

Relationship Between Nutritional Status And Giardia Lamblia Infection Of Children In Al-Karbala City.

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Abstract:

Objective: Malnutrition is delivered and sustained in an unpredictable example in the tropical nations where it is endemic. Gut parasites could deliver ailing health. In kids, giardiasis is all the more regularly connected with looseness of the bowels and malabsorption.

Materials: Stool tests were arbitrary gathered from 100 children (50 males and 50 females) between the ages 2–12 from Karbala city emergency clinic during 2020-2021. Tallness, weight and Body Mass Index (BMI) boundaries have been utilized in the current investigation to decide the sustenance status.

Results:. No critical contrasts saw among young men and young ladies and as indicated by age gatherings. A parasitological stool assessment result demonstrated Giardia lamblia in just 31% of kids. There was proof of 32% of hunger status by W/H, H/Age and BMI ideas individually were related with positive giardiasis. The prevalence of infection males 35.7% was higher than females 25% in children .and 37.5% in males was higher than females 25% of malnutrition. The prevalence of infection and malnutrition in rural 77.4% and 75 % Respectively , 22.6% and 25% in urban .

Conclusion : The investigation presumed that giardiasis could be a factor partake with other sterile social factors that impact on nourishing status in children.

Key words: children, Giardia lamblia, nutrition status .

Introduction:

Intestinal parasitic contamination is a typical affliction of a large part of the total populace and it has been a significant issue in general wellbeing (Yamamoto eat al, 2000). Studies had indicated that intestinal parasites is regular in the creating scene (Tinuada eat al, 2006) apparently due to poor natural and individual cleanliness largely brought about by helpless sewage removal and deficient water supply (Plutzer J.....eat al, 2010). The connection between intestinal parasite disease and nourishing status is a significant issue (Yamamoto eat al, 2000). Giardia lamblia (inseparable from G. intestinalis, G. duodenalis) is a flogged unicellular eukaryotic microorganism that ordinarily causes diarrheal sickness all through the world (Barwick et al, 2000). This parasite was first found in 1681 by Antonym van Leuwenhoek, who discovered it on his own stool, however, in 1915 the parasite was named in honor to Professor A. Giard in Paris (Ford, 2005). Indeed, even Giardia lamblia is a protozoan parasite which has overall circulation and is basic in warm and sodden atmospheres all through the world (AL-Saeed and Issa, 2002). In this way, can cause the giardiasis is communicated by the sham oral course and direct by individual to-individual spread. In many causes, it is related with sullied drinking water, yet in addition periodically by sporting movement in still water (Thompson, 2001). The state of material poverty, as well as the bad economic situation in general, results in the spread of these parasites due to poor health care in general, and the result is poor health and the occurrence of disease {(Albonico eat al.... 2006); (Mbae CK eat al 2013)}. In kids, giardiasis is all the more regularly connected with looseness of the bowels and malabsorption. The Giardia lamblia is spread globally, and the kids are more at risk of disease than grown-ups {(Mohammed MAK..... eat al 2008); (Anim-Baidoo...eat al 2016)}. Giardiasis has been linked with protein-energy starvation, micronutrient deficiency, iron deficiency anemia, and growth failure {(Carvalho-Costa FA...eat al 2007); (Astiazarán-García H....eat al 2000); (NUNES, Beatriz Coronato et al 2017)}; that is of the most hazardous intestinal parasitosis to the physical growth of children. {(Carvalho-Costa FA...eat al 2007); (NUNES, Beatriz Coronato et al 2017); (Verhagen LM.... eat al 2013) } In Iraq numerous investigations revealed high rate with Giardia lamblia in Iraqi urban areas, for example, in Al-Hila city (11.32%), Duhuk city (38.5%) and Al-Shula and Al-Kadimya (13.64%) in 2002, 2006 and 2011, respectively .{ (Almusa , 2002); (Al-Saeed , 2006); (Al-Warid , 2011)}. Until now, insufficient consideration has been centered around this parasite and its relationship to lack of healthy sustenance status.

This study was intended to exhibit the relationship of the Giardia contamination and nutritional status of kids in Al-Karbala city.

Materials and Methods:

This investigation was completed at Al–Karbala emergency clinic from October 2020 to January 2021. 100 children (50 male and 50 females) between the ages 2 – 15 years were haphazardly picked to be remembered for study .Stool tests were gathered from all children. Every patient was requested to give a feces test. Tests got were dated and marked. Direct smear strategy and formalin ether centrifuged sedimentation procedure were performed for every example to decide Giardia lamblia disease as per (Garcia & Bruckner, 1997). The periods of the children were acquired from talking mother with the assistance of nearby occasion schedule. Statures were taken to the base of 1mm and weight were taken to the base of 10 gm with least dress. Gauging scale was aligned occasionally against known norms and gauging scale was adjusted to the zero preceding taking each estimation. All the estimation were taken according to rule of WHO (WHO ,1995). Stature ,weight and Body Mass Index (BMI) have been utilized in the current investigation to decide the nourishment status (Funke , 2008). All the anthropometric estimations were take observing the standard suggested by WHO (WHO ,1995). Weight file was controlled by the CDC table for determined Body Mass Index for chosen statures and weight for age ages 2 to 20 years and it was figured utilizing the accompanying equation (Amuta&Houmson , 2009): BMI (kg/m2) = Weight (kg)/Height (m2).

3) Statistical analysis

In this examination utilized Statistical Analysis System (SAS) (SAS., 2012). This used to discover impact of various elements in these examination boundaries. Chi-square test was utilized to locate the huge contrasts for those proportions in this investigation.

A- The Materials:

Microscope, Slide, Cover slip, Normal saline, Feces samples, Iodine

B- Collection of samples

1) Stool samples

The stool samples were collected for patients from central children hospital, in sterile clean and dry plastic containers, especially designed for stool collection and each container was labeled by a special number, name, age and gender.

2) Laboratory Examination

- General stool examination
- A- Direct Stool Examination

The feces were examined by naked eye investigating color consistency, mucus and odor.

B-In Direct Stool Examination

Direct physiological lodine smear. The feces test was analyzed by putting a limited quantity of stool, taken by wooden stick from various spots, particularly bodily fluid then it was placed in dry and clean

slide by adding one drop of lodine added and blended altogether, and afterward put the cover slip and inspected under 40x amplification to objective find the trophozoite and growth of intestinal protozoa and the assessment was performed from the upper right point finishing off with lower left point of the slide.

Result:

Prevalence of malnutrition based on <5 percentile of BMI show that (37.5%) of boys and 25% of girls were reported to be malnutrition (table 1). There was significant difference between two age group 4-6 and other group but there was no significant difference between these groups. There was no difference between male and female in all age group but there was a significant difference between them in age group 8-10 and 10-12. There was no significance difference according to age and sex but there was a high significant difference between normal and malnutrition status.

Age	Normal		%	Malnutrition		%
	Male	female		Male	female	
2/4	4	3	7(63.63%)	2	2	4(36.36%)
4/6	6	7	13(76.47%)	4	1	5(27.77%)
6/8	7	6	13(65%)	5	2	7(35%)
8/10	5	8	13(68.42%)	4	2	6(31.57%)
10/12	13	9	22(68.75%)	6	4	10(31.25%)
total	35(62.5)	33(75)	68(68%)	21(37.5%)	11(25%)	32(32%)

Table (1): Prevalence of malnutrition (based on <5th percentile of BMI) according to age and sex.

Table 2 shows the distribution of study cases according to age. Most of the infection were in age 4 year old 42.8 % & the less infected group for child aged 3 years old 20 %.

Table (2): The prevalence rates of Giardia lamblia infection in all children

Age (y)	No. examined	No. positive (%)
2 y	6	2 (33.33 %)
3 у	5	1 (20 %)
4γ	7	3 (42.8 %)

Nat. Volatiles & Essent. Oils, 2021; 8(4): 8077-8089

11	2 (18.18%)
8	3 (37.5 %)
12	4 (33.33 %)
8	3 (37.5 %)
11	3 (27.27 %)
13	4 (30.76 %)
9	3 (33.33 %)
10	3 (30 %)
100	31 (31 %)
	8 12 8 11 13 9 10

The higher rate of infection were in males children35.7%, than females 25 % Table 3.

Age (y)	No.examined	No.positive	%
male	56	20	35.7%
female	44	11	25 %
total	100	31	31%

According to the table 4, there was significant difference in place of residence. Where the prevalence of giardiasis and Malnutrition are in rural more than in the urban 77.4% and 75%, 22.5% and 25%, respectively.

Table (4).Distribution of Malnutritionwith giardiasis by their place of residence:
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	In rural	In urban
No. positive giardiasis	24 (77.4%)	7 (22.5%)
Malnutrition	24 (75%)	8 (25%)

The results showed that only Giardia lamblia was identified and the prevalence of giardiasis was 31% among children. There was evidence of 32 % of malnutrition status in children by Wt/Ht, Ht/age, and BMI concept, while 1% children Malnutrition with no infection (table 4).

malnutrition	Positive infection	Malnutrition with no	Normal nutrition with
		infection	infection
32 (32%)	31 (31%)	1(1%)	0

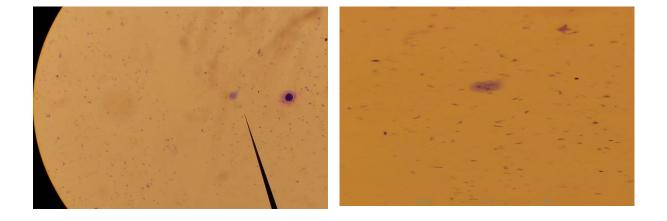


Figure 1 : Giardia lamblia trophozoite under microscope stool examination cases Giardiasis {400X}.

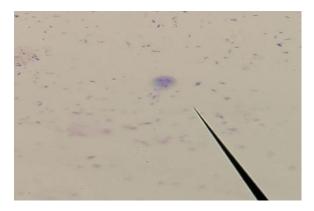


Figure2 : Giardia lamblia cyst under microscope stool examination cases Giardiasisin fecal sample {400X}

4. DISCUSSION

World Health Organization (WHO, 1995) has prescribed different files dependent on anthropometry to assess the wholesome status of the youngsters. This investigation has expressed the healthful status by three ideas in particular, Wt/Ht/age and BMI. The principal ideas utilized as marker of present unhealthiness and the second as pointer of past or long haul under nourishment (Amuta&Houmson, 2009). While the third idea BMI is the favored technique for communicating the muscle to fat ratio

percentiles of gathering (Funke, 2008). It has now been grounded that the Body Mass Index (BMI) is the most proper variable for dietary status among youths (Amuta&Houmson , 2009).

The spread of giardiasis was slightly higher in children aged 4 year old 42.8 % & child aged 6 & 8 years old 37.5 % (table2). This may mean that transportation of the infection happens early in life; it spreads within families, reasonably from person to person. The result was agree with Al-Mekhlafi ...eat..al 2005, where found the most infected child aged 2-6 years.

Zonta ...eat..al.. 2019, found in his study, that boy more be affected and the outcome be through with the current study, where boys turned out to be slightly more infected than girls Table (3). These results may be related to playing boys outside their homes, then they more likely to be affected.

Complete normal of hunger among the inspected youngsters 32 %. The finding of the present examination shows that lack of healthy sustenance of kids was both because of long-haul hardship just as ongoing causes. This outcome concurs with the finding of (Medhi eat al 2006,) who show that their outcomes demonstrate that the hunger of the offspring of Tea Garden was because of long-haul hardship just as ongoing causes.

Verhagen LM eat al 2013, found in rural populations in Venezuela helminthiasis and giardiasis were correlated with critical and persistent nutritional status respectively. These studies correspond with our study which manifested that the vast majority of these kids are from the rural sections (table 4), which had a low financial foundation rancher, laborers, and jobless who had low-level schooling and live in houses where the unhygienic expectation for everyday comforts, brought down disinfection and basic inventory.

Such natural components add to the endurance of sickness specialists, for example, parasite, microbes, and viruses(Stephenson, 1994) subsequent to being contaminated with this specialist these kids free the protein-energy, iron, and nutrients admission to the advantage of these illness specialists which later antagonistically influence the development and dietary status of the individual (Mor eat al, 2009).

Giardiasis is emphatically connected with decreased jejunal surface region and a diminished Dxylose discharge particularly in recently tainted individuals (Gupta &Urrutia, eat al, 1982). It appears rational to assume that giardiasis and its relationship of an expanded predominance of squandering in kids. The current investigation (table 5) noticed a connection between Giardia disease and unhealthiness; also Abou-Shady eat al, 2011, observed an important impact of giardiasis that caused a significant decrease in serum zinc, iron levels, and loss of weight were in the infected group compared to

the control. While squandering however saw that factors other than parasitism, for example, social class and cleanliness were more significant this concur with (Bhattacharya eat al ,1985). Loewenson eat al, 1986, announced a solid relationship between Giardia contamination and nourishing status yet there was no proof of a relationship between social class and other factors with wholesome status. This examination was reasoned that giardiasis could be a take an interest factor with anther such socioeconomy, instruction and hygiene factors mindful to bother healthful status in essential offspring of Al-Karbala city.

Conclusion:

The study concluded that giardiasisLamblia infection is still commonAmong malnourished children in areas with poor healthWhich may be the reasonMalnutrition among these children.

Acknowledgment:

Use of hospital staff and families of children as research samples for mom and dad For my family and children

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