

Purged stools from 389 patients were evaluated microscopically for the presence of *Blastocystis hominis*. *B. hominis* was the only intestinal parasite present in 23 (6%) of these patients. Of the 23 patients, 19 had symptoms which included abdominal discomfort (15 patients), anorexia (10 patients), diarrhea (9 patients), and flatus (9 patients). The remaining four patients were asymptomatic.

Two apparently healthy children from the same family were found to have moderate to heavy *Blastocystis hominis* in their stool samples whilst being investigated for intestinal symptoms: sporadic, painless, rectal bleeding in one and persistent diarrhea in the other.

*Blastocystis hominis* in two children of one family  
West Indian Med J 1990 Mar;39(1):57-8 . Bratt DE, Tikasingh ES.

We describe a unique case of severe *Blastocystis hominis* infection in an elderly man with severe dehydration, marked leukocytosis and hypoalbuminaemia after antibiotic treatment for right pneumonia. The patient recovered after treatment with metronidazole. This case presentation demonstrates the ability of *B. hominis* to induce severe gastrointestinal manifestations and general deterioration, particularly in light of the controversy surrounding its possible potential pathogenicity.

Severe *Blastocystis hominis* in an elderly man. J Infect 1996 Jul;33(1):57-9 Arch Intern Med 1988 May;148(5):1064

We describe the case of a ten year-old girl who was admitted to our hospital for diarrhea, abdominal pain and fever . The presence of *B. hominis* was demonstrated in her stools. The patient responded favourably to treatment with metronidazole. We feel that our observation is an additional support to recognition of *B. hominis* as a human pathogen.

*Blastocystis hominis* infection: a case report. Antonelli F et al. Minerva Pediatr 1996 Dec;48(12):571-3

The most usual complaint of blastocystis patients is of intense abdo. discomfort accompanied by pain. Diarrhea is not standard, and constipation is common. The symptoms gleaned from the literature include abdo. pain, discomfort, anorexia, bloating, cramps, diarrhea, constipation, alternating diarrhea and constipation, watery diarrhea, mucus diarrhea, vomiting, dehydration, sleeplessness, nausea, weight loss, inability to work, lassitude, dizziness, flatus, pruritus, and tenesmus. Blood in the stool as well as excessive mucus and leukocytes have been reported. Moderate to severe eosinophilia is not uncommon and was reported in 8 of 19 patients in one study.

*Blastocystis hominis* - Past and Future. Clin. Micro. Reviews. Jan 1991 p. 61-79

Twenty-nine patients were asymptomatic (59%), and 20 had symptoms of bloating, flatulence, soft/loose stools, or constipation.

*Blastocystis hominis* in hospital employees. Am J Gastroenterol 1992 Jun;87(6):729-32

Of the 23 patients, 19 had symptoms which included abdominal discomfort (15 patients), anorexia (10 patients), diarrhea (9 patients), and flatus (9 patients). Association of *Blastocystis hominis* with signs and symptoms of human disease. J Clin Microbiol 1986 Oct;24(4):548-50

The most frequent symptomatology in patients with *B. hominis* only was: abdominal pains, pruritus, flatulence, malaise, anorexia and diarrhea. Only 14.9% did not present any symptoms at all. Isolate resistance of *Blastocystis hominis* to metronidazole (Flagyl). Trop Med Int Health 1999 Apr;4(4):274-7

The clinical picture of *B. hominis* consists of non specific abdominal pain, watery diarrhea, anorexia, vomiting and weight loss. Rarely, a more invasive form of the disease with rectal bleeding can occur. Blastocystis hominis infection: a case report. *Minerva Pediatr* 1996 Dec;48(12):571-3

A study at the Children's Hospital of Pittsburgh in the USA in 1993 found that 85% of children infected with *Blasto.* experienced gastrointestinal symptoms, including abdominal pain, diarrhoea, vomiting, and weight loss. Seventy-five percent of these children had been exposed to well water or had travelled to third-world countries. Prevalence and characteristics of *Blastocystis hominis* infection in children. *Clin Pediatr (Phila)* 1993 Feb;32(2):91-6

A 9 month survey carried out on 39 children in a hospital in Kuwait found abdo. pain or discomfort with or without diarrhoea was present in 32 children. Only three of the children were diagnosed with other parasites. Fourteen cases diagnosed as acute experienced cramp-like diarrhoea, watery diarrhoea and vomiting. *J Trop Med Hyg* 1991 Apr;94(2):118-22. Blastocystis hominis infection in children.

A study of 49 hospital employees in New York infected with *Blastocystis hominis* - 59% were asymptomatic. The remaining 41% experienced bloating, flatulence, soft/loose stools, or constipation. *Am J. Gastroenterology* 1992 June;87(6):729-32. Blastocystis hominis in hospital employees.

Fifty-two patients at a teaching hospital in the US found without concomitant parasitic infection or bacterial pathogens in stool experienced gastrointestinal symptoms. The highest reported symptom was abdominal pain, diarrhea and five patients experienced vomiting. In 50 of these patients *Blasto* only was identified in stool samples. *J Clin Gastroenterol* 1990 Oct;12(5):525-32. Frequency of recovery of *Blastocystis hominis* in clinical practice.

Of 143 at a Canadian hospital where *B.hominis* was the only parasite found:

19 patients were asymptomatic

15 had symptoms of acute gastroenteritis

21 had chronic gastroenteritis

One hundred and thirty of these patients reported watery diarrhoea, abdo. pain and gas.

*J Clin Microbiol* 1990 Jan;28(1):116-21. Epidemiology and pathogenicity of *Blastocystis hominis*.

Symptoms of *B. hominis* in a hospital in Saudi Arabia found the most common symptoms were abdominal pain (87.9%), constipation (32.2%), diarrhea (23.4%), alternating diarrhea and constipation (14.5%), vomiting (12.5%), and fatigue (10.5%).

Clinical significance of *Blastocystis hominis*. Qadri SM, al-Okaili GA, al-Dayel F. Department of Pathology, King Faisal Specialist Hospital and Research Centre, Riyadh, Saudi Arabia

We have reviewed the records of 65 symptomatic patients with *B hominis* in their stool. We conclude that *B hominis* is a potential pathogen that may or may not require drug therapy depending on the overall clinical circumstances, the severity of symptoms, and the presence of other pathogenic organisms.

*Blastocystis hominis*--a potential intestinal pathogen. R R Babb and S Wagener *West J Med.* 1989 November; 151(5): 518-519.

The most usual complaint of *Blastocystosis* patients is of intense abdominal discomfort accompanied by pain. Diarrhoea is not standard, and constipation is common. The symptoms gleaned from the literature include abdominal pain, discomfort, anorexia, bloating, cramps, diarrhoea, constipation, alternating diarrhoea and constipation, watery diarrhoea, mucus diarrhoea,

vomiting, dehydration, sleeplessness, nausea, weight loss, inability to work, lassitude, dizziness, flatus, pruritis, and tenesmus. Blood in the stool as well as excessive mucus and leucocytes have been reported. Moderate to severe eosinophilia is not uncommon and was reported in 8 of 19 patients in one study.

Blastocystis hominis - Past and Future. Charles H. Zierdt. Clinical Micro. Reviews. Jan 1991, p. 61-79.

The clinician should be aware of B.hominis as a possible cause of diarrhoea and other symptoms, particularly when the parasite burden is high. Clinical Relevance of Blastocystis hominis. Lancet June 2, 1984

B. hominis has been reported in patients with intestinal symptoms, intestinal obstruction due to carcinoma, in AIDS patients with diarrhoea, and in patients with Irritable Bowel Syndrome. Letter to the editor. British Journal of Biomedical Science 2001; 58:129-130 Windsor, MacFarlane, Whiteside, Chalmers, Thomas & Joynton.

The clinician should be aware of B.hominis as a possible cause of diarrhoea and other symptoms, particularly when the parasite burden is high. Clinical Relevance of Blastocystis hominis. Lancet June 2, 1984

We believe this case provides further evidence to support the pathogenicity of B. hominis. Hemorrhagic Proctosigmoiditis and Blastocystis hominis infection. Annals of Internal Medicine. Volume 124(2) Jan. 15, 1996. 278-279

Loose stools, diarrhea, stomach pain, and stomach cramping are the most common symptoms. Loss of weight and appetite, nausea, and fatigue also are common symptoms. Center for Disease Control website on D.fragilis

Blastocystis hominis is increasingly recognized to be a cause of human enteric disease, with symptoms often like those in giardiasis. Lipid Peroxidation Level in Patients with Blastocystosis. Eser Kiliç, Süleyman Yazar, Recep Saraymen, İnönü Üniversitesi Tıp Fakültesi Dergisi 10(1) 1-3 (2003)

Blastocystis hominis can cause terminal ileitis in patients, without any apparent predisposing factors. Crohn's Disease and Infections: A Complex Relationship. Medscape/WebMD. 2005

Symptoms commonly attributed to infection with B. hominis are nonspecific and include diarrhea; abdominal pain, cramps, or discomfort; and nausea. Profuse, watery diarrhea has been reported in acute cases, although this may be less pronounced in chronic cases. Fatigue, anorexia, flatulence, and other nonspecific gastrointestinal effects also may be associated with B. hominis infection. Fever has been reported, particularly in acute cases, but has not been noted in other studies.

Other signs and symptoms sometimes reported include fecal leukocytes, rectal bleeding, eosinophilia, hepatomegaly and splenomegaly, cutaneous rashes, and itching. One report has indicated that joint pains and swelling may result from infection of the synovial fluid by B. hominis. Blastocystis hominis Revisited Stenzel & Boreham. Clinical Micro. Reviews. Oct. 1996, Vol. 9, No. 4. p. 563-584