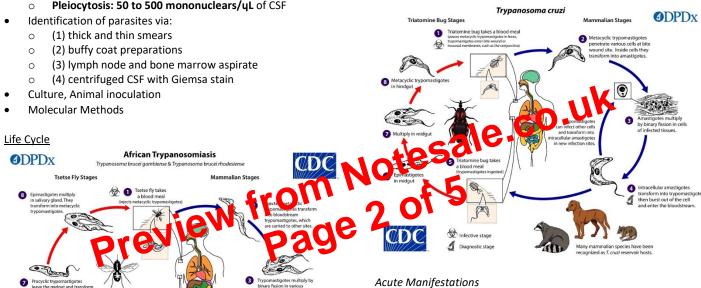
2% of cases	98% of cases
Vector: G. Morsitans	Vector: G. Palpalis
Multiple animal reservoir	Humans are primary reservoir
Rapidly progressive acute	"African Sleeping Sickness"
febrile illness +	Chronic course
lymphadenopathy	Intermittent fevers, night
Death before CNS Symptoms	sweats, malaise
become prominent	Winterbottom sign – posterior
	CLAD
	Confusion, fatigue → stupor
	and coma

Reduvid bug

- Life Cycle:
 - Inoculation 0
 - Enters nearby tissue cells \rightarrow becomes dividing amastigotes 0
 - Infected cells filled with amastigotes \rightarrow transformation to 0 trypomastigote
 - Cell rupture \rightarrow trypomastigote are released into the 0 peripheral blood \rightarrow reach distant tissues





- Chagoma swelling around bite site of reduviid bug •
- Disease is milder and more asymptomatic in older individuals remains infected throughout life

Chronic Disease

- Megaesophagus, megacolon, hear conduction problems
- Related to destruction of the effector cells of the parasympathetic system
- Quiescent infections may be exacerbated by immunosuppression

Area of initial bite of *Tsetse* fly \rightarrow local multiplication \rightarrow transient chancre at bite site

Diagnosis

- Based on geography and clinical findings
- CSF
 - ↑ total IgM 0
 - Pleiocytosis: 50 to 500 mononuclears/yL of CSF

- Most common: children <5 y/o
- Malaise hills fever, hepatosplenomegaly and myocarditis
- **Romana's Sign** swelling of tissues around the eyes

American Trypanosomiasis

Ø J Diagnostic stag

Trypanosoma Cruzi: Chaga's Disease

Transmission: "kissing bugs" - Reduviidae

- Reduviid bugs defecate at time of feeding (contains the 0 trypomastigotes)
- Rubbing and scratching \rightarrow enters the body or though intact 0 mucosa of the mouth or conjunctiva
- Can also be transmitted by blood transfusion 0