INTRODUCTION:

Trichomoniasis is a worldwide common sexually transmitted disease. The causative agent, Trichomonas vaginalis (Tr.vaginalis) has for long been regarded as a relatively benign parasite of the genitourinary system. Recent reports of the interaction of this protozoan with bacteria or viruses, however point on its possible role in transmission of more serious pathogens to deeper parts of genital organs (Gombosova & Valent 1990) Male sexual consorts are generally accepted as being the primary sources of infection in women but the extent to which these parasites exist in men is not clear (Daly et al., 1989).

Women have long been recognised as the reservoir of Tr.vaginalis, whereas men are seen to serve merely as the short term vector of the organism. In symptomatic women, the disease is often characterized by severe inflammation and a malodorous seropurulent vaginal discharge. Men suffering from Tr.vaginalis infection mostly often exhibit no symptoms although mild cases of urethritis, prostatitis and epididymitis have been associated with venereal trichomoniasis (Langely et al., 1987).

Tr. Vaginalis may be described as a venereal disease because it is transmitted in the great majority of cases by sexual intercourse. It is necessary to treat both men and women to eliminate the parasite from its inner most hiding places (Mccann, 1974).

Despite efficient therapy the incidence of Tr. vaginalis remains rather high. The main reason is the frequent asymptomatic course of infection that these cases escape diagnosis and therapy and serve as potential source for spreading the disease in population. Therefore a need for a simple, and inexpensive screening method becomes increasingly important (Gombosova & Valent 1990).

AIM OF THE WORK

The aim of this work is to study trichomoniasis as a sexually transmitted disease and to prove the presence of the organism in prostate of men in contact with females with proved Tr.vaginalis. Also to evaluate the reliability of Acridine orange stain in comparison with wet-mount, Giemsa and Leishman stains.

Trichomoniasis is a common and sometimes distressing condition in women. It is caused by infection of the genitourinary tract by the pathogenic protozoan Trichomonas vaginalis (Tr.vaginalis). Men may also be infected, usually without showing any symptoms, most cases of trichomoniasis are sexually transmitted (Ackers et al., 1975).

History:

Tr. vaginalis protozoan was first described by Donne in 1836. The organism is found in purulent secretions of the genital tract in both men and women (Catterall, 1972).

Morphology:

Family trichomonadidae is well known for its important parasites in man and animals, both vertebrate and invertebrate. The flagellates are characterized by the presence of several anterior flagella, a pelta that lies at the anterior margin of the body, an undulating membrane, a deeply staining costa that extends along the base of the undulating membrane and an axostyle. There is only one nucleus (Noble et al., 1989).

Although there are more than 100 species of trichomonas, only three species infect humanbeing, Tr. vaginalis is the species which is responsible for urogenital tract infection. Tr. hominis is occasionally found in diarrheal stools, but its pathogenicity has not been well established. The third species Tr. tenax is a harmless commensel of the human mouth (Sun, 1988).

Tr.vaginalis is a motile protozoan, its shape is oval, round or pyriform depending on the environment. On average it is $10\text{--}20\,\mu\mathrm{m}$ wide, with four rapidly beating anterior flagella, an undulating membrane, a posterior axostyle which projects as a spine and a large nucleus. Abnormal forms have been repeatedly