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Giardia lamblia in stool, Lamblia intestinalis

General:

This parasite belongs to the Flagellata and is found in the upper duodenum of humans and numerous animals, e.g. sheep and cattle. Carriers are flies or cockroaches, which transfer the excrement cysts to food or drinking water. Slight diarrhea, dyspepsia or allergic symptoms usually appear after an incubation period of 3-23 days. Lambliasis (traveler disease) impresses with intense diarrheas and acute gastrointestinal symptoms. Rarely the flagella reach the gallbladder and cause cholecystitis, cholangitis with icterus. Reinfections are not rare in this case. Chronic progressive forms can occur in patients with antibody defect syndromes or pancreatitis.

Congenital infections are unknown. Predisposing factors are anacidity, dyspeptic disturbances, carbohydrate rich food, possible climate influences, antibody deficiency syndrome and gammopathy.

Diagnostic: serologic parameters are not recommended, better investigation for an acute infection is the antigen proof in feces.

Therapy: latent infection: 2 g metronidazole as a single dose or 500 mg/d for 7 days; symptomatic infection: metronidazole 3 x 250-500 mg/day, for 5-10 days (> 95% success) alternatively, resochin, erythromycin.

The following tests are available:

Giardia lamblia antigen, direct^

Indication: persistent diarrhea.

Material: 5 g stool

Preanalytics: sample must arrive at the laboratory within 2 hours after collection!

TAT: same day, FML

Method: IA

For complete list of laboratory test offered at Freiburg Medical Laboratory, please visit http://www.fml-dubai.com/parameter-listings/

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