Normal Microflora of the Urogenital

defence Mechanism 4 System

in urinary tract

All parts of urinary system except the portion of the urethra closest to the urethral opening are sterile.

Escherichia coli & lactobacillus are the most common m.o colonizing the outer portion of the urethra

Acid pH and high salt and urea concentrations retard the growth of bacteria in urine.

In males, other than the last third of the urethra, the genital tract does not have a normal microflora and is sterile

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genital tract

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Urinary tract infections

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Urinary tract infections are a group of common diseases that occur predominantly by ascension of normal enteric flora through the urethra into the bladder.

UTI causes urethritis (inflammation of urethra) & cystitis (inflammation of bladder)

Infection spreads from urethra (in female 4cm, males 20cm) to bladder causing urethrocystitis, women affected ~50X more than men.

Sometimes infection ascends to reach kidneys & cause pyelonephritis.

Less often, infections begin in the kidneys and descend to the urethra.

Infection occures due to asending of M.O from urethra to the bladder.

* M.o can transfer from blood to keeling or other Part of unimory tract and cause infections as

Urinary tract infections desending M.o.

- In males the prostate gland is closely associated with the urethra and bladder, so prostatitis, or inflammation of the prostate gland, often accompanies UTIs.
- Escherichia coli is the causative agent in 80% of UTIs, but other enteric bacteria from feces such as Proteus mirabilis and Klebsiella pneumoniae can also cause such infections.

A Typical Bae

When Chlamydia or Ureaplasma are responsible for infection, they usually are sexually transmitted.

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Urinary tract infections

Diagnosis is made by identifying related divised and

 Diagnosis is made by identifying related clinical symptoms(dysuria or pain and burning on urination) in combination with an abnormal urinalysis and growth on urine culture.—

• UTIs are treated with antibiotics, such as amoxicillin, trimethoprim, and quinolones, or with sulfonamides according to susceptibilities of their causative agents.

 Prompt treatment helps prevent the spread of infection. UTIs can be prevented by good personal hygiene and frequent, complete emptying of the bladder. urine منه ی DIAGNOSTIC TESTING FOR Stick

- For non-catheterised patients, a well taken midstream specimen of urine (MSSU) should be collected, avoiding perineal contamination, into a sterile universal container.
- Ideally samples should be processed as soon after collection as possible, to prevent bacterial overgrowth. If a delay in processing is unavoidable, samples should be refrigerated at 4C.
- Urine microscopy is the use of a microscope to look at urine.
- Urine dipsticks use different chemicals reagents on a strip that is dipped in urine to diagnose urinary tract diseases.
- · Urine culture allows identification of the organism causing infection.

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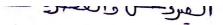
Inflammation of blacker CYSTITIS

- Cystitis is an infection of the bladder.
- The clinical features of lower UTI commonly include dysuria (pain on passing urine), urinary frequency, urgency and fever.
- Escherichia coli is by far the most common cause of urinary tract infections, especially cystitis. Other enteric gram-negative rods such as Klebsiella species and Proteus species are regular culprits. Pseudomonas aeruginosa can cause urinary tract infection.

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Candida species can cause infection in patients who have extensive to antibiotic use. Rarely, viruses such as adenovirus and cytomegalovirus can cause a hemorrhagic cystitis. These viruses almost exclusively cause cystitis in immuno-compromised hosts.

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PYELONEPHRITIS

- Is an infection of the kidney(s).
- may occur either by ascension of bacteria from the urethra to the bladder and then to the kidney(s) or, less commonly, through hematogenous spread from other sites of infection.
- Escherichia coli is the most common pathogen causing pyelonephritis.

 Other enteric gram-negative rods such as Klebsiella and Proteus species are also involved. Pseudomonas aeruginosa can cause pyelonephritis

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most common sign urination at right sa 4 PYELONEPHRITIS

- Patients with pyelonephritis typically present with fever, flank pain, nausea, and vomiting. They may or may not have signs and symptoms of lower tract infection (dysuria, frequency, hematuria, suprapubic tenderness).
- Treatment: Antibiotics that are able to obtain high concentrations in the renal parenchyma and have activity against common pathogens are required to treat pyelonephritis.
- Empiric regimens for community-onset infection include a fluoroquinolones (ciprofloxacin or levofloxacin) or a third generation cephalosporin such as ceftriaxone.

Genital infections

- Vaginitis: The term applies to inflammation of vaginal mucosa that may extend to the vulva and is commonly associated with a white or yellow discharge.

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- Predisposing conditions: pregnancy, diabetes, oral contraceptives, menopause, conditions that result in estrogen & progesterone imbalance will result in pH & sugar change.
- Causative agent of Vaginitis: Gardnerella vaginalis in combination with anaerobic bacteria, Candida albicans (yeast), the protozoan Trichomonas vaginalis (sexually transmitted).
- Bacterial Vaginitis is usually caused by opportunistic organisms from disturbance of normal flora by antibiotics or other factors.

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Genital infections

Bacterial Vaginitis most common

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Gardnerella vaginalis: G-ve bacillus or coccobacilli - bacteria

Symptoms: frothy, fishy-smelling vaginal discharge, even Backerica discharge is small but contains millions of m.o. Vagintis

(anti Protozogo antibacterial)

Treatment: Metronidazole (to kill the anaerobic bacteria needed for the association to produce disease), Ampicillin & tetracyclines may be used

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Cardnerella Vaginalis Zo on-1 sios

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male معكن لجيد تقي Genital infections

Trichomoniasis (Trichomonas vaginitis) Caused by flagellated protozoan Trichomonas vaginalis (TV) -> Protozoa

· Primarily is STD, -> Sexual transmited disease

 Most women with TV are believed to be asymptomatic. However, abnormal vaginal discharge (white discharge (egg white consistency)) vulval and peri-anal itching are the most common symptoms.

• During pregnancy, TV can cause pre-term delivery and low birth weight

• Treatment and prevention in adults و المنال بورَّت قبل الله Treatment and prevention in adults

Multiple or single dose of oral metronidazole; and restoration of normal vaginal pH in women معتادة المعاددة ا

Sexual partners of women with TV need to be treated as well.



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infection by lungi Genital infections are all others and all others Vulvo-vaginal candidiasis (VC); ('Thrush') is caused by Candida albicans in the majority of cases.

- Immunosuppression (secondary to HIV, or immunosuppressive agents), diabetes mellitus, pregnancy, use of broad spectrum antibiotics can each predispose women to VC.
- Clinical features: Itching and irritation, vaginal discharge, dysuria are the most common complaints. thick isul
- Treatment: Topical azole antifungal agents (as pessary or creams) can be used; clotrimazole, miconazole; A single oral dose of fluconazole is an alternative

SEXUALLY TRANSMITTED DISEASES

Non-gonococcal urethritis and cervicitis is causes by Chlamydia Female 9 male trachomatis. -->

The majority of infected (70% of female and 50% of male) patients are

asymptomatic. (infofility pac لي حقول الانكام و شاعد المعالية المعالم المعال

Untreated chlamydial infection can cause pelvic inflammatory disease (PID) in 10-40% of women that may result to infertility.

Treatment: tetracyclines & sulfa drugs. Chlamydia not susceptible to penicillins A Typical is so a

Bacteria

Chlamydia

SEXUALLY TRANSMITTED DISEASES + it is STD affachment in epithelium Gonorrhea is caused by Neisseria gonorrhea urinary tract and Vagina Has Attachment pili (fimbriae) enable gonococci to attach to epithelial cells that line the urinary tract so that they are not swept out with the passage of unine _ 2 Realese le _ _ Libril eie d'lile + urine. Gonococci produce an endotoxin that damages the mucosa in fallopian tubes and releases enzymes such as proteases and phospholipases that may be 2 damage leis endobain jui bisul * important in pathogenesis. Female genelity tract (FalloPian tubes) It is killed by phagocytes but some bacteria can survive inside the leukocytes ٤ ومعكن نقل عقم عيد السناء Phagocyte Cells ex: WBC, Luekocyte ركن ميكن تقادمها ويقيش داخلها وبالتالى سموت عليمها

SEXUALLY TRANSMITTED DISEASE	S
The urethra is the most common site of gonorrhea infections in many of infected females develop pelvic inflammatory disease (PID). Disseminated infections, which occur in 1 to 3% of cases, produce bacteremia, fever, joint pain, endocarditis. Treatment: Most frequently used is Cephalosporin e.g Ceftriaxone Azithromycin. The reason of dual treatment is that people with N. gonnorhea are most of the time co-infected with Chlamydia trached azithromycin is effective against it. If allergic to cephalosporins use spectinomycin A active against A Tyrical Bacteria ex Chlamydia	plus plus plus April 191 April 191 Celtallo Chorin
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Viral Sexually Transmitted Diseases

- Herpes simplex virus (HSV) infection,
- Two closely related viruses: HSV-1 (typically causes cold sores) & HSV-2 (typically causes genital herpes) cause same kind of lesions on mucous membrane of mouth & genitals.
- HSV results in a chronic infection that may cause recurrent episodes.
- Initial HSV-1 or HSV-2 infection can be asymptomatic, Most adults have antibodies to herpesviruses, but only 10 to 15% have experienced symptoms. كي ما Vescile عن الذا Cartagiaus me به
- In both HSV-1 and HSV-2 infections, vesicles form under keratinized cells and fill with fluid from virus-damaged cells, particles of cell debris, and inflammatory cells. Vesicles are painful, but they heal completely in 2 to 3 weeks without scarring Virus



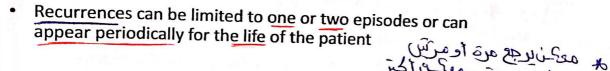
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- Herpes virus is a latent virus, within 2 wks of active infection, viruses travel via sensory neuron to ganglia where they replicate slowly or not at all.
- They can reactivate spontaneously or be activated by fever, stress, hormone imbalance, menstrual bleeding, a change in the immune system, or trauma.



 Once the virus reaches target epithelial cells and starts to replicate, antibodies can neutralize the viruses, and T cells can eliminate virus-infected cells.

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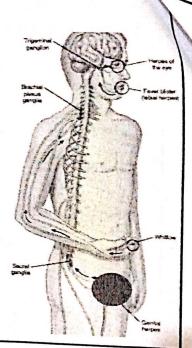
T-cells that can help to eleminate Virus

Viral Sexually Transmitted Diseases

•After an occurrence of a lesion, they migrate to ganglia, from which they travel back to the site of the original lesion at the time of the next outbreak.

• An exception to this pattern sometimes occurs at the trigeminal ganglion, at which three branches of the trigeminal (fifth cranial) nerve join. Virus from a lesion on the lower lip could migrate out along the ophthalmic branch on a subsequent episode, causing the eye to become affected, or even migrate backward into the brain, causing meningitis and brain damage.

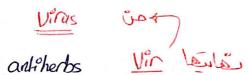
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Viral Sexually Transmitted Diseases

- Genital herpes: causes vesicles in genitals of both males & females which are severely painful &itchy. Lesions shed viruses which are very contagious.
- Women infected with genital herpes may be subject to three other serious problems: اقا حاب العالم العالم
- 1- the incidence of miscarriages is higher among women with genital herpes,
- 2- the infant of infected pregnant woman must be delivered by Caesarean section.
- 3- Finally, infected women have an increased risk of becoming infected with the AIDS virus.





- HSV-DNA polymerase inhibitors (aciclovir, valaciclovir, famciclovir) used systemically are highly effective in controlling HSV episodes. These agents do not eradicate infection.
- Aciclovir is used for recurrent episodes.
- •For patients with frequent HSV recurrence episodes (more than 5 episodes a year), suppressive therapy can be initiated. This includes acyclovir or valaciclovir once a day. The duration of suppressive therapy is 12 months.