



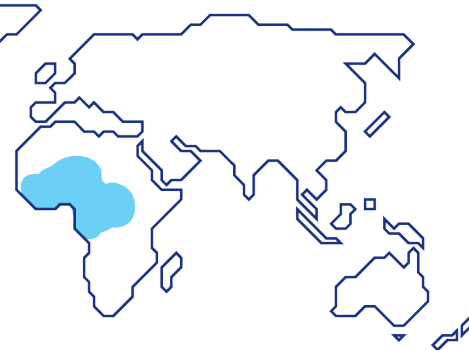
## What

Amebiasis is a disease caused by the parasite (a protozoan) *italic* which exists in different stages leading to invasive disease. Cysts are mainly ingested via contaminated food or water. In the bowel cysts develop to the next stage (trophozoites), which can invade and destruct the bowel wall. Subsequently, these amebae may spread to other organs. Transmission occurs through the fecal-oral route.



## Who

Amebiasis occurs worldwide, although mainly present where sanitary conditions are poor. Amebiasis is generally seen in migrants and international travelers. Risk factors for severe disease include young age, pregnancy, corticosteroid treatment, malignancy, malnutrition, diabetes and alcoholism



## Where and when

Anyone can have this disease, it is more common in people who live in tropical areas with poor sanitary conditions. Areas with high rates of amebic infection include India, Africa, Mexico, and parts of Central and South America. Although international travel is an important risk factor, it is not a common disease in travelers who have spent less than one month in endemic areas.

## Prevention

Currently, no vaccine or preventive medication is available. Prevention involves maintaining good (hand) hygiene and avoiding feco-oral transmission. This involves avoidance of untreated water and uncooked food, such as fruit and vegetables that may have been washed in contaminated water. Special water filters and water disinfectants could be considered.



## Treatment

After diagnosis by means of stool microscopy, antigen detection, molecular tests, demonstrating blood antibodies, or if indicated abdominal ultrasound to diagnose liver abscesses infection can be treated with medication. Amebic cysts must be additionally treated, for which various approaches exist.

## Symptoms

Of all infections, 90% are without symptoms. Intestinal amebiasis generally has a subacute onset, usually over 2-4 weeks. Symptoms range from mild diarrhea and stomach cramping to severe dysentery with bloody stools or severe inflammation of the bowel. Disease manifestations outside the bowel include liver abscesses, presenting with right upper quadrant pain and fever, and less often there is pulmonary, cardiac, or brain involvement.



## In case of infection

All *E. histolytica* infections should be treated, even in the absence of symptoms, given the potential risk of developing invasive disease and the risk of spread to household members. Therapy aims to eliminate the infection and to eradicate intestinal persistence of the parasite.