Comprehensive Parasitology Profile

The Comprehensive Parasitology Profile is a thorough analysis to detect the presence of intestinal parasites, as well as beneficial intestinal microflora, imbalanced flora, and bacterial or fungal possible pathogens. This stool test can help reveal hidden causes behind acute or chronic conditions that develop from parasitic infection or dysbiosis.

Susceptibility to Parasite Infection:
It is generally assumed that travel to a Third World country or the occasional camping trip are prerequisites for acquiring a parasite infection. Owing to a combination of extensive worldwide travel, increasing immigration to the United States, day care centers and other sources of easy transmission, anyone is now susceptible. Diarrheal diseases, in fact, (bacterial as well as parasitic) constitute the greatest worldwide cause of morbidity and mortality.

Pathogenicity:
Various organisms are increasingly recognized for their potential pathogenicity. For example:
• Giardia lamblia is the leading cause of intestinal parasitic infection in the United States. Only a few decades ago it was not considered pathogenic.
• Cryptosporidium, a well-known pathogen in animals, was only recently identified as a human pathogen.
• Blastocystis hominis is the most frequently observed fecal parasite. Its level of pathogenicity continues to be controversial.

Pathogenicity, in general, appears to vary depending on the parasite itself, host susceptibility, and the microbiological environment in which the parasite lives.

Symptoms of Infection:
The most common symptoms of parasite infection are diarrhea and abdominal pain. Other symptoms may include flatulence, anorexia, weight loss, fevers, chills, blood or mucus in the stool, and fatigue.

Systemic Complaints:
We generally think of parasite infection as causing acute gastrointestinal symptoms. An increasing number of parasite cases feature systemic complaints not traditionally associated with parasites, such as:
• Urticaria
• Reactive arthritis
• Chronic fatigue, asthma and constipation in individuals who are immunocompromised or whose intestinal flora is chronically imbalanced.

Diagnosing Parasitic Infections:
The diagnosis of parasitic infections depends on the laboratory, with detection rates dramatically increasing with more sophisticated procedures. Genova Diagnostics’ Comprehensive Parasitology Profile uses the most technologically advanced procedures to accurately identify a wide range of protozoal parasites, including amoebae, flagellates, ciliates, coccidia and microsporidia.

Specimens are carefully analyzed by highly-trained technicians using computer-enhanced microscopy, new staining procedures, and advanced immunoassay techniques. These accurate detection methods allow for increased detection rates, intensifying the awareness of the important relationship between parasitic infection and a broad spectrum of illnesses.
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Human microflora is influenced by environmental factors and the competitive ecosystem of the organisms in the GI tract. Pathological significance should be based upon clinical symptoms and reproducibility of bacterial recovery.

Microbiology Legend
- NG: No Growth
- NP: Non-Pathogen
- PP: Potential Pathogen
- P: Pathogen

Microbiology

Bacteriology
- Beneficial Bacteria:
  - Lactobacillus species
  - Escherichia coli
  - Bifidobacterium

- Additional Bacteria:
  - alpha haemolytic Streptococcus
  - gamma haemolytic Streptococcus
  - Citrobacter freundii

Mycology
- *NG: Not Growth

Additional Tests (if ordered)
- Inside: Not Ordered
- Outside: Not Ordered
- Reference Range: Negative
- Campylobacter specific antigen
- Enterohemorrhagic Escherichia coli: Shiga-like Toxin
- Reference Range: Negative

Lab Comments
- Partial panel ordered. 06/26/07 PE

Commentary
- Commentary is provided to the practitioner for educational purposes, and should not be interpreted as diagnostic or treatment recommendations. Diagnosis and treatment decisions are the responsibility of the practitioner.
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For test kits, clinical support, or more information contact:
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More detailed publications with references are also available: www.GDX.net