Research Letters

Sir.

Probable Transmission of Acute Toxoplasmosis Through Breast Feeding

Studies carried out in human beings and laboratory animals concluded that parasitemia occurs during the initial stage of *T. gondii* infection, but did not elucidate its duration or magnitude. ¹⁻⁴

In several animals models toxoplasmosis transmission through infected maternal milk was demonstrated.⁵ T. gondii has already been isolated from milk and colostrum of several animals species during experimental or natural infection.^{4,5} In these studies, newborn babies fed by infected mothers with milk containing T. gondii developed asymptomatic infection.

Milk can be considered a potential vehicle of transmission of toxoplasmosis, but it was never clearly demonstrated in human beings.⁴⁻⁷ This type of transmission might occur when the mother is infected during the last weeks of gestation or during breast feeding.^{4,6}

Langer⁴ was the first to isolate *T. gondii* in maternal milk but the interpretation of the results became difficult because of the possibility of contamination.

Rieman et al. (1975)⁸ reported a case of toxoplasmosis in a child and the transmission through unpasteurized goat milk was suspected.

Oral transmission is not common due to the fact that the trophozoites are destroyed by the pharyngeal mucosa. There is still the possibility that gastric acid be buffered by the milk fat, allowing tachyzoites to penetrate the gastric or duodenal mucosa.

A child was seen at a private clinic of Transmissible Diseases in October 15th 1993 in Londrina, Paraná, Brazil, and the mother reported a history of 8 days of fever, malaise, and irritability. The child was only fed maternal milk and the mother was submitted to an acute toxoplasmosis treatment and was part of the group of 17 individuals who had acquired the disease through ingestion of raw mutton during a party in September 93. The mother's symptoms commenced approximately 21 days before the child became ill.

The serological survey of the local sheep where the meat was consumed revealed that 43 per cent were seropositive for toxoplasmosis by indirect immunofluorescence assay.¹⁰

The diagnostics of the child were performed by the investigation of specific antibodies for toxoplasmosis (IgG and IgM) using the uptake of specific IgM by the immuno-enzymatic assay, passive haemagglutination, and indirect immunofluorescence techniques.

The lack of data to prove transmission through maternal milk in human beings and the fact that infected mothers transmit antibodies to the child through the milk is enough to recommend that breastfeeding should not be discontinued when the mother presents with acute infection.⁶

There is still the need of studies to clarify the actual importance of this type of toxoplasmosis transmission.

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