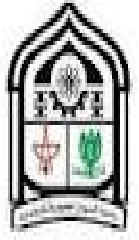


# **Sudan University of Science and Technology**



## **College of Graduate Studies and Scientific Researches**

### **Detection of Cytomegalovirus Inclusion Bodies in Product of Conception Using Histochemical Staining Methods**

الكشف عن أجسام شمول فيروس سايتمغالو فيروس في منتج الحمل باستخدام طرق التلوين الهستوكيميائية

Thesis submitted in partial fulfillment of the requirement for M.Sc degree in medical laboratory science (histopathology and cytology)

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**Dedication**

**to**

**my parent**

**my brothers and sister**

**my husband and lovely kid**

**my teachers**

**To Sudanese health and care**

**I gift this work to all of you**

**Iubna**

## **Acknowledgement**

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Thank full to Mrs. Abdalla Hassab Elnabi this man who help all of us silently and calmly ,and this is scientist manner .

Thanks for you all

Lubna

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اجريت هذه الدراسة الرجعية المستشفوية بمستشفى بحري التعليمي هدفت الدراسة الي إكتشاف الجسم المشتمل بالخلية للفيروس المضخم للخلايا الذي نبحث عنه في بقاء الحمل (الانسجة المجهضة) بخملات المشيمة باستخدام طرق الصبغ للنسيج الكيميائية هيماتكسلين والايوسين،ماكيفيللو وبي اي اس .

تم جمع 76 قالب مدعم بشمع البرافين من الإرشيف من عام 2007 حتي 2010 لحالات تم تشخيصها كإجهاض خلال الثلاث أشهر الاولى من الحمل .تم جمعها وصبغها وتشخيصها لإكتشاف الجسم المشتمل بالخلية للفيروس المضخم للخلايا .تم جمع المعلومات الخاصة بالمرضي من إرشيف الإقامة القصيرة بالمستشفى .

يتراوح عمر المرضى بين 22 إلي 47 سنة ومتوسط الاعمار 31 سنة.

النتائج التشخيصية للعينات عكست الاتي 13( 17.1% ) جسم مشتمل بالخلية للفيروس المضخم للخلايا بإستخدام صبغة هيماتكسلين والايوسين و 55( 72.4% ) عينة طبيعية لخملات المشيمة و 6( 7.9% ) تنكسية لخملات المشيمة و 1( 1.3% ) سرطانة لخملات المشيمة و 1( 1.3% ) استس قائية لخملات المشيمة.

تم إكتشاف ( 17.1% ) 13(جسم مشتمل بالخلية للفيروس المضخم للخلايا بإستخدام صبغة هيماتكسلين والايوسين,) 3.93%( باستخدام ماكيفيللو و ) 14.511%( بإستخدام بي اي اس . مع وجود علاقة ذات دلالة احصائية بين الاصباغ الثلاث المختلفة (  $p < 0.05$  )

وجدت الدراسة ان عمر المرضى الذين يتعرضون للإجهاض يتراوح بين 26 الي 30 سنة وليس هناك علاقة بين الزيادة في العمر و حدوث حالات الإجهاض. وجدت الدراسة إن هناك علاقة بين سكن المرضى و نتائج التشخيص للإجهاض معظم المرضى من منطقة بحري شمال (  $P < 0.05$  )

وجدت الدراسة انه لا وجود لعلاقة ذات دلالة احصائية بين النتائج التشخيصية وعدد مرات الاجهاض والعلامات السريرية للمرضى (  $P > 0.05$  )

خلصت الدراسة الي أنه يمكن إكتشاف الجسم المشتمل بالخلية للفيروس المضخم للخلايا. باستخدام طرق الصبغ للنسيج الكيميائية هيماتكسلين والايوسين،ماكيفيللو وبي اي اس (  $P < 0.05$  ). وجد أن الإصابة بالفيروس المضخم للخلايا متصاحبة مع حالات الإجهاض وتم تحديد المشتمل بالخلية للفيروس المضخم للخلايا في بقاء الحمل بنسبة 17.1% .

## Abstract

This is a retrospective hospital based study which conducted in Khartoum North teaching hospital, aimed to detect cytomegalovirus inclusion bodies in product of conception (aborted tissues) in chorionic villi by applying conventional histochemical stains, Haematoxyline and eosin, Machiavellos and PAS stain.

Seventy six archived paraffin blocks from 2007 to 2010 of known cases of miscarriage at first trimester were collected, stained and examined for cytomegalovirus inclusion bodies. The patients' information was collected from the archived short stay files.

The patients' age ranged between (22-47) year with mean age 31year.

The histopathological results (H&E) reflect the following results: The inclusion body represent 13 (17.1%) haematoxyline and eosin in chorionic villi (trophoblast infected cell), 55 (72.4%) normal chorionic villi, 6 (7.9%) degenerate chorionic villi, 1 (1.3%) choriocarcinoma and 1 (1.3%) hydropic chorionic villi.

Cytomegalovirus inclusion bodies were detected in 13 (17.1%) by hamatoxyline and eosin stain, 3 (3.9%) by Machiavello's and 11 (14.5%) by PAS stain. With significant relation between different three stains ( $p < 0.05$ ).

According to the work the patients age suffering of miscarage ranged from 26-30 years, the corelation between age and histological results was found to be statistcally insignificant ( $p > 0.05$ ).

The study found that there is association between resident of patients and histopathological results, as most of patents from Bahri shemal ( $p < 0.05$ ).

The study found no significant relation between miscarriage number, clinical remarks and histopathological results. ( $p > 0.05$ ).

The study concluded that cytomegalovirus inclusion bodies were detected using histochemical staining method, haematoxyline and eosin, Machiavello stain and PAS. haematoxyline and eosin considered as a best method for detection of cytomegalovirus inclusion body, special stain applied as confirmatory tools. Cytomegalovirus infection appears as one of causes of miscarriage. 17.1%.

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### **List of abbreviation**

HCMV	HUMAN CYTOMEGALOVIRUS
CMV	CYTOMEGALOVIRUS
DNA	DEOXY RIBONUCLIC ACID
TORCH	TOXOBLASMA,RUBELLA,CTOMEGALOVIRUS,HERPS VIRUS.

PAS	PERIODIC ACID SCHIEF'S REAGENT
CD4	CLUSTER DIFRENTATION
IL	INTERLUKEN
TNF	TUMER NECROSIS FACTOR
AIDS	ACQUIRED IMMNEDEIECIENCY SYNDROME
HIV	HUMAN IMMUNEDEIECIENCY VIRUS
EC	ENDOTHELIAL CELL
ELISA	ENZYME LINKED IMMUNOASSAY SORBENT
IGM	IMMUNOGLOBULINM
RIA	RADIOIMMNO ASSAY
IGG	IMMUNOGLOBULIN G
GI	GASTROINTESTINAL
H&E	HAEMATOXLINE AND EOSIN
PCR	POLYMARAZE CHAIN REACTION
CSF	CREBRO SPINAL FLUID
RNA	RIBONUCLIEC ACID
HSV	HERPS VIRUS SIMPLEX
VZV	VIROCELLA ZOSTER VIRUS
RPL	RECURENT PREGNANCY LOSS
CMV-1GIV	CTOMEGALLOVIRUS-IMMUNEGLOBULINE INTRAVENOUS
D&C	DALITATION AND CURRTAGE
HCG	HUMAN CORTECOGONADOTRPHIN
DIC	DISSEMINATED INTRAVASCLAR COAGULOPATHY
LMP	LAST MENSTERUALPERIOD
DPX	DESTRINE POLYLYTHINE XYLENE

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