Babesiosis and Malaria.

Sir,

Suliman and colleagues' deserve appreciation for identifying Babesia infection and stressing the importance of recognizing this entity during drug resistant malaria. As the authors have also cited references to state that immunity induced by malarial parasites lead to diminished multiplication of Babesia, we would like to know whether they have observed combined infection (Babesia and Malaria) in any of their cases (N = 137). The authors have mentioned serodiagnostic difficulties. In fact, advanced immunodiagnostic methods are used for detecting and identifying Babesia and Plasmodium infections in disease monitoring, management and control efforts. Serodiagnostic and DNA hybridization methods may be complimentary in respective detection of both chronic and acute infections. Recent improvements in the polymerase chain reaction (PCR) make feasible a more sensitive and uniform approach to the diagnosis of these infections. All one requires is the appropriate primers spanning the interval transcribed spacer locus for each of several Plasmodium and Babesia species.2

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Reply from the author

We thank Dr Uma and his colleague for their comments. We do regard this work1 as a pure parasitological exercise and as a primary result. Owing to the difficulties made by the antigenic relationship with malaria4 in our work ahead, we would like to question the above assumption and to find safe differential serological techniques. This is why we depended mainly on parasitology bearing in mind that malaria is mainly diagnosed by parasitological techniques. Concurrent malaria/Babesia infection was described in about 7 of the cases. In this, you put in mind the evasion of the immune system by parasites by their intra-erythrocytic position, this needs further work. The PCR and DNA hybridization a direct solution in this position, especially at the beginning of the establishment of this subject, where in tropical areas the presence of malaria necessitates a differential diagnosis for whom morphology is not satisfactory. These techniques are as well useful, as you mentioned, in acute stages (before humoral response) and in chronic or carrier status when the parasites are scanty.

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References