

EC MICROBIOLOGY Short Communication

Fascioliasis in Human: Is it Important?

Khalil Mohamed*

Epidemiology Department, Faculty of Public Health and Health Informatics, Umm AL Qura University, Makkah, Saudi Arabia

*Corresponding Author: Khalil Mohamed, Epidemiology Department, Faculty of Public Health and Health Informatics, Umm AL Qura University, Makkah, Saudi Arabia.

Received: August 23, 2018; Published: October 29, 2018

There are two species of Trematodes or flatworms can cause the fascioliasis in human; these are *Fasciola hepatica* and *Fasciola gigantica*. These species are belonging to food-borne and zoonotic diseases groups. According to WHO, the human cases occurred occasionally but in the present the cases are increasingly particularly in Europe and USA where there is one specie *F. hepatica* and also in Africa and Asia where both species are found [1]. WHO estimates that more than 2.4 million of individuals are infected with fascioliasis in more than 70 countries worldwide [1].

The signs and symptoms are different according to the phase of the disease, when the disease is acute the symptoms start between 4 - 7 days after initial infection. The symptoms are: fever, nausea, internal bleeding, skin rashes, and stomach pains. These symptoms may continue for couple of months [2]. Chronic phase of the disease may continue for several months to years and may include anaemia, stomach pains, pancreatitis, hepatomegaly, and wide-spread bacterial infections [3].

Individual may get infection by consuming raw or undercooked meat of sheep and goat which contains the eggs of *Fasciola* species. Accidental infection may occur when individual ingestion food contaminated with eggs such as watercress and fresh vegetables [4]. Therefore, risk factors may increase the infection by *Fasciola* species are: consuming raw or undercooked meat of sheep and goats and eating fresh vegetables contaminated with *Fasciola* eggs.

The complications of fascioliasis include chronic gastrointestinal discomfort, Halzoun syndrome where infection targeted the throat, and jaundice when chronic liver disease developed [5,6].

Prevention and control of fascioliasis in human is easily and need less effort by cooking meat thoroughly before consuming, inspection animals particularly sheep and goats in slaughterhouse, and providing education and spreading awareness.

Bibliography

- 1. WHO. "Foodborne trematode infections" (2017).
- 2. Mas-Coma S., et al. "Neurological and ocular fascioliasis in humans". Advances in Parasitology 84 (2014): 27-149.
- 3. Kaya M., *et al.* "Clinical presentation and management of Fasciola hepatica infection: Single-center experience". *World Journal of Gastroenterology* 17.44 (2011): 4899-4904.
- 4. Lee MB. "Every day and exotic foodborne parasites". Canadian Journal of Infectious Diseases 11.3 (2000): 155-158.
- 5. Nyindo M and Lukambagire A. "Fascioliasis: An Ongoing Zoonotic Trematode Infection". *BioMed Research International* (2015): 786195.
- 6. Machicado C., *et al.* "Association of Fasciola hepatica Infection with Liver Fibrosis, Cirrhosis, and Cancer: A Systematic Review". *PLOS Neglected Tropical Diseases* 10.9 (2016): e0004962.

Volume 14 Issue 11 November 2018 ©All rights reserved by Khalil Mohamed.