Clinical pathology (L3)

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Gastrointestinal Worm:

- 1. clinical signs (diarrhea , anorexia , loss Weight, wool or hair breakage, loss milk production ,)
- 2. Lab . diagnosis : direct wet smear , indirect wet smear (flotation , precipitation) identified of the ova
- 3. culturing: detected of the larvae stage of the worm
- 4. blood test (high eosinophil & monocyte)
- 5. serological test
- 6. P.M

Dictyocaulus spp Lung worms : (in lung & bronchial and bronchioles)

Respiratory signs: (moderate coughing with slightly increased respiratory rates, rapid shallow breathing, heavily infected animals stand with their heads stretched forward and mouths open, abnormal lung sounds.)

Diagnosis:

- -Microscope detection of L1 larvae in feces
- -Microscope detection of eggs or larvae in the coughed up sputum or bronchoalveolar lavage fluid from affected animal
- -Blood serology test for worm antigens
- **--**P.M

Blood Protozoa

Blood should be examined for erythrocytes of abnormal size, shape, and poor staining reaction. A routine blood smear can be examined and is appropriate for the diagnosis. A Giemsa stain is most effective, but Wright's stain can also be used .In case of chronic infection, few circulating parasites may be present and diagnosis becomes more difficult. Immunologic tests are also now available for some hemoprotozoal infections.

Babesia

- C. S: (B. bovis or B. bigemina are similar but the courses of the diseases differ markedly. Babesiosis due to B bovis is characterised by fever up to 42o C, anorexia, depression, increased respiratory rate particularly on exertion, muscle tremor, reluctance to move, anaemia and jaundice.)
- a- peripheral blood smears . b. concentration and staining technique :
- 1- blood sample to which EDTA has been added is centrifuged at 1500-2000 r.p.m for 5 minutes . 2- thin smear is made from the RBCs just beneath the buffy coat. 3- fixed in absolute methyl alcohol 3-5 minutes . 4- stained with Giemsa stain 30-60 minutes .

Theileriosis in cattle

is a tick-borne disease caused by haemoprotozoa Theileria spp. The disease is manifested by high fever, enlarged lymph nodes, severe anemia, and death in some infected animals. The disease is highly endemic in South Asian countries.

- Examination of lymph smears :

a) the biopsy taken from prescapular lymph node by sterilized syringe with needle(11G) and spreads on the slide as for as a thin blood films . b) fixed with methyl alcohol for 2-5 minutes . c) stain with Geimsa for 30-60 minutes .

d) examine under oil immersion objective to see Koch's blue bodies (Macroschizote stage of Theileria in the lymphocyte cells(having a size ranged from.

Serological test

- A. Indirect hemi agglutination (IHA)
- B. Indirect immune fluroscence (IIF)
- C. Enzyme linked immunosorbent assay (ELISA)
- D. Card agglutination trypanosomiasis test (CATT)
- E. Complement fixation test (CFT)
- 6. Molecular Diagnosis (PCR)

Culture methods are used for;

Amoeba

Leishmania

Trypanosoma

Malarial parasite

Microscopic examination of sputum can identify: \neg

Paragonimus westermani (eggs) – Strongyloides stercoralis (larva) – Ascaris lumbricoides larvae.

NOT Sputum should be obtained from the lower respiratory passages not saliva. θ Sputum specimens should be collected first thing in the morning.