In chronic infection the intensity is difficult to document as patient heavily infected at an earlier stage may pass few or no eggs (Kamel , et al., 1978). Egg passage decrease markedly with increasing age of infected individuals in most communities (Lehman et al, 1976 and Cheever , et al, 1978). Beside that chronic infection causes modulation of body immunological response (Colly , 1977 and Pelly , 1977). Also , it is well accepted that peripheral blood eosinophilic response , which is regarded as a sort of immune reaction is greatly affected by the duration of the disease (Sturrock , 1977 and Knoph , 1979).

In this study , patients with similar egg count showed different absolute eosinophilic counts , due to individual variation. Thus , it is impossible to calculate the egg count mathematically from a known eosinophilic count , which is afterall not required in clinical practice.

That is why blood eosinophilia is not probably a parameter for the intensity of infection in chronic cases. However , it should be remembered that those with chronic infection are also liable to continous infection in rural areas.

Large scale survey is needed in order to assess finally whether eosinophilia could be a valuable measure for the intensity of schistosomal infection.

SUMMARY

In the present time, more efforts are directed to study the immunological aspects of schistosomiasis. It is now confirmed by several workers that eosinophils play one of the major roles in the immunopathology and probably protection against schistosomiasis. (Owhashi, et al., 1983).

Almost all the pathological feature of the disease are caused by inflammation and subsequent granuloma formation are developed around the schistosome egg. (Elwi, 1967). Thus, it is expected that the morbidity of the disease correlate with the intensity of infection. The schistosomal infection can almost be assessed by egg count which is rough reflection to the worm load in the patient and hence the intensity of infection. (Cheever et al., 1977).

The aim of this study is to find whether there is any realtionship between the eosinophilic count in the peripheral blood and egg count in stool by Kato technique or the egg count in urine by Saif technique.

Thus in this study 100 patient from endemic area and 50 subject free from infection subjected to

1- Complete history and clinical examination.

2- Complete urine and stool analysis.

3- Egg count in stool by Kato technique (Martine and Beaver, 1968).

4- Egg count in urine by Saif technique (Saif, 1961).

5- Total and differential leucocytic count .

6- Absolute eosino philic count.

The result are tabulated and evaluated as follows:

- Laboratory finding of patients and control as regards to the absolute eosinophilic count and egg count.
- The groups of patient, with either S. mansoni or S. haematobium showed significant difference from control group as regard the absolute eosinophilic count.
- A significant positive correlation between the absolute eosinophilic count and egg count both in urine and stool except in heavy infection group with S. mansoni, probably due to the small sample size.

These results may therefore suggest that in recent infection blood eosinophilia increase in a manner related to the egg count in stool or urine.