# Vibrio

- Gram negative, rigid, curved rods
- Actively motile by polar flagella
- Vibratory motility(vibrae, to vibrate)
- Positive oxidase reaction
- Present in marine environment & surface water

- Similarities to Enterobacteriaceae
  - Gram-negative
  - Facultative anaerobes
  - Fermentative bacilli
- Differences from Enterobacteriaceae
  - Polar flagella
  - Oxidase positive
- > classified under family of Vibrionaceae
  - Primarily found in water sources
  - Cause gastrointestinal disease

# Vibrio cholerae

• 1<sup>st</sup> isolated by Koch(1883) from cholera patients in Egypt.

Morphology: gram negative short,

curved, cylindrical rod,

about 1.5 x 0.2-0.4μm

Typical comma shaped

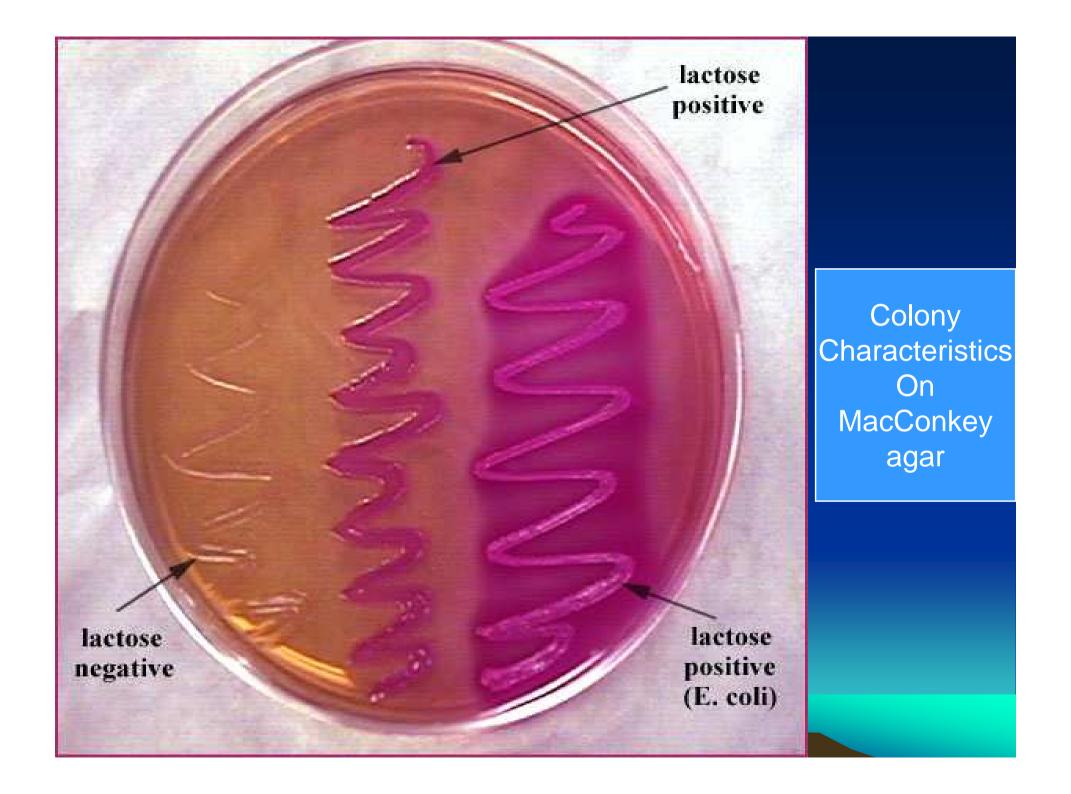


- S shaped or spiral forms may be seen
- Pleomorphism is frequent in old culture
- Darting motility
- In stained film of mucous flakes they are seen arranged in parallel rows, described by Koch's as the fish in stream.

# Culture Character

- Aerobic & facultative anaerobes.
- Grow well in ordinary media with a wide range of temperature.
- Grow best in strongly alkaline media
- On NA colonies are moist, translucent, round disk,1-2 mm in diameter with a bluish tinge in transmitted light.

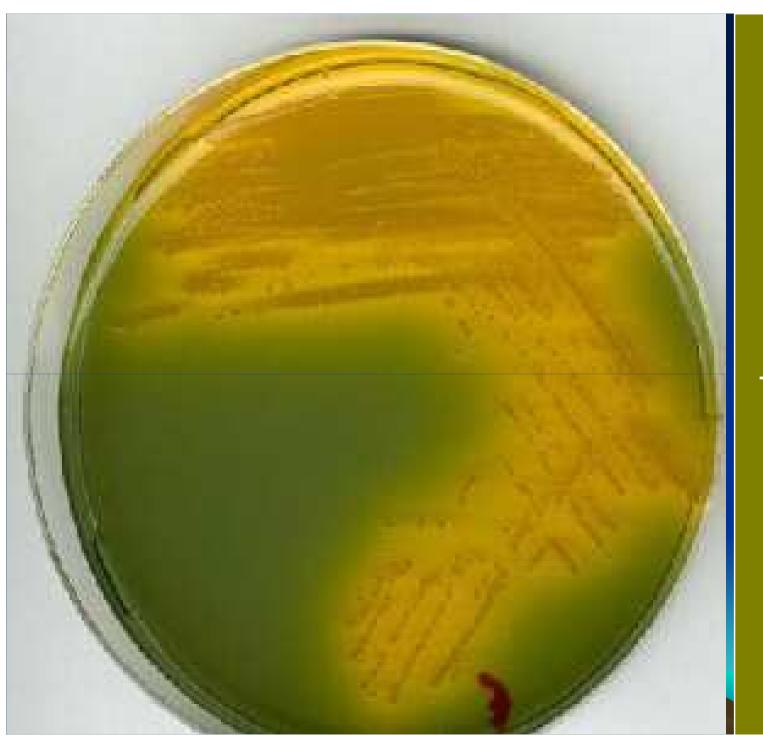
- On MacConkey agar colonies are pale, on prolonged incubation turn into pink.
- On BA greenish discoloration, later become clear due to heamodigestion.
- Special media: Transport media, Enrichment media, plating media
- Holding or transport media: 1)
   Venkatraman-Ramkrishnan medium:



- Contains 20gm common salt,5gms peptone & 1000cc water,PH 8.6 to 8.8.
- It preserves V.cholerae & prevent the overgrowth.
- 2) Cary Blair medium: buffered solution of Nacl, sodium thioglycollate, disodium phosphate & Calcium chloride at PH 8.4.

- Enrichment media :
- Alkaline peptone water at PH 8.6
- Monsur's taurocholate tellurite peptone water,PH 9.2.
- Both are good transport as well as enrichment media.

- Plating media :
- 1) Alkaline bile salt agar (BSA) PH 8.2: modified nutrient agar medium containing 0.5% sodium taurocholate.colonies are similar to those on NA.
- 2)TCBS medium : contains thiosulphate, citrate, bile salts & sucrose.
- Available commercially & at present very widely used. Cholera vibrio produce large yellow convex colonies which becomes green on continued incubation.



YELLOW
COLONY
ON
TCBS AGAR
OF
V.Cholerae

# String test:

- A loopful of the growth is mixed with a drop of 0.5% sodium deoxycholate in saline.
- If the test is positive, the suspension loses its turbidity, becomes mucoid & forms a string when the loop is drawn away from the suspension.

#### **Biochemical reaction:**

- Cholera vibrios <u>ferment</u> glucose, mannitol, sucrose, maltose & mannose with production of acid without gas.
- Do not ferment inositol, arabinose, late lactose fermenter, Urease & MR –ve.
- Catalase & oxidase +ve.
- Indole +ve, reduces nitrate to nitrites.

- Cholera red reaction :when a few drops of sulphuric acid is added to 24hour peptone water culture, reddish color is developed due to the formation of nitrosoindole.
- VP test: +ve in EL Tor vibrio but negative in classical cholera vibrio.
- Hemolytic reaction: El Tor is hemolytic, classical is nonhemolytic

# Resistance

- Susceptible to heat, drying & acids.
- Destroyed at 55° C in 15 minutes.
- El Tor vibrio survives longer than the classical cholera vibrio.
- Susceptible to the common disinfectants.
- Killed in a few minutes in gastric juice of normal acidity.

# Classification

 Heiberg classified vibrios into six groups based on the fermentation of mannose, sucrose & arabinose.

Two more groups were added later.

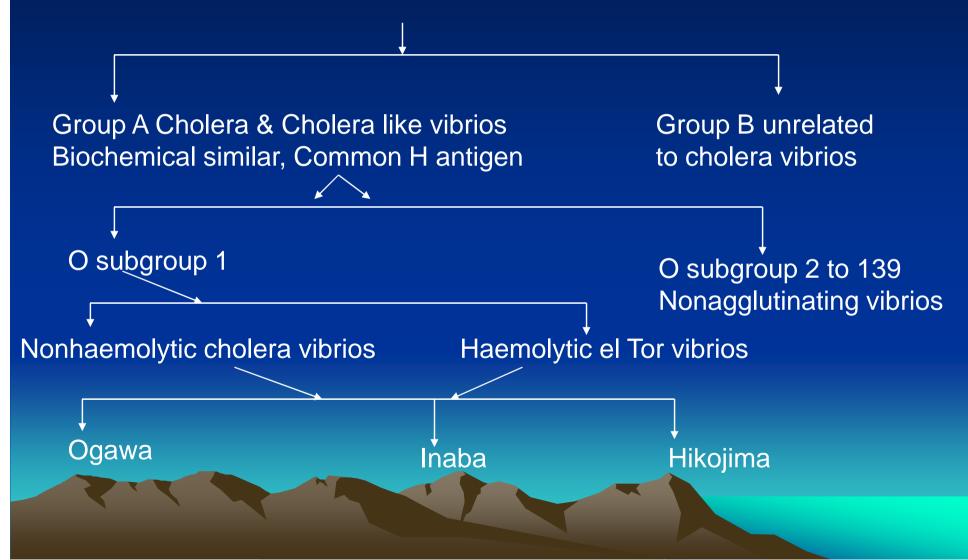
Cholera vibrios belong to Group 1.

# Classification

- Gardner & Venkataraman classified vibrios antigenically, divided into two group
- Group A consisting of cholera vibrios & Biochemically similar vibrios possessing a common H antigen.
- Group B: heterogeneous collection of vibrios distinct from Group A biochemical & antigenically.

- Group A vibrios were divided into subgroups,139 subgroup based on the O antigen.( O serogroup), all sharing the common H antigen.
- All isolates from epidemic cholera( agglutinable vibrios) belonged to serogroup O -1.
- Nonagglutinable vibrios are not agglutinated by O -1antiserum.

# Antigenic classification of vibrios vibrio



- V cholerae O1: both classical & El Tor cholera biotypes, antigenically indistinguishable.
- On the basis of minor differences in O antigen V.cholerae O1 subdivided into 3 subtypes-Ogawa, Inaba, Hikojima.
- El tor vibrio: Gotschlich isolated a vibrio from six Haj pilgrims at the El Tor quarantine station on the Sinai Peninsula in Arabia who had died of dysentery or gangrene of the colon.
- El tor vibrio differentiate with classical vibrio with biochemical reaction.

# Difference b/w classical & el Tor vibrio

| Test                            | Classical | El Tor |
|---------------------------------|-----------|--------|
| Haemolysis                      | -         | +      |
| Voges- proskauer                | -         | +      |
| Chick erythrocyte agglutination | -         | +      |
| Polymyxin B sensitivity         | +         | -      |
| Group IV phage susceptibility   | +         | -      |

- Non O1 vibrios appear to survive & multiply better than the V.cholerae O1 in a wide range of food, food borne outbreak are common with these organisms.
- V.cholerae O139: a new serogroup reported in Oct 1992 during epidemic in Madras, producing epidemic of cholera.

- Bacteriophage typing: Phase typing schemes have been standardized for classical & El Tor vibrio as well as O – 139 vibrios.
- Classical strain of V cholerae classified into 5 types by using Mukherjee's phages.4<sup>th</sup> phage lysed all the classical & non of the El Tor Strain.
- 5<sup>th</sup> phage was introduced later By Basu & Mukherjee which lysed all El Tor but no classical strain.

# Phage type of classical V.Cholerae

| Phage type of organism |   |   |   |   |
|------------------------|---|---|---|---|
|                        | 1 | 2 | 3 | 4 |
| 1                      | + | + | + | + |
| 2                      | - | + | + | + |
| 3                      | + | - | + | + |
| 4                      | - | - | + | + |
| 5                      | + | + | - | + |

# Phage type of El Tor vibrios

| Phage type of organisms |   | Sensitivity to phage group |   |   |   |
|-------------------------|---|----------------------------|---|---|---|
|                         | 1 | 2                          | 3 | 4 | 5 |
| 1                       | + | +                          | + | + | + |
| 2                       | + | +                          | + | - | + |
| 3                       | + | +                          | - | + | + |
| 4                       | + | +                          | - | - | + |
| 5                       | + | -                          | - | - | + |
| 6                       |   | +                          | _ | - | + |

# Pathogenesis

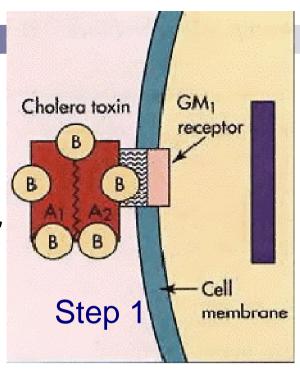
- Faeces & vomitus of human cases or carriers are the main source of infection.
- Human infection occurs by ingestion of contaminated water or food.
- Adherence & colonization : attachment to epithelium of microvilli at the brush border& multiply.
- Secretion of cholera toxin :

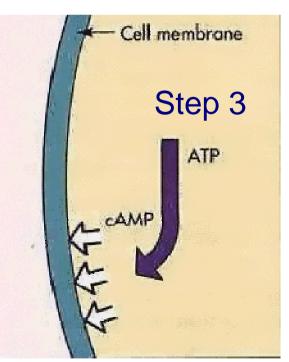
# Mechanism of Action of Cholera Toxin

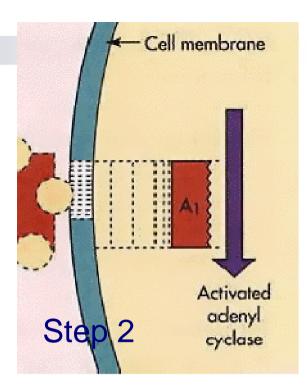
NOTE: In step #4, uptake of Na+ and Cl- from the lumen is also blocked. HCO3- = bicarbonate which

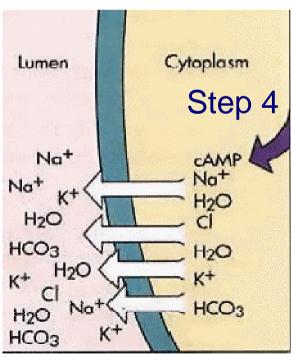
provides buffering

capacity

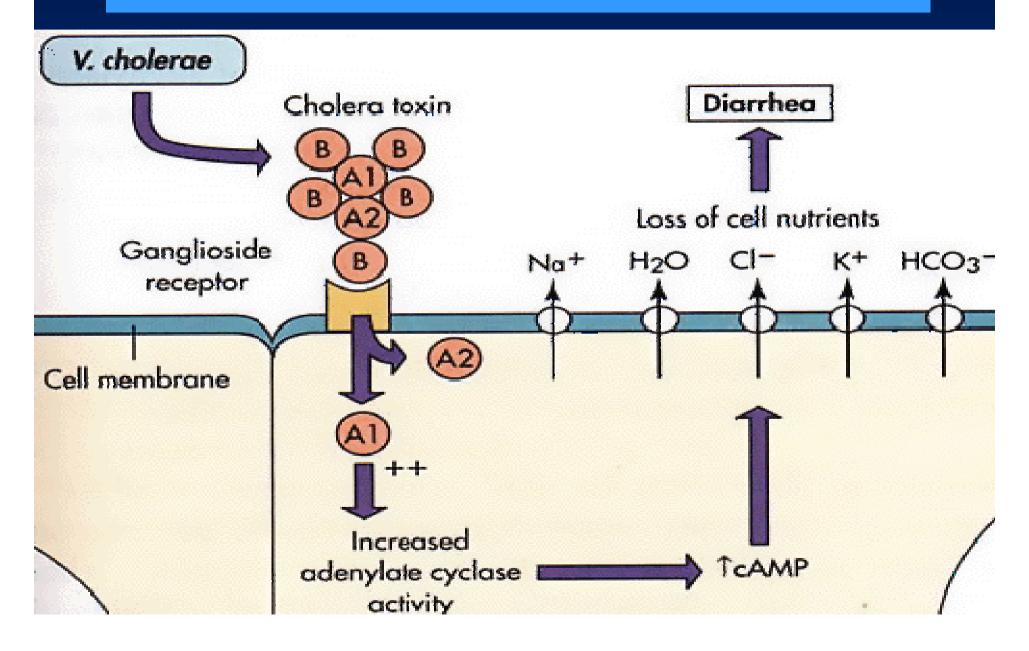








#### Mechanism of action of cholera toxin



| Virulence Factor                              | Biologic Effect  |
|---|--|
| Cholera toxin                                 | Hypersecretion of electrolytes and water                           |
| Coregulated pilus                             | Adherence to mucosal cells   |
| Accessory coloni-<br>zation                   | Adhesin factor   |
| Hemagglutination-<br>protease (muci-<br>nase) | Induces intestinal inflammation and degradation of tight junctions |
| Siderophores                                  | Iron sequestration   |
| Neuraminidase                                 | Increase toxin receptors   |

- Clinical syndrome: cholera is an acute diarrhoeal disease caused by V.cholerae.
- Severity of the disease of V cholerae 01 ranges from asymptomatic or inapparent to the most severe form.
- Symptoms results from the action of cholera toxin.
- Clinical features include vomiting, profuse rice water stools, followed by rapid dehydration & hypovolaemic shock.

# Epidemiology

- Can occur as sporadic,endemic,epidemic or pandemic.
- Man is the only natural host of cholera vibrio.
- Faecal oral transmission principally water borne.

#### 7th pandemic:

- V. cholerae O1 biotype El Tor
- Began in Asia in 1961
- Spread to other continents in 1970s and 1980s
- Spread to Peru in 1991 and then to most of South & Central America and to U.S. & Canada
- By 1995 in the Americas, >106 cases; 104 dead

#### – 8th pandemic (??)

- V. cholerae O139 Bengal is first non-O1 strain capable of causing epidemic cholera
- Began in India in 1992 and spread to Asia, Europe and U.S.
- Disease in humans previously infected with O1 strain, thus no cross-protective immunity

# Laboratory Diagnosis

- Specimens: watery stool & mucous flakes from stool, rectal swab from contact or carriers
- Transport media: V R medium, Alkaline peptone water, Cary Blair medium.
- Microscopy: rapid Diagnosis by direct fluorescent antibody staining of smears from liquid stool, by demonstrating darting motility

- Culture :stool sample is directly plated to one or more selective media.
- Specimen enriched in enrichment media & then inoculated into plating media.
- TCBS: yellow sucrose fermenting colony,
- Identification by biochemical test
- Agglutination test: colonies are tested with V cholerae 01 antiserum. then with monospecific Ogawa & Inaba.
- NICED :National Institute of Cholera & Enteric Disease at Kolkatta.

- Serological tests: little use in the diagnosis of cholera, use in assessing the incidence of endemic foci.
- Detection of carriers: repeated stool culture is necessary as the vibrio is excreted intermittently.
- Gives better result after administration of a purgative or bile after duodenal intubation
- Serological test is useful in detecting chronic carriers.

# Prophylaxis

General measures: purification of water & better provision for sanitary methods

#### Specific measures:

- Killed vaccines: classic killed parenteral vaccine contains 80million V.cholerae/ml with equal number of Inaba & Ogawa strain. Immunity is short lived.
- Nonliving oral vaccine :contain oral cholera toxin B subunit, classical V.cholera : Ogawa& Inaba,El Tor vibrio :Ogawa &Inaba,gives overall protection of about 80% of vaccinated persons for 2 years.

- Live oral vaccine:
- Recombinant DNA vaccine with expression of V.Cholerae 01 in attenuated strain of S Typhi Ty21a.
- Ty21 act as a carrier, it does not cause significant side effects.
- Colonises Peyer's patches & induces IgA response by local immune system.

#### **Treatment:**

- Replacement therapy
- Antibiotics

#### Vibrio mimicus:

- Resembles cholera vibrio in biochemical features, sucrose negative.
- Responsible for many sporadic cases of diarrhoeal disease on the Gulf coast of the USA.
- Self limited disease, acquired from eating seafood especially oysters.

# Halophilic Vibrios

- Vibrios that have a high requirement of sodium chloride.
- Natural habitat is sea water & marine life
- V.parahaemolyticus, V.alginolyticus & V.vulificus.
- Vibrio parahaemolyticus: It is an enteropathogenic vibrio 1<sup>st</sup> isolated in Japan in 1951 that causes food poisoning characterized by diarrhea.

- Morphologically resembles cholera vibrios except that it is capsulated, shows bipolar staining.
- Grows only in media containing NaCl.
- ON TCBS the colonies are green raised centre & Flat translucent periphery. The string test is positive.
- Oxidase, catalase, nitrate, indole, citrate positive.

#### **Determinants of Pathogenicity:**

- Kanagawa phenomenon :
- Strain from human patient are almost always hemolytic due to heat stable hemolysin.
- V.parahaemolyticus causes food poisoning associated with marine food.

- Diarrhea is self limiting.
- Cases are common in summer.& in adults than in children.

#### **Vibrio Alginolyticus:**

- Resembles V.parahaemolyticus,formerly considered a biotype of it.
- Ferments sucrose, has been associated with infection of eyes, ears & wounds in human beings exposed to sea water.

#### V. vulnificus:

- VP negative, ferments lactose but not sucrose.
- It produces wound infection.
- It also produces septicemia in compromised hosts particularly those with liver disease.