#### Institute for microbiology shows

#### **TRACING THE CRIMINAL**





### From anthem of medical students "Diabetes mellitus, icterus et vomitus"

(Second part) Treponema pallidum 🗲 Gonococcus ruber < Ulcus molle, ulcus durum Molle est reparaturum Nos curabit ... (name of a suitable urologist of

dermatovenerologist)

Old name of causative agent of gonorrhoea (*N. gonorrhoeae*)

Causes syfilis

Chancroid – caused by Haemophilus ducreyi



Chancre – one of typical symptomas of syphilis

www.med.sc.edu

(Melody of *Gaudeamus igitur, iuvenes dum sumus*)

### Survey of topics

- Clinical characteristics of spiral bacteria
- Microbiological characteristics & dg. of spirochets
- Pictures of spiral bacteria



# characteristics ofspiral bacteria

### Story one

Roseanne Pinkspot started to have pink spots on her body. She thought, that probably... Oh yes, several weeks ago whe participated on a girl scout camp and several times during the camp she had a tick. Her GP sent her to children infection clinic, and experienced infectionist confirmed, that most likelly it is the disease that Roseanne supposed. For sure, she took serum for antibody detection...



### **Erythema migrans**

### This is a picture of Erythema migrans of student M. M., who kindly agreed to let it for use in education



# The causative agent was



- Borrelia afzelii, one of borreliae, causing Lyme disease and belonging to the group Borrelia burgdorgeri sensu lato (= "broad sense of meaning")
- This species "in broad sense" is divided into several species "in narrower sense". The most important are *B. garinii*, *B. afzelii* and *B. burgdorferi* sensu stricto
- While in the USA mostly the third of them is common and joint symptomatology is common, in Europe two first borreliae are more common, and the typical disease is neuroborreliosis
- Besides lyme diseases there exist other species causing recurrent fever (*B. duttoni*, *B. recurrentis*)



Story two (virtual, but basis is from a real story)

- When Phyllis found, that she really needs pervitin, and more and more, she decided to earn money by her own body.
- When the client paid more, she went with him without a preservative, she used anticonception and she felt more OK
- Then she fell in love and decided to have a child. She stopped the anticonception and was happy. Helmut will be a good father...

### Story two – continuing

- So Phyllis was pregnant. But she found heerself a genital ulcus and her gynekologist took blood for serological examination. It was positive. Phyllis did not want interruption, it was too late and she wanted her child.
- Phyllis was treated, but the antibiotic was wrong. The child was born ill and after two weeks it died because of a secondary Klebsiella septicaemia

www.primer.ru

### The criminal was



Treponema pallidum, causing syfilis

- Syfilis is a classic sexual disease. It is transmitted sexually only. But it is a systemic disease – in developped stages the whole body is affected (gummata, aortal dissection, neurolues, psychical symptomas)
- Some subspecies of *T. pallidum* and some other treponemas cause other diseases (framboesia yaws, *T. pertenue*)
- Some treponemas are non-pathogenous

### **Course of syphilis**

PRIMARY

Systemic dissemination

SECONDARY

Latency 1-30 yr

TERTIARY

Chancre (male or female genitalia)

Lymphadenopathy Rash: palms, soles

Paralytic dementia Aortic aneurysm Aortic insufficiency Tabes dorsalis Gummas (widespread)

primary syphilis ("chancre")



uhavax.hartford.edu (2×)

Course of syphilis

secondary syphilis

www.geocities.com

### Tertiary syphilis





www.nlm.nih.gov



www.common-place.org







SYPHILIS

### Yaws (framboesia)

www.med.sc.edu

Kidney with the corresponding disease

Story three



www.med.sc.edu

### Mr. Ratter was an employee of NWPS Ltd. (Nowhere Water Pipes and Sewage) His job was sewage cleaning. He knew all sewage corridors. He also knew rat habits, he liked rats and he understood them.

 Nevertheless, once there was some misunderstanding between him and the leader of rat group and Mr. Ratter was bitten to his leg.
Some time after this, Mr. Ratter was

hospitalized with icterus and bleeding...

### This is not Mr. Ratter, but his Venezuelan colleague with a similar

fate...



http://www.ceniap.gov.ve

### The disease is caused by...



- Leptospira interrogans ser. Icterohemorrhagiae
- Formerly individual serovars of Leptospira were considered to be individual species, now all pathogenic ones are taken as a part of species *Leptospira interrogans* (second species *Leptospira biflexa* is non-pathogenic)
- Symptomatology varies, from "flu-typhoid" symptomas of serovar Grippotyphosa (field fever, canefield fever) to jaundice and bleeding (Weil disease, as in mr. Ratter) in serovar Ictero-hemorragiae.
- (At least these two serovars are quite simple for remembering, try to remeber at least them ③)

# Microbiologic characteristics and diagnostics of spirochets

www.wadsworth.org

### Spirochets



- Borreliae (but also treponemas and leptospiras) are spirochets, i. e. spiral bacteria.
- Their cell wall is close to a gram-negative one, but they do not Gram stain mostly because they are very thin. So we microscopy them only using dark-field or fluorescence microscopy, or imunofluorescence (#fluorescence)
- Spirochets commonly are not culturable (some of them can be cultured experimentally, but it has no practical meaning)

### Treponema: direct methods

- Direct diagnostics is rare, also because often there is hardly something to take. Only patients with chancre are available fot scrapping.
- Microscopy: It is possible to use wet mount dark field. It is strange, that although is is a wet mount, immersion is used (treponemas are very subtle).
  Besides that, fluorescence staining can be used
- Neither culture nor biochemical methods are used
- Antigen detection can be performed by direct IMF
- Animal experiment: There exist so named RIT Rabbit infectivity test
- PCR diagnostics is more and more important





### **Direct diagnostics of syphilis**

- RIT Rabbit infectivity test. For ethical reasons, but also as it is too much work, the RIT is minimized today.
- Dark field shining *Treponema pallidum* is s observed againts the dark field
- Direct IMF another direct, but difficult method

### New Zealand Rabbit used for RIT



### Dark field microscopy

www.medmicro.info

4B) T.pallidum - zástin

Only rays flexed at the preparation come to the observer's eye. Therefore, the observer's eye can see dark field with shining object(s)

Preparation

rays

### Immunofluorescence

www.medmicro.info

4c) T.pallidum, zv.400x

### Treponema: indirect methods

- We use non-treponema tests, where cardiolipin from bovine hearths acts as an antigen, and treponema tests, where we have a real antigen from *Treponema pallidum*
- Diagnostics is composed of screening and confirmation. We confirm everything that was positive or at least borderline at screening, in reasonable cases even negative results.
- Screening usually consists of a nontreponema and a treponema test
- Confirmation is performed by highly specific treponema tests

# The most important indirect testsfor luesTPHA – Tr. pasive hemaglutination testTPPA – dtto, RBV replaced by polycelulose

Historical	BWR – Bordet Wassermann	Nor
Screening	RRR – Rapid Reagin Test	htr.
	TPHA/TPPA*	Tre
Confirmatory	ELISA	ponema
	FTA-ABS (indir. imunofluor.)	
	Western Blotting	
Historical, or superconfirmation	TPIT (Treponema Pallidum Imobilisation Test) = Nelson	

### **RRR** and **TPHA**

In RRR, the well with turbidity is positive (it looks like the positive control). It is necessary shake the panel, otherwise the reaction would not be visible!

TPHA is an agglutination on carrier (RBC).
A "potato shaped formation" is positive, a dense dot is negative

#### TPHA – to remember



Positive – agglutinate formed, viewed from up as clot of irregular shape

Negative – RBC (polycelulose particles in TPPA) fall to bottom forming a regular dense dot viewed from up



## RRR – reading: turbidity = positive, no turbidity = negative

TPHA – reading:

www.medmicro.info



### Indications for confirmation

Screening reactions are performed allways, when somebody is to be tested for syphilis (including e. g. pregnant women that are not at all supposed to be positive). Screening reactions are performed only qualitatively or semiquantitatively

#### Indication for confirmation is:

- any positive or at least borderlinde result in RRR and/or TPHA reaction
- presence of suspicious lesions on body, or anamnesis of risky sexual intercourse – here even in case of negativity of both reactions

### ELISA, Western blotting and PCR in spirochetal diagnostics

- ELISA, Western blotting and PCR all of them are used in spirochets simillarly as in other cases – see J10 and J11 topics in spring term.
- Positive are patients with values of absorbance higher than a given value (calibration well, cut off etc.)
- Examination of IgG and IgM antibodies is important, mere IgG positivity is just a proof of a previous infection.
- PCR is used in diagnostics of syphilis and Lyme disease. It is usually positive sooner than methods detecting antibodies.

## Borrelia and leptospira – course of investigation

- Borrelia: Mostly serology, event. PCR. In serology, IgM (typical fot an early infection) and IgG antibodies are detected using ELISA method, positive finding is confirmed by Western blotting. Western blotting is more specific.
- Leptospira: Dark field microscopy and culture in special medium are used



www.medmicro.info

### Leptospiral diagnostics

 Microscopy of leptospira

#### 7)LEPTOSPIRY

#### More diagnostic opportunities in leptospira (latex agglutination) 4× www.thailabonline.com



# Pictures of spiral bacteria

### Galery of criminals Borrelia burgdorferi

http://www.presse.uni-wuppertal.de

gemi.mpl.ird.fr

ASM Digital Image Depection Fieldor

### Borrelia recurrentis

uhavax.hartford.edu

### *Treponema pallidum*

### Trepone. pallidum



### Leptospira interrogans



www.pbrc.hawaii.edu

### Leptospira interrogans

#### (various serotypes)





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### Leptospira interrogans



### Leptospira in the electronoptic microscope

www.med.sc.edu







Jody Rasch: Leptospira 60" x 70" – acrylic on canvas