



PART B: Distribution biology and control of
Anopheles stephensi* *A. culicifacies*, *Aedesaegypti*, *A.
albopictus*, *Culex pipiens fatigans* *Mansonia* sp., *C.
tritaeniorhynchus*, *Ctenocophalidescheopie
and *Pediculus*. Histopathological changes in organs in
relation to diseases such as liver cirrhosis,
nephrosis, tumors and cancer.

[FREQUENTLY ASKED QUESTIONS]

Course Name	:	Zoology B.Sc. 3rd Year
Paper No. & Title	:	Z-306B Applied Zoology
Topic No. & Title	:	A4 Medical Zoology

Lecture No. &Title : 1

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FREQUENTLY ASKED QUESTIONS

Q-1. Who causes Malaria?

A-1. In Human malaria is transmitted only by females of the genus *Anopheles*.

Q-2. Which are the effects of malaria in general?

A-2. A resultant Liver dysfunction and Necrosis to RBCs as a result of malaria is uncommon and usually only occurs in those with other liver condition such as viral hepatitis or chronic liver disease

Q-3. How is filariasis controlled?

A-3. Filariasis can be controlled and treated by the following drugs:

- An arsenical preparation is effective in destroying adult worms.
- Diethylcarbamazine is effective to kill microfilariae.
- Para melaminylphenylstibonate is drug used for infective larvae and immature adults.

Q-4. What are the initial symptoms of Filariasis?

A-4. Initially, it starts with pitting oedema which gives rise to brown oedema leading to hardening tissues. Still late, hyperpigmentation, caratosis, wart like lesions are developed. Eg. Hydrocele (40-60%), Elephantiasis of Scrotum, Penis, Leg, Arm, Vulva, Breast, Chyluria and Haematuria.

Q-5. What are the common symptoms of encephalitis?

A5. Fever, malaise, head and muscle ache, cough, and general weakness. Blotchy rash spreads from the abdomen to chest to rest of body, but rarely to hands and feet. Severe disease includes prostration, delirium, very low blood pressure, and coma are the common symptoms associated with Encephalitis.

Q-6. What is petechiae?

A-6. It is a condition of tiny broken blood vessels as a result of Histopathological effects caused when plague occurs.