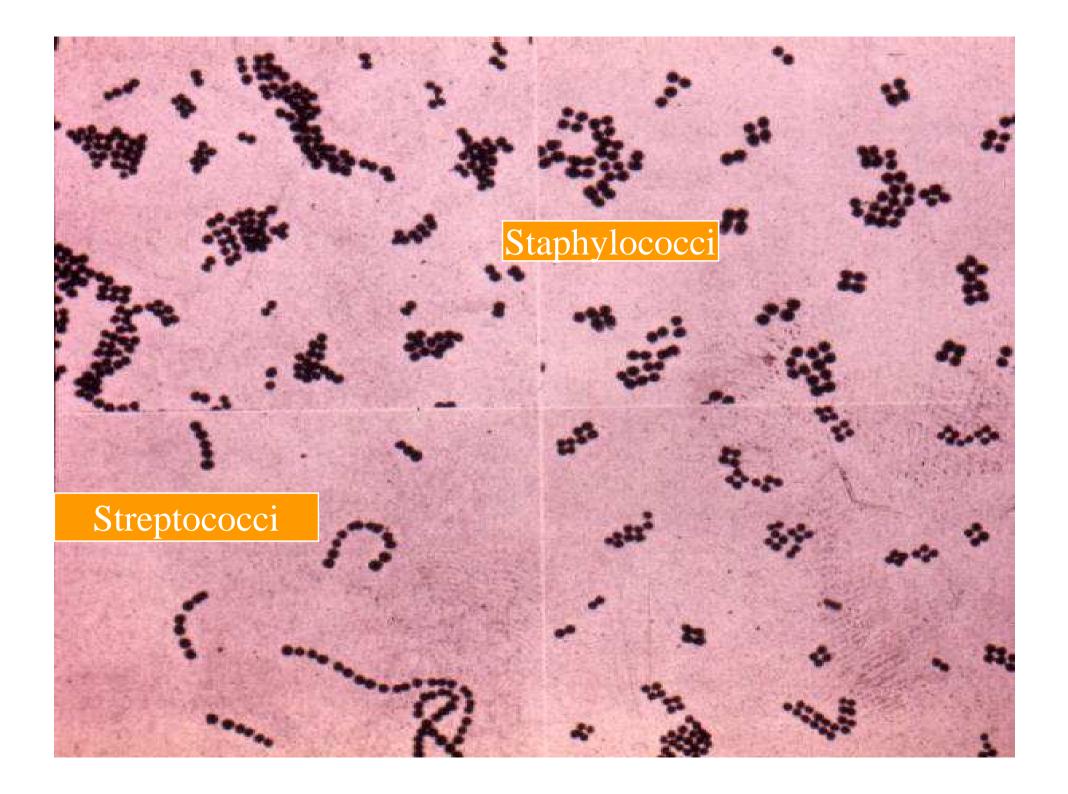
## Streptococcus

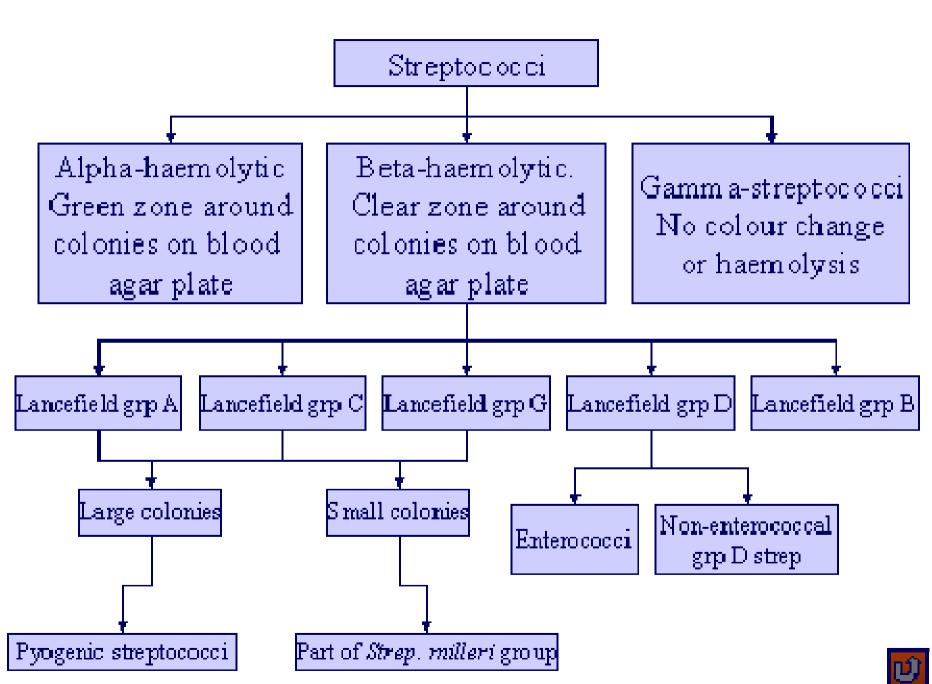
- They are Gram positive cocci arranged in chains or pairs.
- Streptococcus species are mostly commensal residents of the mouth and throat, and a few particularly S.pyogenes are primary pathogens.
- Streptococci and related species are catalase negative helping them to distinguish from staphylococci.





# History

- Billroth(1874) : First to observe cocci in chain in wound infection who called them streptococci (streptos, meaning twisted or coiled).
- Ogston(1881) : isolated them from acute abscesses and distinguish them from staphylococci.
- Rosenbach(1884) : isolate from human infections and gave them the name Streptococcus pyogenes.



OC late the set of

### Different types of hemolysis

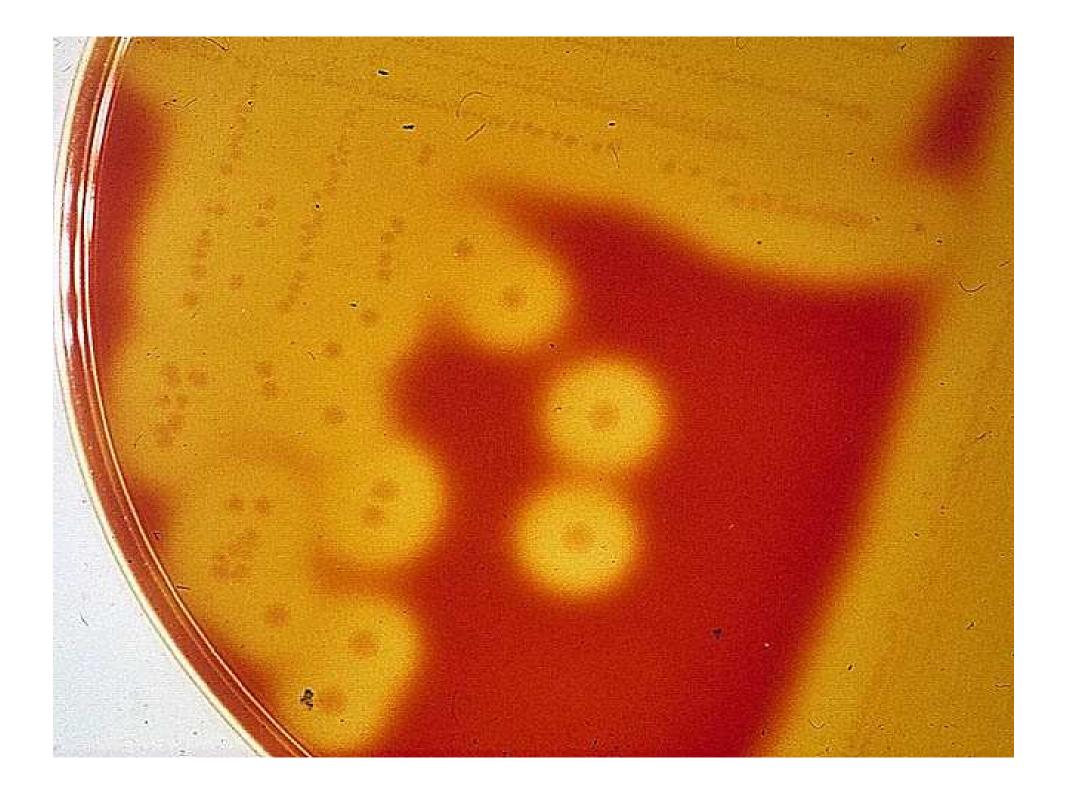
# Streptococcus pyogenes

#### Morphology

- Size : 0.5-1.0 micrometer in diameter
- Shape : spherical or oval
- Arrangement : in chains, the length of which varies within wide limits, being longer in the liquid medium. Chain formation is due to the cocci dividing in one plane only.
- Non motile and non sporing
- Group A and C have capsules composed of hyaluronic acid while group B and D have polysaccharide capsules.

### **Cultural characteristics**

- Facultative anaerobe
- Optimum temp. for growth is 37°C (range 22-42°C).
- Exacting in nutritive requirements, grows only in presence of glucose or serum.
- On blood agar, after incubation for 24hrs, the colonies are small (0.5 to1.0mm), circular, semitransparent, low convex discs with an area of clear hemolysis around them.



### **Cultural characteristics cont.**

- Growth and hemolysis are promoted by 10% CO<sub>2</sub>.
- In liquid media, growth occurs as a granular turbidity with powdery deposit.
- Colony types :

**1)Matt type** : fresh isolate of virulent strain (finely granular)

2)Glossy type: a virulent strains3)Mucoid type: capsular strain

### **Biochemical reactions**

- Catalase negative ad insoluble in bile like other streptococci
- Ferments variety of sugars in sugar serum peptone waters.

S.pyogenes is positive in PYRase test, which distinguishes it from non-group A hemolytic streptococci.

### Resistance

 Delicate organism, easily destroyed by heat (54° C for 30 minutes).

 Crystal violet (1mg/L), nalidixic acid (15mg/L) and colistin sulphate (10mg/L) added to blood agar provide a good selective medium.

Sensitive to most antibiotics
Sensitive to Bacitracin unlike other streptococci.

Notice the zone of growth
 inhibition around the bacitracin (Taxo A disc).

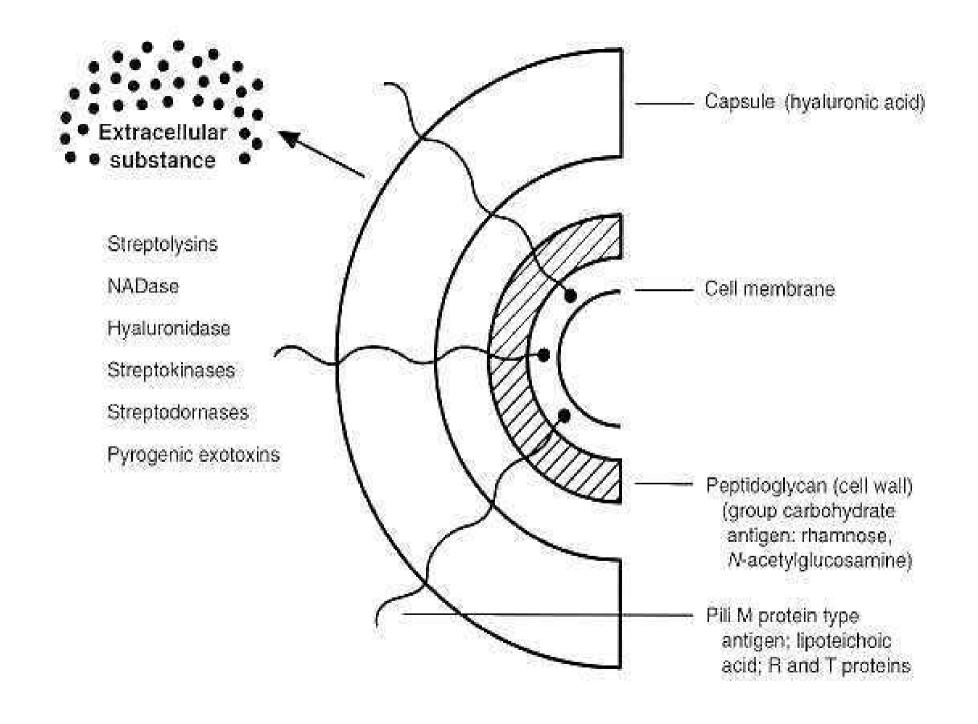
A throat culture taken from a 5 year-old with Streptococcal pharyngitis.

Notice the non-hemolytic bacterial colonies

Notice the clear zone of hemolysis around the *Streptococcus pyogenes* grown on a blood agar plate.

## **Antigenic structure**

- Outer capsule and pili
- Cell wall composed of outer layer of protein and lipoteichoic acid, a middle layer of group specific carbohydrate and a inner layer of Peptidoglycan.
- Serological grouping depends on C carbohydrate.
- Done by Ring precipitation test
- S.pyogenes have been typed based on surface proteins M,T and R.



# **Antigenic cross reactions**

No.	Part of S.pyogenes	Part of Human cells
1	Capsular hyaluronic acid	Synovial fluid
2	Cell wall protein	myocardium
3	Group A carbohydrate	Cardiac valves
4	Cytoplasmic membrane	Vascular intima
5	peptidoglycans	Skin antigens

#### **Toxins and other virulence factors**

 Hemolysins- two types `O` and `S` ASO titre is the standard serological procedure for retrospective diagnosis of Streptococcal infection. Titre >200 is considered positive.

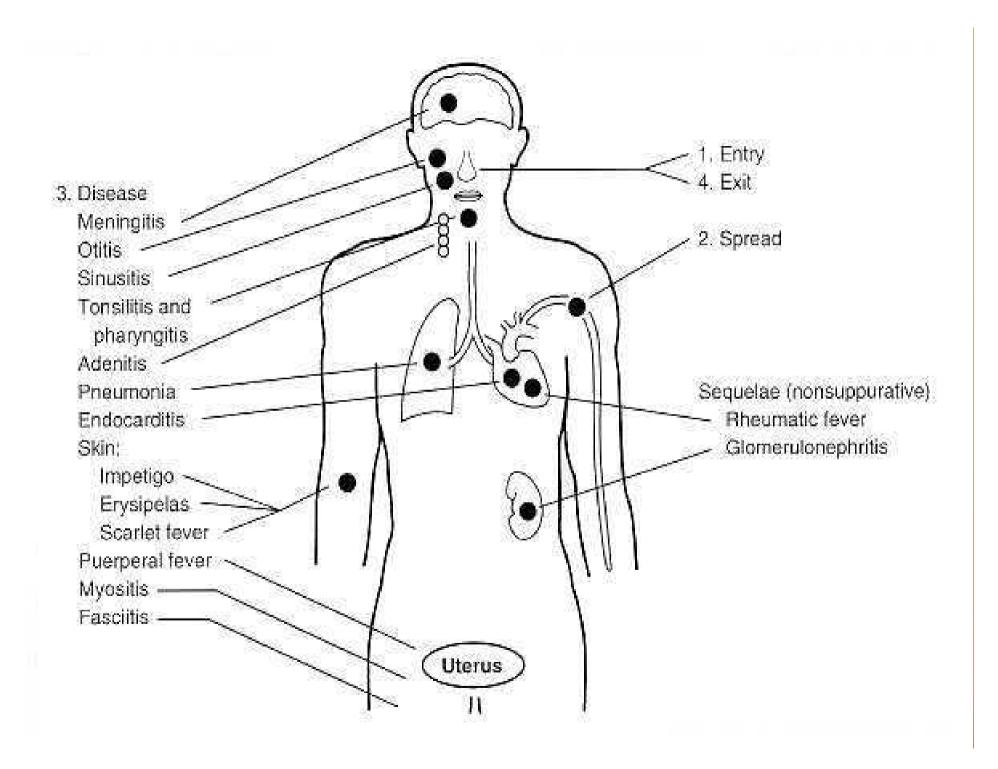
2) Pyrogenic Exotoxin (Erythrogenic, Dick, scarlatinal toxin): produce scarlet fever -(a type of acute pharyngitis with erythematous rash)
Streptococcal pyrogenic exotoxin (SPE) are three types –A,B and C
They are super antigens.

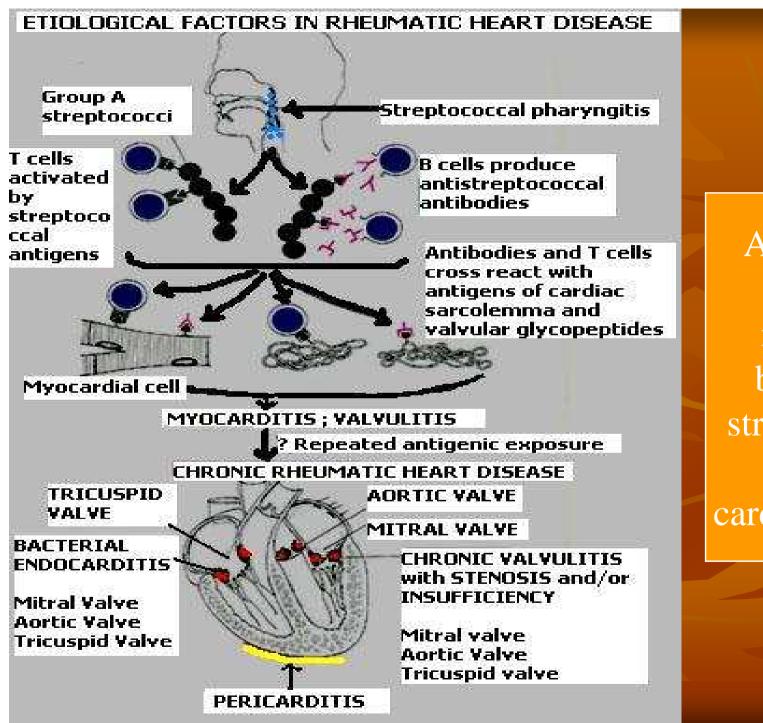
# **Toxins and other virulence factors Cont.**

3) Streptokinase (fibrinolysin)
4) Deoxyribonucleases (DNAase) A,B,C,D
5) Nicotinamide adenine dinucleotidase (NADase)
6) Hyaluronidase
7) Serum opacity factor

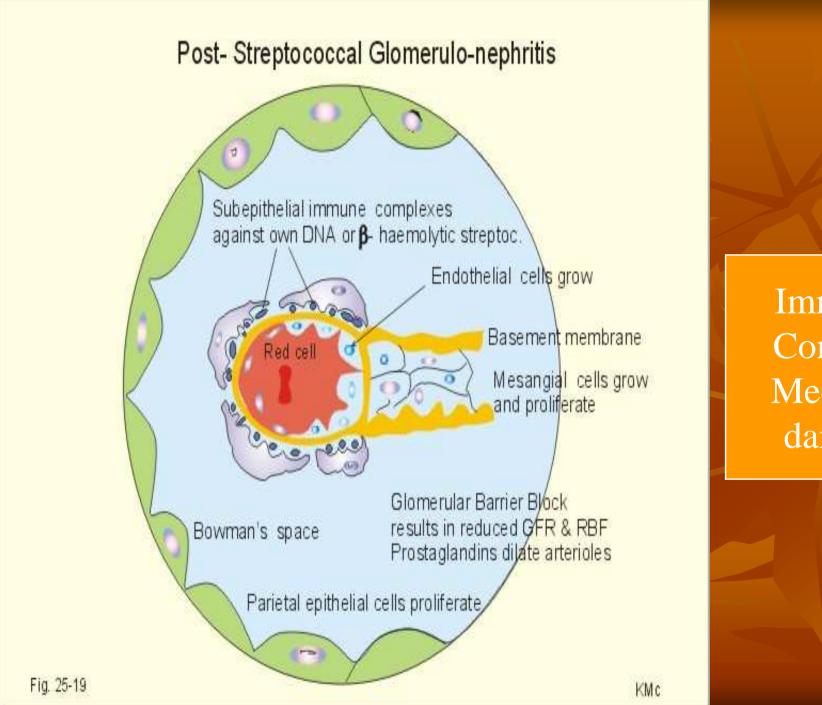
# Pathogenicity

Supportive infections - Respiratory infections - Skin and soft tissue infections- erysipelas and impetigo - Genital infections Non suppurative complications - Acute rheumatic fever - Acute glomerulonephritis

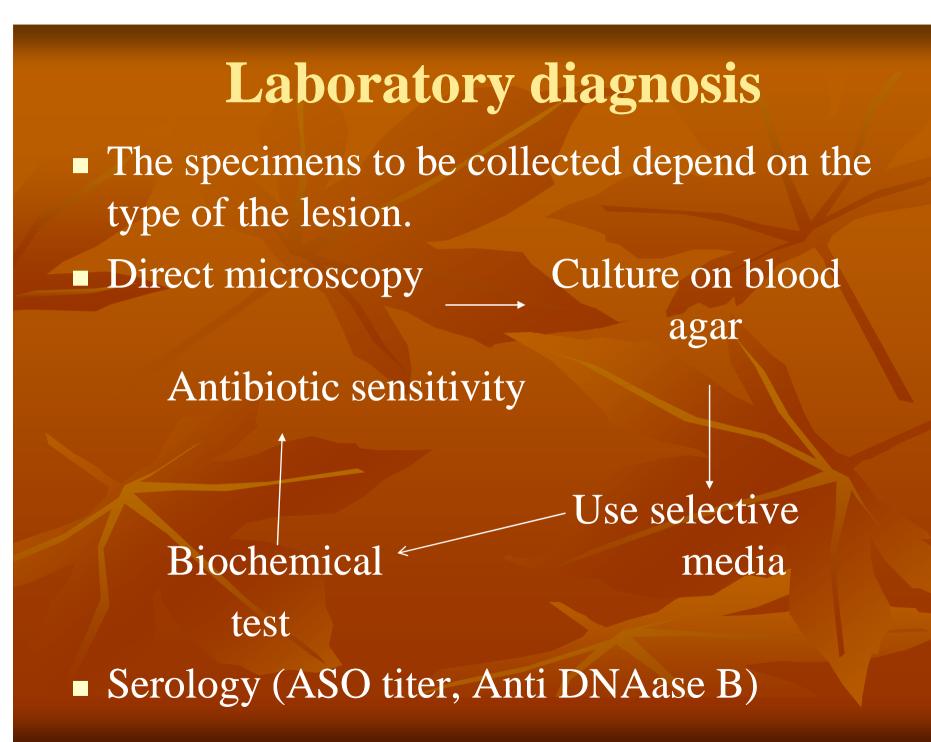




Antigenic cross reaction between streptococci and cardiac tissues

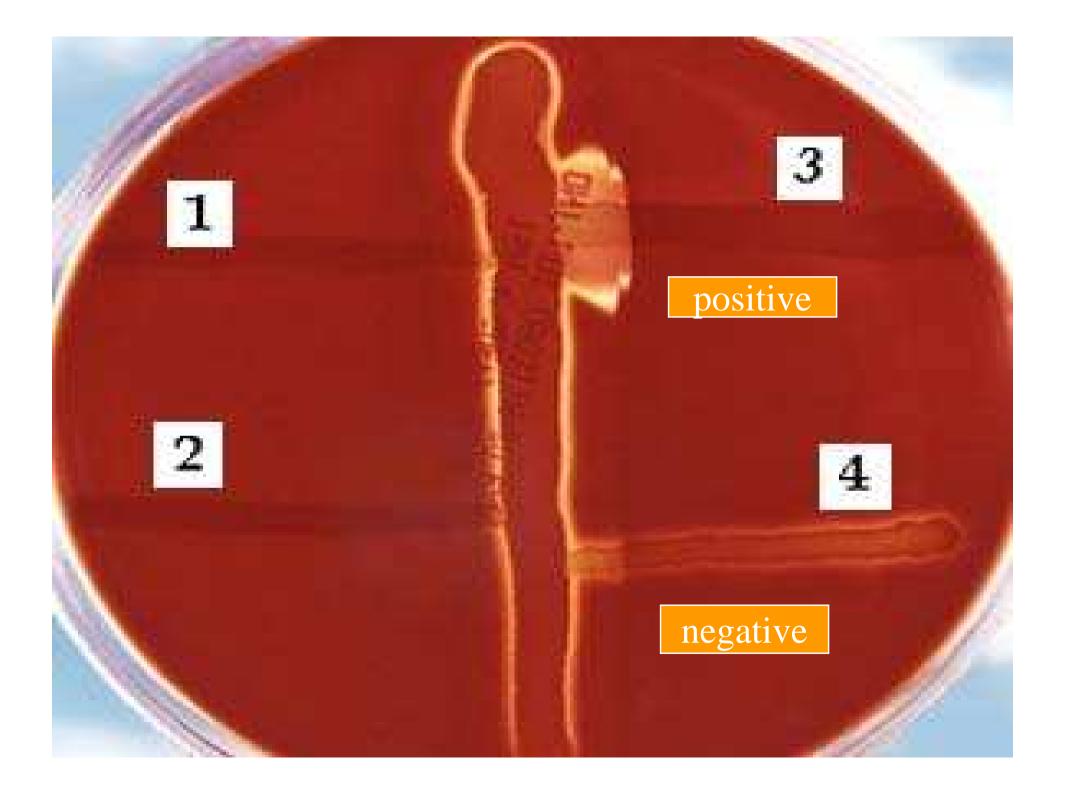


Immune Complex Mediated damage



## **Group B streptococci**

- Common cause of Neonatal meningitis
   Early onset type : within a week of birth presented with septicemia, meningitis or pneumonia and is often fatal. Infection is acquired from the maternal vagina.
- Late onset type : between 2<sup>nd</sup> and 12<sup>th</sup> week of life
- Identified by hippurate hydrolysis and CAMP reaction.



# **Group D Streptococci**

Two groups :
 Enterococcus group E. faecalis, E. faecium
 Nonenterococcal group S. bovis, S.equinus

#### Gram stain of Enterococcus faecalis



### **Characteristics of Enterococci**

Ability to grow in the presence of 40% bile
6.5% NaCl

- At pH 9.6 and at 45° C
- On mac Conkey`s medium, they produce tiny deep pink colonies.
- They appear as pairs of oval cocci, the pair arranged at an angle to each other
- Non hemolytic

# The viridans group

- Normal resident in the mouth and the upper respiratory tract and typically produce greenish (alpha hemolysis) discoloration on blood agar.
  Str.mitis,Str.mutans,Str.sanguis
  Causative agent for subacute bacterial endocarditis, most often Str.sanguis
- Dental caries by Str.mutans

