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PATHOGENICITY AND VIRULENCE

**The 7th lecture for 2nd-year students
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Resistance of biofilm towards toxic substances – revision

MICROBES IN THE BIOFILM FORM ARE ALWAYS MORE RESISTANT THAN IN THE PLANKTONIC FORM

- Higher resistance applies also to disinfectants and antibiotics
- Differences in sensitivity sometimes amount up to 3 orders
- General mechanism of the higher resistance is not known
- In each microbe-antimicrobial combination the mechanism can be different

Possible causes of higher resistance of biofilm – revision

1. **More difficult penetration of toxic matter through the biofilm**
2. **Character of environment in the biofilm is altered**
3. **Also the microbial population in the biofilm is altered**

Biofilm and disease 1 – revision

Biofilm takes part in the pathogenesis of

1. chronic infections in general
2. infections of implanted devices

- the progress of these infections is slow
- they are without distinctive symptoms
- acute exacerbations occur occasionally
- the effect of antibiotic therapy is transitory only
- after stopping antibiotics infections recur (even if bacteria grown from them appear sensitive *in vitro*)

Biofilm and disease 2 – revision

Chronic infections of natural bodily surfaces

dental caries (oral streptococci, mainly *Streptococcus mutans*)

periodontitis (Gram-negative oral anaerobes)

otitis media (*Haemophilus influenzae*)

osteomyelitis (*Staphylococcus aureus*)

cholecystitis and cholangitis (enterobacteria)

prostatitis (*Escherichia coli*)

subacute bacterial endocarditis (oral streptococci)

pneumonia in cystic fibrosis (*Pseudomonas aeruginosa*)

Biofilm and disease 3 – revision

Chronic infections of artificial surfaces

central venous catheters (coagul. neg. staphylococci, candidae)

prosthetic heart valves (*Staph. aureus*, *Staph. epidermidis*)

joint prostheses (*Staphylococcus aureus*, *Staph. epidermidis*)

surgical sutures (*Staphylococcus aureus*, *Staph. epidermidis*)

vascular grafts (Gram-positive cocci)

endotracheal tubes (various bacteria and yeasts)

intrauterine contraceptive devices (*Actinomyces israelii*)

urinary catheters (*E. coli* or others, mainly Gram-negative rods)

contact lenses (*Pseudomonas aeruginosa*, Gram-positive cocci)

Pathogenicity

Pathogenicity = ability of a microbe to be harmful to health and to cause disease

Infectiousness = ability to cause infection

Infection – broader term than disease

In the disease the symptoms of disease are present (the infection is manifest)

But the infection may proceed **without symptoms** (inapparent infection)

Apart from infections microbes can cause food **poisoning**, as well

Ecological remark

Ecology = science on mutual relations among organisms and relations between organisms and their environment

Symbiosis = close association of two different organisms

Three forms of symbiosis:

Mutualism – both partners benefit from the association and are unable to survive without it

Commensalism – the association is beneficial for one partner and indifferent to the other

Parasitism – the association benefits one partner and harms the other (the host)

→ consequence = pathogenicity

Infection

The definition of infection is not easy

- **Infection** = situation when the **etiological agent of infection invades an organism and multiplies in it**; or it settles on bodily surfaces and acts adversely there
- **Colonization** = settlement of bodily surface by a **nonpathogenic** microbe (or by a pathogen that does not cause pathological symptoms there)

History of infectious diseases – I

Leviticus (3rd book of Moses) – ban of pork

Quarantine (= 40 days) – plague

Fracastoro (1485-1553): „De contagione“

1676 van Leeuwenhoek – observed bacteria

1838 Schönlein – mould in hair during favus

1850 Davaine – bacteria in sheep with anthrax

1857 Pasteur – microbes → spoil wine and beer

1865 Villemin – microscopically: bacteria in TBC

1869 Pasteur – parasites in silkworm

1876 Lister – antiseptics

1876 Robert Koch and Louis Pasteur – anthrax

History of infectious diseases – II

Physiological thesis of Hippocrates:

The disease (incl. the infectious one) =
consequence of certain inadequacy of organism

Microbial antithesis of Pasteur and Koch:

The cause of the infectious disease is a microbe

Ecological synthesis:

= synthesis of physiological thesis and microbial antithesis – for the occurrence of the infectious disease 1. the microbe, 2. the host and 3. their environment are responsible

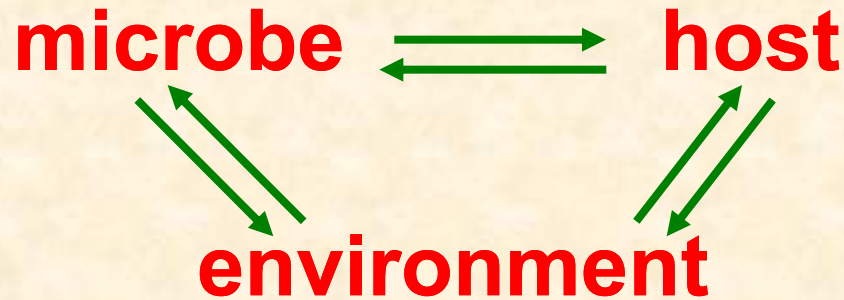
Koch's postulates

A particular microbe is the etiological agent, if

1. it is present in every case of the disease and its localization in the body corresponds to the damages observed;
2. it is isolated from the host and kept in pure culture for several generations;
3. by means of the microbe grown in this way it is possible to imitate the disease in another host;
4. it is again isolated from the experimentally infected host.

Relationship between the microbe and the host

The relationship is dynamic and influenced
by the environment:



Illness is not a rule – peaceful coexistence is
usually better for the parasite

In spite of that the host tries to get rid of the
parasite – to destroy, remove or at least
to localize it

Pathogenicity

Pathogenicity = the ability to cause a disease

It depends on both microbial and host species

Particular microbial species is pathogenic for a specific host species only, for another species it may be non-pathogenic

This host species is susceptible to the relevant microbial species, to a different microbial species it can be resistant

Primary and opportune pathogens

Primary (obligate) pathogens → cause disease even in otherwise healthy individuals = chiefly agents of classical infections (diphtheria, typhoid fever, plague, gonorrhoea, tetanus, influenza, morbilli etc.)

Opportunistic (facultative) pathogens → cause disease under certain conditions or at a certain disposition only = usually members of normal flora

- when they reach another site in the body
- or when the immunity of the individual is lowered

Natural and experimental pathogenicity – examples

Microbes naturally pathogenic for man & animals:

Staph. aureus, Francisella tularensis, Clostridium botulinum, rabies v., tick-borne encephalitis v.

Microbes pathogenic for animals experimentally:

Bacillus anthracis, Streptococcus pneumoniae, Clostridium tetani – mouse

Mycobact. tuberculosis, rickettsiae – guinea pig

Treponema pallidum, herpes simplex v. – rabbit

Microbes pathogenic for man only:

Neisseria gonorrhoeae, Haemophilus ducreyi

Microbes non-pathogenic for man:

Majority of soil and water microorganisms

Opportunistic pathogens – I

Typical opportunistic pathogen:

Escherichia coli

A part of normal colonic flora (but <1 % only)

Outside the large intestine = pathogen

- cystitis, pyelonephritis, urosepsis
- cholecystitis, peritonitis
- wound infections

At lowered immunity (newborns):

- meningitis
- diarrhea (EPEC – serotypes O55, O111)

Opportunistic pathogens – II

Another opportunistic pathogen:

Staphylococcus epidermidis

Part of normal skin and mucosal flora

Outside the skin and mucosae = pathogen

- wound infections (also surgical: sternum, eye)
- cystitis

At lowered immunity:

- above all blood stream infections in individuals with i.v. catheters, infections of implants and other devices
- sepsis in newborns and neutropenic individuals

Virulence

Virulence = degree (measure) of pathogenicity

Virulence = property of certain strain of the microbe
– a pathogenic species can incorporate **highly virulent strains** as well as almost **avirulent** ones

Indicator of strain virulence: ability to kill

LD₅₀ = 50% lethal dose (the amount of microbe that is able to kill exactly ½ of experimental animals)

Increasing virulence: repeated passages of the strain (be cautious with the strains from dissection material)

Attenuation = artificial **weakening of virulence (attenuated strains serve for the preparation of vaccines)**

Attenuation – an example

BCG-vaccine against TBC (bacille Calmette-Guérin)

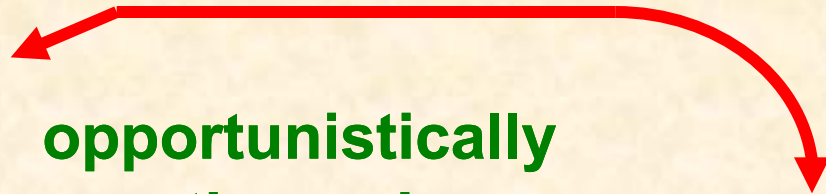
Original strain – *Mycobacterium bovis* – is less pathogenic for man than *Mycob. tuberculosis*

The selected strain was „tormented“ 12 years on potato with bile until it lost most of its virulence (it is almost avirulent)

In a normal newborn BCG causes only a local process in the site of injection or in a regional lymph node

Very rarely in an immunodeficient newborn it can cause the generalized infection

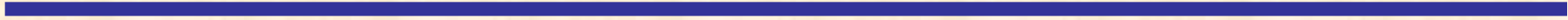
MICROBE



Species: obligately pathogenic ↔ opportunistically pathogenic ↔ non-pathogenic



Strain: virulent ↔ avirulent



Individual: sensitive ↔ nonspecifically unresponsive or specifically immune



Species: susceptible ↔ resistant



HOST

Recommended reading material

Paul de Kruif: Microbe Hunters

Paul de Kruif: Men against Death

Axel Munthe: The Story of San Michele

Sinclair Lewis: Arrowsmith

André Maurois: La vie de Sir Alexander Fleming

Hans Zinsser: Rats, Lice, and History

Michael Crichton: Andromeda Strain

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Thank you for your attention