

Molecular Detection of Chlamydia Trachomatis and Estimation of Interleukin 6 in Women Patients with Vaginosis

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Abstract

In this study 160 women patients who were complaining from even vaginitis were included in this study. Vaginal swabs and Endocervical swabs were taken by Gynecologist.

Detection of Chlamydia was done by two methods

- 1- Rapid test cassette method
- 2- RT-PCR technique

The results showed that seven samples (4.3%) were positive and 12 samples (7.5%) gave positive results by real time PCR.

The later method is more sensitive when compared to rapid test.

Besides blood samples were taken from the same patients to show the interleukin six. It was found that interleukin 6 was significantly increased (94.33 ± 10.81) in women patients with chlamydia. We compared with those patients infected with gram positive or gram negative bacteria.

Introduction

Chlamydia Trachomatis is one of the most pathogens associated with many disorders. In women, vaginitis is an infection classified within sexually transmitted disease.

1- However, the pathogen was reported in many other diseases such as eye infections and others.

2- Detection of chlamydia by traditional methods may give false results, so the presence in the RT-PCR methods make this pathogen easy to be investigated in vaginal swabs or endocervical swabs.

3- Several proteolytic enzymes are produced by this pathogen which have a major role in invasion of a disease. When injected into the host, these proteins produced along with dozens of proteins produced by it, which are in diagnosis of the pathogen inside the tissue samples.

4-hostsignalling pathway were mean pulate as results of specific pretest by chlamydia trachomatis

5-some immunoglobial factors were found to be incrazed by Chlamydia infection where the women show increases in C-reactive protein and also is some cytokine particullary intrleukin 6 wich is significantly higher than normal

6-some studiedfound that chlamydia vaginatus was ireated efficiently by using doxycycline and azythromysin wich have hi effect on this pathogen (7/8)

Aim of study

The aim of study is to investigate Chlamydia vaginitis in women patients with vaginitis

Patients an methods

A-patients : 160 women patients with vaginitis who attending to the department of Gynecology in the hospital of children and maternity in Babylon provonicwere included high vaginal and indocervical swabs obtained from parents to be subjected to the next experiment

Ethical approval was obtained directly from the women

B-diagnosis of Chlamydia

Chlamydia is identify by two methods the rapid test asset or stripes from BIOZEC company Holland origin an by real time PR

- INTERLKIN 6 levels determined was one according to the kit information (interleukin Elisa kit) from ABCAM(abubo42)

Results and discussions

In this stdy 160 vaginitis women were subjected for investigation the presence ofChlamydia trachomatis

Rapid test showed seven(4.3%) samples positiveresults for this pathogen were the RT_PCR show 12(7.5%) samples positive shown in table 1.

Table (1) detection of Chlamydia trachomatis by rapid test and real time PCR

Samples numbers	Rapi test for chlamydia	Real time PCR	
160	(4.3%)7	12(7.5%)	

It is known that real time PCR method is more accurate than rapid test in detection of *Chlamydia trachomatis* because of high sensitivity of this method and also it depends on DNA primers which are specific for *Chlamydia*.

However the detection rate of *Chlamydia* is very identical to the obtained by (9) and (10) who found that the rate of detection of *Chlamydia* from women with vaginitis does not exceed than 12% (11benu 2014).

Moreover some other bacteria are isolated from patients the results showed that *Escherichia coli* is the predominant followed by *Staphylococcus aureus*, *Streptococcus agalactiae* and *Enterobacter cloacae*.

Blood samples were obtained from 10 patients with suffering from infection (10 with *Chlamydia* infection) (10 with gram positive bacteria infection) (10 with gram negative bacteria infection) also 10 blood samples obtained from women with no history of vaginitis as a control group to show the level of interleukin 6 as cytokines.

The result showed that IL6 was increased significantly in women patients with *Chlamydia* while remain as normal in the other type of infections and control group as shown in the table 2.

Table 2: estimation of interleukin 6 level in woman patients.

Types of infection	Mean value of Interleukin6	P value $p < 0.05$
Gram positive (10cases)	50.72 \pm 5.08	0.0926
Gram negative(10cases)	48.3 \pm 4.66	0.0994
<i>Chlamydia</i> (10cases)	94.33 \pm 8.81	0.307 significance
Control group(10 cases)	44.6 \pm 3.52	_____

Normal value 1.5_5.0 pg/ml

According to the data obtained in this study the IL6 is high only in case of *Chlamydia* infection which reach (94.33 \pm 10.8) and this result is identical to that obtained by Kelly et al 2013 (Reference 12) who found that IL6 is high in vaginitis caused by *Chlamydia* and this cytokine is elevated as immune defence marker.

The interleukin 6 production to *Chlamydia* is from primary reproductive epithelial cells that may be high variable but also may be high due to *Chlamydia* stress response protein which have a role in manipulating host signaling pathways and stimulating the production of cytokines.

Financial disclosure

There is no financial disclosure.

Conflict of interest

None to declare.

Ethical Clearance

All experimental protocols were approved and all experiments were carried out in accordance with approved guidelines.

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