

# Cryptosporidiosis

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Cryptosporidiosis is a diarrheal disease caused by the protozoan *Cryptosporidium parvum*. The infection occurs either asymptotically or as a short-term diarrhea that goes away on its own (so-called self-limited disease). It manifests itself mainly in AIDS patients as severe watery diarrhea

náhled|Životní cyklus *Cryptosporidium spp.*

## The emergence of the disease

*Cryptosporidium parvum* is a coccidia found in animals and transmitted fecal-oral, e.g. by water contaminated with oocysts. It is therefore an anthroozoonosis, but human-to-human transmission is also possible, mainly during anal intercourse. In the small intestine, after ingestion, they develop into sporozoites, which continue to multiply. Resistant infectious oocysts are excreted in the stool.

## Clinical picture

The incubation period is usually 2–10 days, after which watery diarrhea occurs. The latter can be choleric in a severe course with rapid onset of severe dehydration. Diarrhea may be accompanied by vomiting, mild fever, abdominal cramps, malaise and fatigue

Infection in AIDS patients takes on a chronic and life-threatening course. Diarrhea in 10% is also accompanied by sclerosing cholangitis, pancreatitis, hepatitis and, rarely, pneumonia.

## Diagnosis

irect microscopic detection of oocysts in stool is performed by Ziehl-Neelsen staining. The pre-patent period is seven days (from infection to detection of the parasite in the stool). Oocysts are very resistant, they only die after heating >65°C with warm water for at least 30 minutes.

Differential diagnosis includes:

- bacterial diarrhea and other parasitosis
- malabsorption syndrome,
- Zollinger-Ellison syndrome,
- Crohn's disease.

## Therapy

There is no causal therapy, a good setting of antiretroviral therapy is crucial for AIDS patients. For complicated infections, we use chemotherapy drugs against toxoplasmosis, but they do not have the desired effect (pyrimethamine, sulfadiazine, spiramycin). Paromomycin and azithromycin (Sumamed) are also being tried.

**Symptomatic treatment** – rehydration, antidiarrheal, intestinal motility inhibitors, somatostatin (secretory bb. block), chlorpromazine (chloride secretion block).

## Links

### related articles

- Gastrointestinální parazitózy

### Source

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