic dysentery.

Mucus + blood + pus = ulcerative colitis and bacillary dysentery.

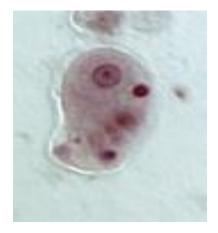
# 2// Microscopic Examination:-

This examination used for differentiation between parasite (trophozoite, cyst and ova), candida, pus cell, RBCs, indigestive food ....etc. There are two ways for examination:-

## 1- Direct smear (Wet Mount Procedure):

- a- Take a clean and dry slide.
- b- Place one drop each of normal saline in one side of the slide and drop of iodine in other side.

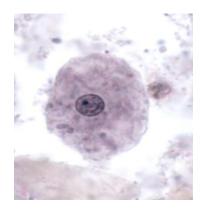
- c- Hold a small piece of stool sample by using a stick (the emulsion should not be too thick or too thin), mix it with saline, and another small piece mixed with iodine.
- d- Cover two sides with cover slides and examine by using the microscope.
- 2- Concentration techniques:
  - **a-Sedimentation techniques:** in this method cysts and eggs of parasites settle and are concentrated at the bottom because they have greater density than the suspending medium. Following are the commonly used sedimentation techniques:
    - Simple sedimentation
    - Formalin ether sedimentation
  - **b- Floatation techniques:** Floatation involves suspending the specimen in a medium of greater density than of the helminthic eggs and protozoan cysts. Following floatation techniques can be used:
    - Saturated salt floatation technique
    - Zinc sulphate centrifugal floatation technique
    - Sheather's sugar floatation solution
- We may see in stool smear:-
  - Pus (WBC's) in stool.
  - RBC's in stool.
  - Microorganisms:
    - a- Parasites: such as [ *Entamoeba histolytica* (Trophozoite, cyst), *Entamoeba coli* (Trophozoite, cyst), *Giardia lamblia* (Trophozoite, cyst), *Balantidium coli* (Trophozoite, cyst)].
    - b- Ova: such as such as ( *Enterobius vermicularis*, *Ascaris lumbricoides*, *Taenia* spp., *Trichuris trichura*, Hook worm ).
    - c- Bacteria.
    - d- Candida.
  - Indigestive food
  - Fat droplets
  - Fibers, Bubbles ( air or oil ).



E. histolytica (Trophozoite)



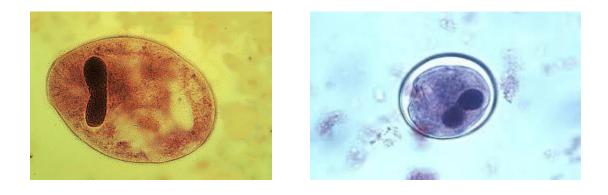
E. histolytica (cyst)



E. coli (Trophozoite)



E. coli ( cyst )



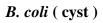
## B. coli (Trophozoite)



G. lamblia (Trophozoite)

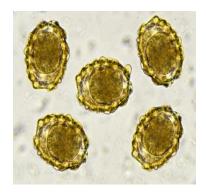


E. vermicularis ( ova )





G. lamblia ( cyst )



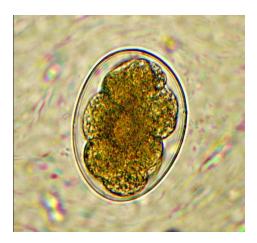
A. lumbricoides ( ova )



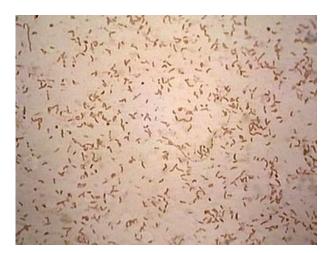
Taenia spp. ( ova )



T. trichura (ova)



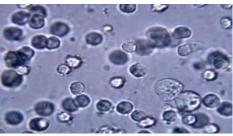
Hook worm ( ova )



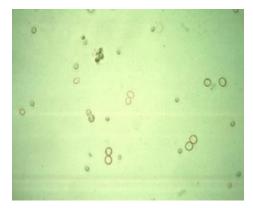
Bacteria in stool



Candida in stool



Pus in stool



**RBCs in stool** 

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