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**Systematic Review** 



# Prevalence of Acute and Chronic Toxoplasma gondii Infection in the Iranian Women of Reproductive Age: A Systematic Review and Meta-Analysis of Data Published Between 2010 - 2024





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#### Abstract

Context: Toxoplasma gondii remains a global concern, especially in developing countries. This parasite is particularly important in women of childbearing age due to its increased risk of miscarriage and serious complications in the newborn.

Objectives: This systematic review and meta-analysis was conducted to determinet the serum prevalence of acute and chronic T. gondii infection in women of reproductive age in Iran.

Methods: The systematic search process was carried out from January 2010 to July 2024 through four English databases (PubMed, Scopus, Web of Science, and Science Direct) and two Persian databases (Magiran and SID) as well as Google Scholar as a specialized search engine for the article. Meta-analysis analysis was performed using a random effects model. Prevalence estimates and 95% confidence intervals were calculated for each study. Heterogeneity was evaluated using the 12 statistic. Egger and Begg's test was also used to assess the publication bias.

Results: A total of 869 records were retrieved, resulting in 28 studies including 13,177 individuals of reproductive age included in the meta-analysis for T. gondii-specific IgG and/or IgM antibodies. The seroprevalence of IgG and IgM antibody serum in women is 29% (95% CI: 23% - 34%) and 4% (95% CI:3% - 5%) respectively. Egger's test results (P = 0.001) showed publication bias.

Conclusions: The prevalence of chronic (IgG) and acute infection (IgM) T. gondii in women of reproductive age in Iran is relatively high. Therefore, there is an urgent need for education to increase women's awareness.

Keywords: Toxoplasma, Seroprevalence, Meta-Analysis, Women

# 1. Context

Toxoplasma gondii remains a global concern, especially in developing countries. It is a zoonotic disease between humans and animals (1). The definitive host (feline) causes environmental pollution by releasing oocysts. High-risk groups, including pregnant women and immunocompromised people. Humans are infected with this parasite through the consumption of half-cooked meat, unpasteurized milk, direct or indirect contact with environmental oocysts, vertical

transmission during pregnancy, blood transfusion, and organ transplantation (2).

The global prevalence of *T. gondii* varies (1% - 100%) (3, 4) under the influence of climatic conditions, host susceptibility and soil humidity, health conditions, eating habits, and general awareness level. The prevalence of contamination in the Middle East is approximately 30% to 50% (5), 27.8 % in Saudi Arabia (1), and 58.3 % in Turkiye (6).

This parasite is very important in women of reproductive age because it can cross the placental barrier during pregnancy, this infection in the first and

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second trimester of pregnancy can cause consequences such as low birth weight, hydrocephalus, intracranial calcifications, and vertinochoroiditis in newborns (7). T Specifically, 15% of premature abortions and 66% of late miscarriages are attributed to infections, considering the importance of having children and the youth of the population, this issue is very important (1).

#### 2. Objectives

Considering the important role of *T. gondii* infection in neonatal complications as well as miscarriage (8), the present study was conducted to determine the serum prevalence of acute and chronic *T. gondii* infection in women of reproductive age in Iran.

#### 3. Methods

This study, a systematic review and meta-analysis across Iran, was designed and implemented to evaluate the prevalence of serum antibiotics in women of reproductive age. This meta-analysis study was conducted according to the guidelines and protocol of meta-analysis (PRISMA) (9), and its protocol was registered in PROSPERO.

## 3.1. Search Strategy

The systematic search process was carried out from January 2010 to July 2024 through four English databases (PubMed, Scopus, Web of Science, and Science Direct) and two Persian databases (Magiran and SID) as well as Google Scholar as a specialized search engine for the article. using the following keywords: ("Toxoplasma" OR "Toxoplasma gondii" OR "T. gondii" "toxoplasmosis") and ("prevalence" OR "seroprevalence" OR "epidemiology") and ("Reproductive age " OR " Women " OR "Students" OR, childbearing Age " "or "Newly Married") and ("Iran" or "Islamic Republic of Iran").

# 3.2. Eligibility Criteria, Study Selection, and Data Extraction

After collecting the documents and articles, their specifications and abstracts were entered into the reference writing software, and duplicates were removed by using this software as well as re-reading the titles. In the next step, by reviewing the titles and

abstracts, studies unrelated to the purpose of this research were excluded, and then from among the remaining studies, referring to the full text of the article, it was ensured that it was related to the purpose of the present study, and irrelevant items were removed. the reference list of specified studies was examined to find more related studies. In addition, to access the articles whose full text was not available through the databases, contact was made with the corresponding authors via e-mail to receive the full text of the articles. Inclusion criteria include: (1) Studies published in English or Farsi from January 2010 to July 2024; (2) all primary studies (cross-sectional-analytical and casecontrol) on the prevalence of T. gondii in women; (3) original articles with a full bibliography English and Farsi languages; (4) studies whose information (sample size and number of positive cases; (5) studies conducted only on humans.

# 3.3. Meta-Analysis

Meta-analysis analysis was performed using random effects model (10). The random effects model was used to estimate the prevalence and 95% confidence intervals. The weight of each study was calculated and the heterogeneity of studies was checked using Cochran's test (with a significance level less than 0.1) and its combination using the I2 statistic (with a significance level greater than 50%) (11). Egger and Begg's test was also used to evaluate the publication bias (12).

# 3.4. Quality Assessment

Study quality was assessed using the Newcastle-Ottawa scale (13).

# 4. Results

As shown in Figure 1, we identified 869 retrieved records in the database search, and after removing duplicates and irrelevant items, 28 studies were finally included in the meta-analysis (Figure 1). Table 1 shows the characteristics of the studies reported in the systematic review and meta-analysis.

The results of the study showed that the prevalence of IgG and IgM antibody serum in women is 0.29 (95% CI: 0.23 - 0.34) (Figure 2A) and 0.04 (95% CI: 0.03 - 0.05) respectively (Figure 2B). Egger's test results (P = 0.001)

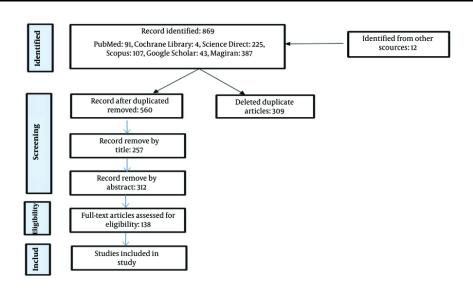


Figure 1. PRISMA graph of data retrieved from various databases based on inclusion and exclusion criteria

Salehi et al. (14)   2022   Mashbad   Reproductive age   ELISA   Cross-sectional   417   80	Study	Year	Place of Study	Group	Method	Type of Study	N	Positive IgG	Positive IgM
Elysa and Soulzi (16)   2023   Razavi Khorasan   Newly married   ELISA   Cross-sectional   85   16	Salehi et al. ( 14)	2022	Mashhad	Reproductive age	ELISA	Cross-sectional	417	80	8
Nabizadeh et al. (17)         2022         Tabriz         Reproductive age         ELISA         Cross-sectional         2726         722           Saki et al. (18)         2021         Khuzestan         Aborted         ELISA         Cross-sectional         480         123           Kalantari et al. (20)         2020         Fars         Students         ELISA         Cross-sectional         500         133           Kalantari et al. (20)         2020         Fars         Students         ELISA         Cross-sectional         504         58           Naeini et al. (21)         2019         Chaharmahla and Bakhtiari         -         ELISA         Cross-sectional         20         13           Matin et al. (22)         2018         Southwest of Iran         -         ELISA         Cross-sectional         253         139           Matin et al. (23)         2017         Ardabil         Aborted         ELISA         Cross-sectional         200         107           Sharif et al. (24)         2016         Mazandaran         Childbearing age         ELISA         Cross-sectional         117         18           Kamran et al. (25)         2016         Sabzevar         Students         ELISA         Cross-sectional         260	Zeinali et al. ( 15)	2023	Northwest of Iran	Aborted	ELISA	Cross-sectional	215	70	3
Saki et al. (18)   2021   Khuzestan   Aborted   EIISA   Cross-sectional   480   123	Elyasi and Souizi ( 16)	2023	Razavi Khorasan	Newly married	ELISA	Cross-sectional	85	16	
Rahimi-Esboel et al. (19)         2021         Mazandaran         Reproductive age         ELISA         Cross-sectional         500         133           Kalantari et al. (20)         2020         Fars         Students         ELISA         Cross-sectional         504         58           Nacini et al. (21)         2019         Chaharmahal and Bakhtiari         -         ELISA         Cross-sectional         20         13           Soltani et al. (22)         2018         Southwest of Iran         -         ELISA         Cross-sectional         253         139           Matin et al. (23)         2017         Ardabil         Aborted         ELISA         Cross-sectional         200         107           Sharif et al. (24)         2016         Mazandaran         Childbearing age         ELISA         Cross-sectional         1178         662           Iavalsoli Kareshket al. (25)         2016         Kerman         Childbearing age         ELISA         Cross-sectional         30         38           Mojadadi et al. (26)         2016         Kerman         Childbearing age         ELISA         Cross-sectional         30         55           Saki et al. (27)         2015         Alwaz         Aborted         ELISA         Cross-sectional	Nabizadeh et al. ( 17)	2022	Tabriz	Reproductive age	ELISA	Cross-sectional	2726	722	10
Students   Students	Saki et al. ( 18)	2021	Khuzestan	Aborted	ELISA	Cross-sectional	480	123	24
Naeini et al. (21) 2019 Chaharmahal and Bakhtiari - ELISA Cross-sectional 20 13  Soltani et al. (22) 2018 Southwest of Iran - ELISA Cross-sectional 233 139  Matain et al. (23) 2017 Ardabil Aborted ELISA Cross-sectional 200 107  Sharif et al. (24) 2016 Mazandaran ELISA Cross-sectional 200 107  Sharif et al. (24) 2016 Mazandaran ELISA Cross-sectional 1178 662  Ravakoli Kareshket al. (25) 2016 Kerman Childbearing age ELISA Cross-sectional 300 38  Mogladadi et al. (26) 2016 Sabzevar Students ELISA Cross-sectional 137 18  Kamran et al. (27) 2015 Illam High school girls ELISA Cross-sectional 130 34  Hooshyar et al. (28) 2015 Ahvaz Aborted ELISA Cross-sectional 130 34  Hooshyar et al. (29) 2015 Kashan - ELISA Cross-sectional 404 123  Davami et al. (30) 2014 Jahrom Newly married ELISA Cross-sectional 403 52  Rallai et al. (31) 2014 Ajabshir High school ELISA Cross-sectional 402 88  Ragail et al. (32) 2013 Northwest Iran childbearing women ELISA Cross-sectional 403 52  Maraghi et al. (33) 2013 Jahrom Young women ELISA Cross-sectional 403 52  Maraghi et al. (33) 2013 Abadan Students ELISA Cross-sectional 240 28  Maraghi et al. (31) 2014 Isfahan Childbearing age ELISA Cross-sectional 240 28  Maraghi et al. (31) 2011 Gonabad High school ELISA Cross-sectional 240 28  Mostafavi et al. (35) 2011 Gonabad High school ELISA Cross-sectional 240 34  Mostafavi et al. (35) 2011 Gonabad High school ELISA Cross-sectional 240 34  Mostafavi et al. (35) 2011 Gonabad High school ELISA Cross-sectional 240 34  Mostafavi et al. (35) 2011 Zahedan Before marriage ELISA Cross-sectional 300 109  Khaseni et al. (37) 2011 Zahedan Before marriage ELISA Cross-sectional 400 136	Rahimi-Esboei et al. (19)	2021	Mazandaran	Reproductive age	ELISA	Cross-sectional	500	133	21
Soltani et al. (22)   2018   Southwest of Iran   -   ELISA   Cross-sectional   253   139     Matine tal. (23)   2017   Ardabil   Aborted   ELISA   Cross-sectional   200   107     Soltari et al. (24)   2016   Mazandaran   ELISA   Cross-sectional   1178   662     Soltari et al. (24)   2016   Mazandaran   Childbearing age   ELISA   Cross-sectional   300   38     Mojadadi et al. (25)   2016   Sabzevar   Students   ELISA   Cross-sectional   307   18     Solta et al. (26)   2016   Sabzevar   Students   ELISA   Cross-sectional   260   55     Saki et al. (27)   2015   Ilam   High school girls   ELISA   Cross-sectional   260   55     Solta et al. (28)   2015   Ahvaz   Aborted   ELISA   Cross-sectional   301   34     Hooshyaret al. (29)   2015   Kashan   -   ELISA   Cross-sectional   434   123     Davami et al. (30)   2014   Jahrom   Newly married   ELISA   Cross-sectional   403   52     Ballah et al. (32)   2013   Northwest Iran   Childbearing women   ELISA   Cross-sectional   402   88     Baljai et al. (32)   2013   Northwest Iran   Childbearing women   ELISA   Cross-sectional   403   52     Davami et al. (30)   2013   Jahrom   Young women   ELISA   Cross-sectional   403   52     Mostafavi et al. (33)   2013   Abadan   Students   ELISA   Cross-sectional   403   52     Mostafavi et al. (35)   2011   Gonabad   High school   ELISA   Cross-sectional   240   28     Mostafavi et al. (35)   2011   Gonabad   High school   ELISA   Cross-sectional   240   34     Mostafavi et al. (36)   2011   Isfahan   ELISA   Cross-sectional   240   34     Mostafavi et al. (37)   2011   Zahedan   Before marriage   ELISA   Cross-sectional   400   136     Habberni and Sarael (38)   2010   Qazvin   Before marriage   ELISA   Cross-sectional   400   136     Habberni and Sarael (38)   2010   Qazvin   Before marriage   ELISA   Cross-sectional   400   136     Habberni and Sarael (38)   2010   Qazvin   Before marriage   ELISA   Cross-sectional   400   400   400   400   400   400   400   400   400   400   400   400   400   400   400   400   400   400	Kalantari et al. ( 20)	2020	Fars	Students	ELISA	Cross-sectional	504	58	5
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Tavakoli Kareshk et al. (25)   2016   Kerman   Childbearing age   ELISA   Cross-sectional   300   38	Matin et al. ( 23)	2017	Ardabil	Aborted	ELISA	Cross-sectional	200	107	10
Mojadadi et al. (26)   2016   Sabzevar   Students   ELISA   Cross-sectional   137   18	Sharif et al. ( 24)	2016	Mazandaran		ELISA	Cross-sectional	1178	662	
Kamran et al. (27) 2015 Illam High school girls ELISA Cross-sectional 260 55  Saki et al. (28) 2015 Ahvaz Aborted ELISA Cross-sectional 130 34  Hooshyar et al. (29) 2015 Kashan - ELISA Cross-sectional 434 123  Davami et al. (30) 2014 Jahrom Newly married ELISA Cross-sectional 403 52  Fallah et al. (31) 2014 Ajabshir High school ELISA Cross-sectional 402 88  Rajail et al. (32) 2013 Northwest Iran childbearing women ELISA Cross-sectional 403 52  Davami et al. (30) 2013 Jahrom Young women ELISA Cross-sectional 403 52  Maraghi et al. (33) 2013 Abadan Students ELISA Cross-sectional 403 52  Maraghi et al. (33) 2013 Abadan Students ELISA Cross-sectional 240 28  Maraghi et al. (31) 2012 Isfahan Childbearing age ELISA Cross-sectional 247 103  Heidari et al. (35) 2011 Gonabad High school ELISA Cross-sectional 240 34  Mostafavi et al. (35) 2011 Gonabad High school ELISA Cross-sectional 240 34  Mostafavi et al. (35) 2011 Jahhan EliSA Cross-sectional 240 34  Mostafavi et al. (36) 2011 Isfahan ELISA Cross-sectional 240 34  Mostafavi et al. (37) 2011 Zahedan Be fore marriage ELISA Cross-sectional 300 109  Khaseni and Sarael (38) 2010 Qazvin Be fore marriage ELISA Cross-sectional 400 136	Tavakoli Kareshk et al. ( 25)	2016	Kerman	Childbearing age	ELISA	Cross-sectional	300	38	6
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Hashemi and Saraei (38) 2010 Qazvin Before marriage ELISA Cross-sectional 400 136	Mostafavi et al. ( 36)	2011	Isfahan	-	ELISA	Cross-sectional	300	109	-
	Khazaei et al. ( 37)	2011	Zahedan	Before marriage	ELISA	Cross-sectional	280	-	15
	Hashemi and Saraei ( 38)	2010	Qazvin	Before marriage		Cross-sectional	400	136	-
Fouladvand et al. (39) 2010 Bushehr High school ELISA Cross-sectional 491 114	Fouladvand et al. ( 39)	2010	Bushehr	High school	ELISA	Cross-sectional	491	114	7
Fouladvand (40) 2010 Bushehr Before marriage ELISA Cross-sectional 303 71	Fouladvand ( 40)	2010	Bushehr	Before marriage	ELISA	Cross-sectional	303	71	10

showed publication bias. A funnel plot for detecting publication bias is shown in Figure 3.

## 5. Discussion

One of the important challenges of *T. gondii* infection is fetal and neonatal complications, and there is a need

for strategies to reduce this infection in women of reproductive age (41). Therefore, it is very important to investigate the contamination of women of reproductive age. Therefore, this current systematic review and meta-analysis was conducted to estimate the prevalence of *T. gondii* infection in women of reproductive age in Iran.

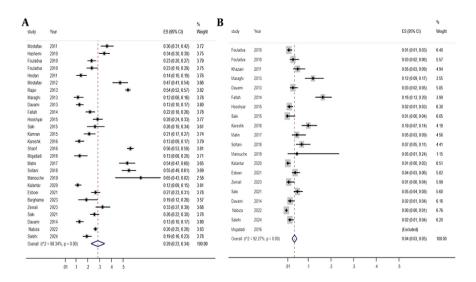


Figure 2. Forest plot of meta-analysis showing Toxoplasma gondii seroprevalence in women of reproductive age A, IgG; B, IgM.

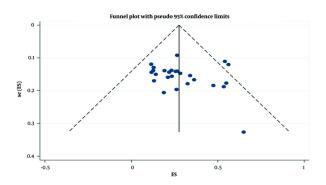


Figure 3. Funnel plot to detect publication bias

The present meta-analysis was performed using 28 published serological studies, with a sample size of 13,177 people. In this study, the serum prevalence of IgG T. gondii in reproductive age women is 29% (95% CI = 23% - 34%), which is consistent with the meta-analysis study conducted in Saudi Arabia 27.8% (95% CI = 20.6% - 36.3%) (1). But compared to other countries around Iran, Iraq 52.6% (1), Turkey 58.3% (6), and a study conducted in Iran by Mizani 43% between 1994 - 2017 (42), it is lower this could be due to increased awareness and preventive measures against this parasite.

The seroprevalence of IgM in this study was 4% (95% CI = 3% - 5%), which is higher than the meta-analysis study conducted in Turkey (1%) (6), blood donors in Iran (1.4%) (43). IgM indicates the acute form of *T. gondii* infection (instantaneous prevalence) in a way that it increases in the first week after exposure and then decreases (44) while IgG indicates a chronic infection (lifelong prevalence). What is important for preventing the problems and complications of *T. gondii* is the prevalence of the acute form of the disease.

Governments should seek to reduce its prevalence in women of childbearing age (45).

# 5.1. Strengths and Weaknesses

This study is the first meta-analysis that investigates the prevalence of acute and chronic *T. gondii* infection in women of reproductive age in Iran.

The most important limitations of this study: In this meta-analysis, the prevalence of *T. gondii* seroprevalence was only done in 18 provinces, and there were few studies in other provinces. Also, gray literature was not examined in this meta-analysis, the non-reporting of risk factors in many studies that did not allow meta-analysis of risk factors and the fact that in this study we only examined women of reproductive age and pregnant women were excluded from the study.

## 5.2. Suggestions

It is recommended that a comprehensive systematic review meta-analysis study be conducted in the entire Iranian general population to obtain a comprehensive estimate of the overall prevalence in the general population and to compare the prevalence rates in different population subgroups.

## 5.3. Conclusions

The results of this study showed that the prevalence of chronic (IgG) and acute infection (IgM) *T. gondii* in women of reproductive age in Iran is relatively high. However, considering the young population in Iran and the increased chance of fetal loss in pregnant women with the acute form of this infection, there is an urgent need for education about the complications of this infection, the ways of transmission and its prevention to increase women's awareness.

## Footnotes

**Authors' Contribution:** Study concept and design: L. K. and F. R.; Acquisition of data: M. S. M. and S. H.; Analysis and interpretation of data: M. S. M; Drafting of the manuscript: S. H.; Critical revision of the manuscript for important intellectual content: L. K., F. R., M. S. M., and S. H.; Statistical analysis: M. S. M.; Administrative,

technical, and material support: L. K.; Study supervision: L. K.

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