

TRICHOMONAS VAGINALIS

THE MICROORGANISM

Trichomonas vaginalis is a flagellated protozoan, which infects about 170 millions of people. Indeed, it's one of the pathogenic agents that it's frequently isolated in sexual transmitted illnesses.

CLINICAL MANIFESTATION

In women, just the 20% of patients present a classic clinical context with serious vaginitis, with a loss of scum liquid (green/yellow aspect), which is associated to an insistent itch. The infection appears more often in a chronic way without clinic and characteristic signs, but with symptoms such as constant itch, vulvar erythema, pains during the sexual act and the constant need to urinate. Everything is cused by an inflammation of the vaginal mucosa, the cervical and the urethritis. In men the most frequent clinical manifestation is the urethritis, which often occurs as a serious chronic illness. In some cases there's a loss of mucous liquid and a burning sensation by urinating. Symptomatology corresponds to a not specific urethritis, where both the T. vaginalis and the Chlamidia trachomatis must be taken in consideration in the differential diagnostic. Anyway, it must be remembered that the 20-50% of the infections in both genders appears in an asymptomatic way, which can give clinical signs with complications, such as endometriosis and inflammation. During a pregnancy, a T. vaginalis infection can take to rupture of membranes and to a precocious birth. In men, the most frequent complications are prostatitis, epidimitis and infertility.

EPIDEMIOLOGY

The human being is the only host of T. vaginalis. Trofozoans transmission directly occurs though sexual contact. Other types of contacts, such as swimming pools, contaminated sheet and toilette have an unimportant role, because trofozoes survive outside the host just for a short period of time. Depending on the collective and diagnostic used method, the incidence of T. vaginalis in women varies from 5 to 50%, while in symptomatic men from 1 to 20%.

TEST

The presence of T. vaginalis is highlighted by PCR. This method allows a rapid diagnosis and with a 97% sensibility and 98% specificity, values which are sensibly better respect to others methods. The highlight of trofozoans in native urine has a sensibility of 40-60% and it should be used just in combination to another method.

SAMPLE TAKING

Vaginal, cervical and urethral smear, morning urine and ejaculated.

EXECUTION

Daily.

COST

According to the federal charge rate of the analyses (in analogy to 3501.00) TP 91

Laboratorio
di diagnostica
molecolare

Further information or bibliographic references can be asked to the laboratory.