

ISSN: 2520-5234

Available online at <u>http://www.sjomr.org</u>

#### SCIENTIFIC JOURNAL OF MEDICAL RESEARCH

Vol. 4, Issue 15, pp 67 - 69, Summer 2020



## **ORIGINAL ARTICLE** =

# Study The Relation Between *Toxoplasma gondii* and Biochemical Parameters in Pregnant Women

## Basim Kadhim Breesam<sup>1</sup>

<sup>1</sup>Al Mosawat Intermediate School, Wassit Education Directorate, Wassit, Ministry of Education, Iraq

ARTICLE INFORMATIONS	ABSTRACT
Article History: Submitted: 5 May 2020 Revised version received: 13 July 2020 Accepted: 15 July 2020 Published online: 1 September 2020	<b>Objectives:</b> <i>Toxoplasma gondii</i> is one of the internal parasites which live in some kinds of tissues, such as muscles and intestinal epithelium, and infection may be congenital. the congenital form is more severe when maternal infection occurs early in pregnancy.
Key words: Creatinine ALT AST Cholesterol Toxoplasma gondii	<b>Methods:</b> Samples of pregnant women suffers from <i>Toxoplasma gondii</i> from alkafeel hospital that was about 22 specimens is collected to check if pregnant women with <i>Toxoplasma gondii</i> infection has alteration in some of their biochemical parameters ( creatinine, ALT , AST, cholesterol ).
Corresponding author: Basim Kadhim Breesam Email: <u>basimaldlfy@gmail.com</u> Al Mosawat Intermediate School Wassit Education Directorate Ministry of Education Iraq	<ul> <li><b>Results:</b> The current study aims to show the effectiveness acute of toxoplasmosis on some liver and kidney parameters. The result came close to normal, and there was no significant change in those biochemical criteria. Some were high and others were low.</li> <li><b>Conclusion:</b> <i>Toxoplasma gondi</i> does not have strong relation with the biochemical parameters in pregnant women in different group of ages.</li> </ul>

*Copyright©2020, Basim Kadhim Breesam.* This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution and reproduction in any medium, provided the original work is properly cited.

Citation: Breesam B.K. "Study The Relation Between *Toxoplasma gondii* and Biochemical Parameters in Pregnant Women". Sci. J. Med. Res. 2020; 4 (15): 67-69.

## **INTRODUCTION**

*Toxoplasma gondii* is acommon protozoan parasite disease known as toxoplasmosis infect most species of warm blooded animals ,including human. Infection of human may be occur in several ways:

- a. Swallow of infected meat in insufficient quantities.
- b. Swallowing eggs from fecal contaminated hands or food.
- c. The Organ transplantation or blood transfusion.

During blood transfusion, the parasite has several stages:

- 1. Tachyzoiteit is a rapid reproductive form responsible for the primary spread of infection.
- 2. Pradesuit. It resembles tiziocite, but is less active [metabolism] in a tissue bag that converts to tacitose soon after ingestion. Tachyzoites localized the nerve and muscle tissue and developed into a bradyzoites tissue cyst, if pregnant women become pregnant tachyzoites can infect the fetus via the placenta<sup>1</sup>.

Toxoplasma parasite is usually responsible for both birth defects and deadly toxic encephalitis in people with immunodeficiency, congenital miscarriage in fetal toxoplasmosis, dead fetus, or severe mental retardation; Infection in late pregnancy may be asymptomatic, but it may present network or neurological damage later in life,

From the intiation of pregnancy the placenta it self grows and matures until the end of pregnancy as gestation progress ,the villi and lining trophoblast show evidance of maturation and differentiation and the placental growth is known to decline gradualy after 34 or 36 weeks of gestation, considering that programmed cell death or apoptosis is one of the critical process during fetal development<sup>2</sup>. During 1995 the number of puplication investigat apoptosis in villous trophoblast have increased exponentially this scientific interest is due to observation that is specialized, form of cell death is increased in pregnancy complication for example preeclampsia and intra -uterine growth restriction and the infection with various pathogen. The in fection of cell by *Toxoplsma gondii* has been studies  $^3$ , the result indicate that Toxoplasma gondii either inhibits the apoptosis of cells infected by the parasite or on the other hand it induces apoptosis, The daignosis of the parasite is by flourcent ab ,latex aggl, serum ELISA, other serotest airect culture of bloody sample, histopathology<sup>4</sup>. fluids tissue or

#### **MATERIALS AND METHODS**

This study was conducted in the medical laboratories in the college of applied medical science University of kerbala during period about four months between collection of spesimen and analysis them the specimen was collected from alkafel hospital and other laboratories serum of pregnant women suffer from Table 1: Some parameters in prgnant women with Toxoplasmasis.

Toxoplasma gondii was taken. Serum creatinin, ALT, AST and serum cholesterol was measured on reflotron device by using disposable strips then putting adrope of serum on strip and measure the avarege of this biochemical parameter <sup>5</sup>.

#### RESULTS

Our study was carried out to show the efficacy of toxoplasmosis on liver and kidney parameters. The result was near to to the normal and there is little change some of them raised and other decreased . The test was on about 22 spesimens to check if pregnant women with Toxoplasma gondi infection has alteriaton in some of their biochemical parameters (creatinin ,ALT,AST,cholesterol) (Table 1). The researcher work on similiar search but on mice and rubbit, they find out and we were evaluated the liver functions by the estimation of total protein, serum albumin, aspartate aminotransferase (ast/got) and alanine minotarnsferase (ALT/GPT). In this study the result was normal in most spesimen and there little change (Table 1). This may be due to the parasite or may be due to physiological changes in some pregnant women may be because of pregnancy or may be due to other pathological cause this search give an indication that Toxoplasma gondi affect the immune side in the first line and may or may not affect the biochemical parameter.

Patient Number	Parmeters				
	Creatinine	ALT(gpt)	AST (got)	Cholesterol	
1	0.540	13.1	17.4	130	
2	<0.5	15	19.7	144	
3	0.612	12.3	20.6	146	
4	0.533	14.8	21.8	210	
5	0.588	13.7	20.2	106	
6	0.606	12.8	19.8	143	
7	0.638	13.5	15.5	124	
8	0.594	5.26	14.9	130	
9	1.18	22.2	36.5	120	
10	0.687	13.1	20.7	113	
11	0.607	9.78	19.4	155	
12	<0.5	8.40	13.9	182	
13	<0.5	12.5	15.4	112	
14	<500	19.2	24.3	223	
15	0.587	<5.0	29.3	140	
16	<500	12.3	19.4	210	
17	<500	12.6	5.52	184	
18	1.31	11.9	17.3	164	
19	0.736	12.1	19.5	164	
20	0.594	15.6	28.4	218	
21	0.733	12.8	19.4	166	
22	0.5	<5.0	29.8	125	
Normal value	0.5-1.1 mg/dl	6-40 u /l	6-40 u/l	<200 mg/dl	

#### DISCUSSION

Toxoplasmosis is the most common human infections in the world exactly in pregnant women <sup>4</sup>. Egg of toxoplasma gondi resist environmental conditions, and remain infectious in moist soil for more than 18 months, however, they do not live for a long time under cold or dry conditions<sup>3</sup>. two main types of toxoplasma organisms is found : the "egg", which is excreted in the feces of cats, and the stages of toxoplasmic tissue, which are found in cows and sheep <sup>5</sup>. A person who deals directly or indirectly with any of these forms of Toxoplasma will be infected, if the person is a woman pregnant, Toxoplasma will be going to directly to the placenta<sup>6</sup>. The harmfull of Toxoplasma gondii in the mother and child depends on the stage of pregnancy at the time of injury, and infection in early pregnancy may lead to poor pregnancy or stillbirth or in a child with varying degrees of blindness and/or various severe neurological conditions including hydrocephalus, microcephaly, and delay <sup>7</sup>. Eating infected uncooked pork is believed to be a major source of human toxoplasmosis infection, and congenital toxoplasmosis is a special form of disesse which the fetus becomes infected by the placenta. Examination of positive antibodies to previous exposure and immunization indicates the safety of the fetus. Simple blood withdrawal at the first visit to a doctor before birth can determine whether or not a woman has been exposed before, and therefore can be at risk or not. If a woman is exposed to toxoplasmosis during pregnancy, the child in particular is at risk. Therefore, a woman who does not have a previous exposure must be avoid eating raw meat and exposure to fecal feces, that most cats do not get rid of eggs actively and therefore they are not dangerous, but the risk may be that the eggs require a period longer than one day to become contagious, . However, the risks can be minimized, but not eliminated, and pregnant women with which have negative antibodies lead to indicating a previous lack of exposure to Toxoplasma gondii, so serological tests are recommended every month as a treatment through pregnancy for women exposed to toxoplasmosis for the first time Once which significantly reduces the risk of the parasite being transferred to the fetus <sup>8,9</sup>. The test was carried out on about 22 samples to check whether pregnant women with Alteriaton toxoplasmosis have some biochemical parameters (creatinine, ALT, AST, cholesterol) (Table 1). Research was carried out on mice and wheat, where they discovered that liver function was evaluated by estimating total protein in the serum, serum albumin, aspartase (ast/got) and alot/minotarnsferase (ALT/GPT). Kidney function was also evaluated by estimating creatinine and urea, as they as they noticed an increase in total protein, AIT and AST activities while the albumin level decreased in the untreated infected mice compared to the untreated untreated control group, as was the decrease in the protein level, as well as the levels of ALT AST in infected and treated mice with azithromycin compared to untreated and infected untreated mice with untreated treated mice with

azithromycin, and the albumin level showed an increase in infected and treated mice with azithromycin compared to untreated infected mice while the level of affinity with uninfected and azithromycin treated, revealed Also, there was an increase in the level of urea in the affected untreated mice compared to the control group, and they also observed that all groups studied had concluded that toxoplasm affects liver and kidney functions by increasing levels of protein, protein, ALT, AST, and urea, and then most of the criteria returned from the mice. Infected treatment to normal levels, due to improved immune system in infected treated mice  $10^{10}$ . In this study, the result was normal in most samples, but there is a slight change (Table 1). This may be due to the parasite, or it may be due to physiological changes in some pregnant women, it may be due to pregnancy, or it may be for other pathological reasons. This research gives an indication that Toxoplasma gondi mainly affects the immune side and may or may not affect biochemical parameters in the body.

#### RECOMMENDATIONS

Investigate in depth studies at the molecular level of the disease. Studies the reasons for the spread of disease and methods of prevention and tretment if possiple .

#### REFERENCES

- Mahmood S.H., Hassani H.H. and Zghair K.H. "Detection of B1 gene of Toxoplasma gondii in blood of pregnant and abortive women infected with this parasite". Iraqi J. Med. Sci. 2010; 8(3): 42-48.
- Hazem S. "Detection of Cryptosporidium parvum and Toxoplasma gondii in some Meat and Milk Products". College of Science / University of Mosul. 2010; 10(4): 511-520.
- Dubey J. P., Scandrett W. B., Kwork O. C. H. and Gajadhar A. A. "Prevalence of antibodies to toxoplasma gondii in ostriches struthio camelus". J. Parasit. 2000; 86 (3): 623-624. DOI: 10.1645/0022-3395(2000)086[0623:POATTG]2.0.CO;2.
- James. "Determination of toxoplasma gondii antibody prevalence in midwest investigator". mckean institution: io wa state university date received. 2003.
- Khadi J. A., Thamer M. K. and Al-Amin A. "Prevalence of antibodies to toxoplasm gondii in aborted ewes in south of Iraq". Iraqi J. Vet. Sci. 2009; 23(1): 199-202.
- Remington J. S., Desmonts G. "Toxoplasmosis". In: Infectious diseases of the fetus and newborn infant". Philadelphia (santa maria). 1990; 30: 123-127.
- Mead P. S., Slutsker I. V., Dietz I. F., Mccaig J. S., Bresww C., Shapiro P. M. and Griffin tauxe R. V. "Serological survey of antibodies to Toxoplasma gondii". Emerging Infect. Dis. 1999; 5: 607–624
- Torrey E.F. and Yolken R.H. "Toxoplasma gondii and schizophrenia". Emerging infect. Dis. 2003; 9 (11): 1375–80. doi: <u>10.3201/eid0911.030143</u>.
- Jaffar A. "Prevalence of toxoplasmosis among women in kirkuk-Iraq". J. fac. Med. Baghdad. 1992; 34(3):279-285.
- Al- Kaissy A.M. "Biochemical study on the effect of toxoplasma infection on liver and kidney function in abino mice". Journal of Al-Ma'moon College. 2011; 18: 120-127.