Summary and Conclusion

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This work tries to study is there an association between toxoplasmosis and Hepatitis C virus infection in females in childbearing egyptian women in Qalubia Governorate.

One hundred and sixty five samples were collected randomly in addition to seventy cord blood samples from department of Gynecology and Obstetric Benha Teaching Hospital and Internal Medicine Department Benha University Hospital, short history was taken from the patient's sheet with reference to the obstetric history (gravidity, parity, previous abortions and previous deliveries of babies with conginetal malformation).

All cases were screened by Hepatitis C virus rapid test which revealed 27 cases (16.4%) were positive to Hepatitis C virus antibodies then 112 cases including the 27 positive HCV antibodies cases were examined for anti-***Toxoplasma*** IgG antibodies by ELSIA technique and 110 cases including the 27 positive HCV antibodies cases were examined for anti-***Toxoplasma*** IgM antibodies by ELISA technique in addition to 70 cord samples were examined for anti-***Toxoplasma*** IgG and IgM antibodies by ELISA technique.

The following results were obtained:

1- The prevalence of HCV was (16.4%) among examined cases by using rapid test (27/165 cases)

2- The seropositivity of anti-***Toxoplasma*** IgG antibodies by ELISA technique was 53.6% of examined cases (60/112cases) .

3- The seropositivity of anti-***Toxoplasma*** IgM antibodies by ELISA technique was 9.7% of examined cases (10/110 cases) .

4- The seropositivity of anti-Toxoplasma IgG antibodies among HCV positive cases is insignificantly higher than that among HCV negative cases in maternal blood samples.

5- There was significant increase of seropositivity of anti-***Toxoplasma*** IgG antibodies among HCV positive cases than that among HCV negative cases of cord blood samples which may denote that HCV Infection is a risk factor for toxoplasmosis.

6- There was no significant difference between OD of anti-***Toxoplasma*** IgG antibodies of maternal and cord blood samples which means that IgG antibody can pass placenta .

7- There was significant increase of OD of anti-***Toxoplasma*** IgM antibodies of maternal blood than that in cord blood samples which may indicate that not all infected mothers transmit the infection to their fetuses.

8- There was gradual increase of seropositivity of anti-***Toxoplasma*** IgG antibodies with aging and there was significant increase among various age groups. But no relation between the seropositivity of anti-***Toxoplasma*** IgM antibodies with age .

9- The seropositivity of anti-Toxoplasma IgG among multigravida is insignificantly higher than among primigravida.

10- The seropositivity of anti-Toxoplasma IgG among cases in rural areas is significantly higher than among cases in urban areas.

11- There was insignificant difference between seropositivity of anti-***Toxoplasma*** IgM antibodies among primigravida and multigravida cases.

12- There was insignificant difference between seropositivity of anti-***Toxoplasma*** IgM antibodies among cases in rural and cases in urban areas.

13- There was insignificant difference between seropositivity of anti-***Toxoplasma*** IgG , IgM antibodies and bad outcome of pregnancy

14- The seropositivity of HCV antibodies among examined cases significantly increase with age .

15- The seropositivity of HCV antibodies were significantly higher among patients who had positive history of blood transfusion,previous operations,visit to dentist and tattoing and there was insignificant difference between seropositivity of HCV antibodies among cases with high risk occupation and cases without high risk occupation.

16- There was positive correlation regarding clinical manifestations of HCV (Jaundice, haematemsis and hepatosplenomegaly) and seropositivity of HCV antibodies.