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Acute Gastrointestinal Infections

Watery Diarrhea- Viral Pathogens

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Stanford University School of Medicine





Learning Objectives

- List the main viruses that cause acute gastroenteritis
- Describe the viral structure and genomic organization, and link these to clinical features, diagnostic methods, and epidemiology
- Explain the most salient features of their pathogenesis
- Recognize mechanisms of protective immunity and whether vaccines are available

Major Human Pathogens

Gram positive Bacteria

Cocci

Staphylococcus
Streptococcus
Enterococcus

Rods

Listeria
Bacillus
Clostridium
Corynebacterium
Gardnerella
Propionibacterium

Branching

Actinomyces
Nocardia

No cell wall
Pleomorphic

Mycoplasma

Acid Fast Bacilli

Mycobacterium tuberculosis
Mycobacterium leprae
Non-tuberculous *Mycobacteria*

Gram negative Bacteria

Rods

Enteric flora

E. coli
Klebsiella
Proteus
Serratia
Enterobacter

Respiratory Pathogens

Haemophilus
Bordetella
Legionella

Opportunistic

Pseudomonas

Spiral

Campylobacter
Helicobacter

Comma

Vibrio

Anaerobic

Bacteroides
Prevotella
Fusobacterium

Diplococci

Neisseria
Moraxella

Zoonotic

Brucella
Francisella
Campylobacter
Pasteurella
Bartonella
Yersinia
Coxiella
Chlamydia
Chlamydia
psittaci
Rickettsia
Ehrlichia
Anaplasma
Borrelia
Leptospira

Spirochaetes

Treponema
Borrelia
Leptospira

Intracellular

Chlamydia
Chlamydia
Rickettsia
Coxiella
Legionella
Ehrlichia
Anaplasma
Bartonella
Brucella
Francisella
Shigella
Salmonella

Viruses

RNA

Rhinovirus
Coxsackie
Enteroviruses
Poliovirus
Rotavirus
Norovirus
Hepatitis A
Hepatitis C
HIV
HTLV-1
Measles
Mumps
Rubella

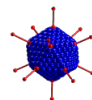
Influenza A, B
Parainfluenza
RSV
Human
metapneumovirus
Coronavirus
(MERS, SARS)
Ebola
Rabies

Vector borne

West Nile
Dengue
Chickengunya
Yellow Fever

DNA

Adenovirus
Herpes simplex
Varicella zoster
Cytomegalovirus
Epstein Barr virus
HHV6, HHV7, HHV8
Smallpox
Molluscum contagiosum
Hepatitis B
Parvovirus
Human papillomavirus
BK polyomavirus



Fungi

Yeast

Candida
Cryptococcus
Pneumocystis
Malassezia
Microsporidia

Mold

Aspergillus
Mucor
Rhizopus
Fusarium

Dimorphic

Coccidioides
Histoplasmosis
Blastomyces
Paracoccidioides
Sporothrix

Dermatophytes

Microsporum, *Epidermophyton* *Trichophyton*

Protozoa

GI/GU

Entamoeba
Giardia
Cryptosporidium
Trichomonas

Blood

Plasmodium
Babesia

Tissue

Trypanosoma
Leishmania
Toxoplasma
Naegleria

Arthropods

Ticks

Vectors of: Lyme borreliosis,
Relapsing Fever, RMSF,
other *Rickettsia*, *Babesia*,
Anaplasma, *Ehrlichia*

Lice (pediculosis)

Vectors of: Epidemic typhus,
Trench Fever

Mites (scabies)

Vectors of: Scrub typhus,
Rickettsialpox

Mosquitoes

Vectors of: Malaria, Dengue,
Chikungunya, West Nile,
Yellow Fever

Fleas

Vectors of: Cat-scratch fever,
Murine typhus, Bubonic
plague, Tularemia

Helminths

Trematodes (Flukes)

Schistosoma
(Schistosomiasis)
Clonorchis & Fasciola
(Liver Flukes)
Paragonimus (Lung Fluke)

Cestodes (Tapeworms)

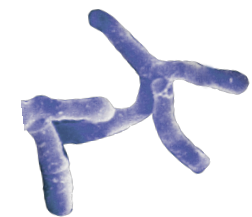
Taenia saginata
(Beef Tapeworm)
Taenia solium
(Pig Tapeworm)
Diphyllobothrium
(Fish Tapeworm)
Echinococcus
(Dog Tapeworm)

Nematodes (Roundworms)

Enterobius (Pinworm)
Trichuris (Whipworm)
Ascaris (Giant worm)
Ancylostoma & Necator
(Hookworm)
Strongyloides (Strongy)
Toxocara (Dog Ascaris)
Trichinella (Trichinosis)
Onchocerca (River
Blindness)
Loa Loa (Eye Worm)
Wuchereria & Brugia
(Elephantiasis)

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RNA

Rhinovirus
Coxsackie
Enteroviruses
Poliovirus

Rotavirus
Norovirus

Hepatitis A
Hepatitis C
HIV

HTLV-1
Measles
Mumps
Rubella

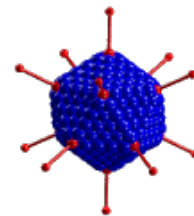
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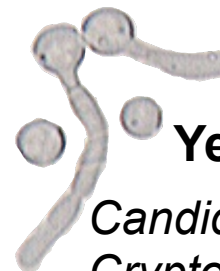
Viruses



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Adenovirus

Herpes simplex
Varicella zoster
Cytomegalovirus
Epstein Barr virus
HHV6, HHV7, HHV8
Smallpox
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BK polyomavirus



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Cryptosporidium
Pneumocystis
Malassezia
Microsporidia

M

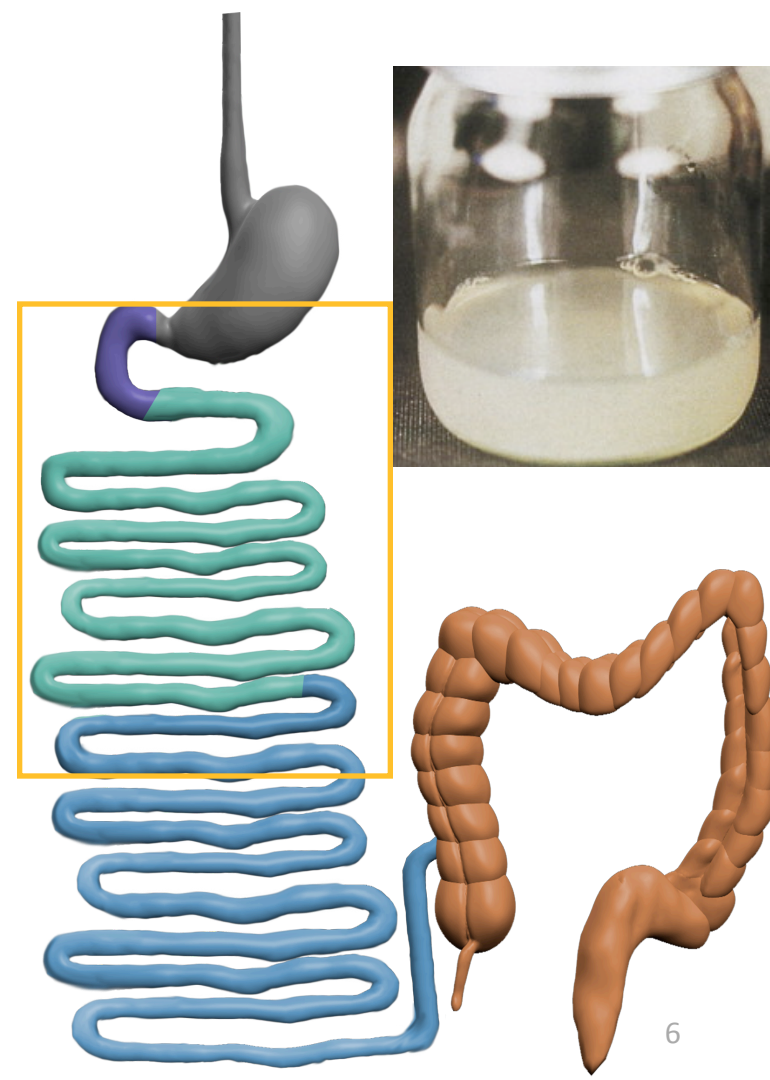


E
G
C



Watery Diarrhea

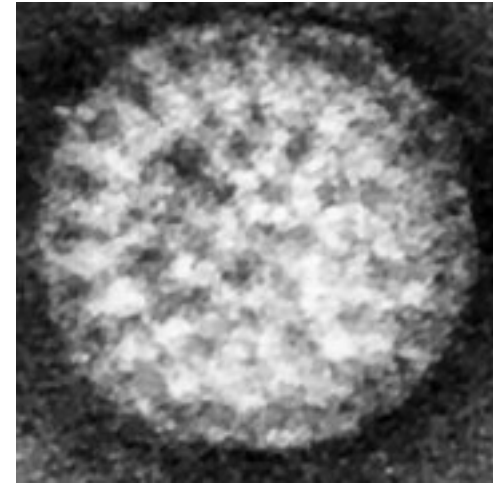
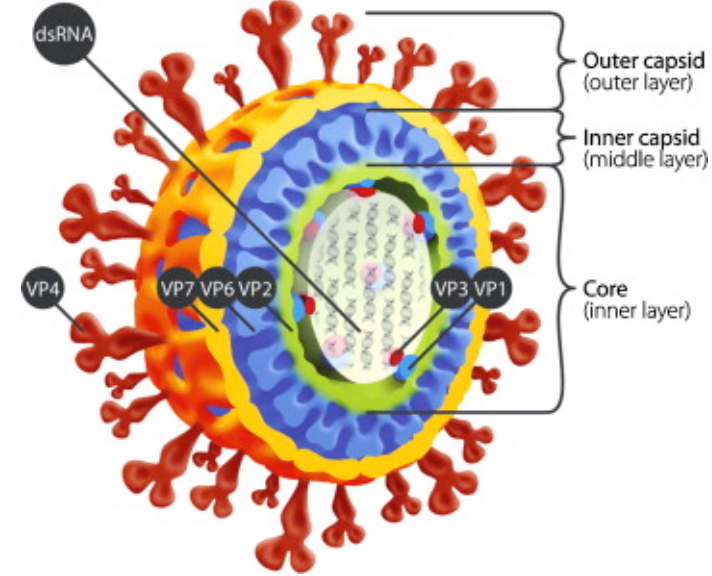
Clinical Features	Large volume watery stools without inflammatory cells or blood. Can lead to dehydration. Possibly accompanied by nausea, vomiting, bloating, colicky
Complications	Dehydration, electrolyte abnormalities, malnutrition
Management	Assess degree of dehydration, consider DDx, rehydrate, maintenance hydration
Anatomical Location	Proximal Small Intestine
Pathogenesis	Non-invasive, several are toxin mediated, secretory vs malabsorptive
Viruses	Rotavirus, Norovirus, Adenovirus, Astrovirus (all non-enveloped capsids)
Bacteria	<i>Vibrio cholerae</i> , Enterotoxigenic <i>E. coli</i> (ETEC), EPEC, EAEC
Protozoa	<i>Giardia</i> , <i>Cryptosporidium</i>





Rotavirus

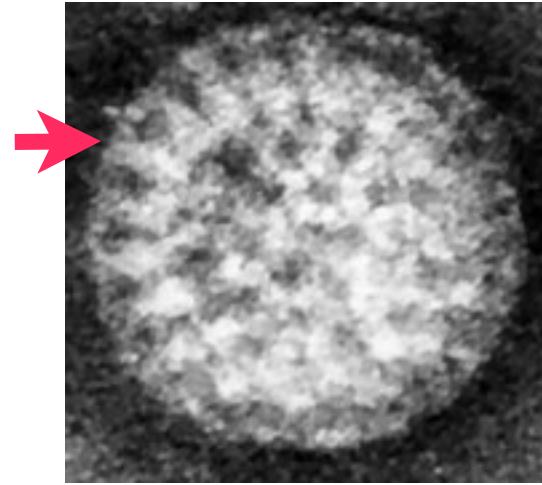
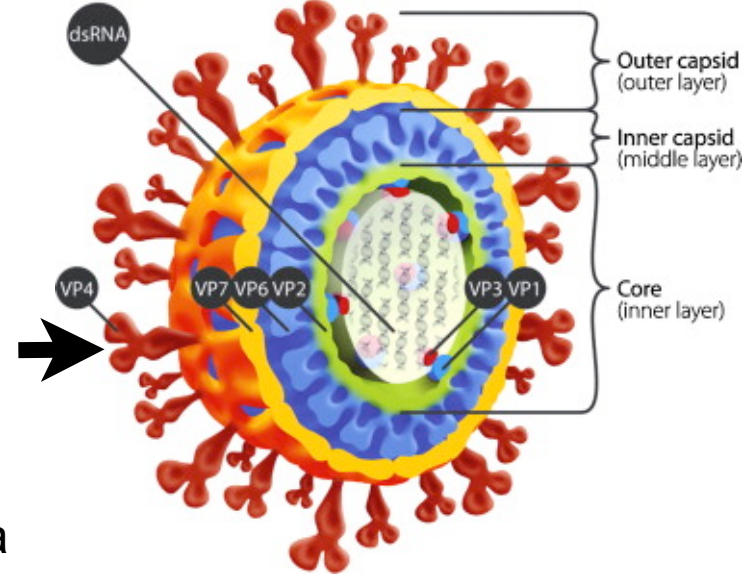
- Most common cause of viral diarrhea worldwide.
- Infects most children by 2-5 years
 peaks 6 mo to 2 yrs
- Vomiting and fever commonly accompany diarrhea
- Peaks in Winter months
- Member of the *Reoviridae* family
- Rota- means “wheel” in latin- VP4 spikes in the three-layered capsid give its characteristic shape
- Double stranded RNA segmented genome
 - 11 segments-each codes for one protein





Rotavirus

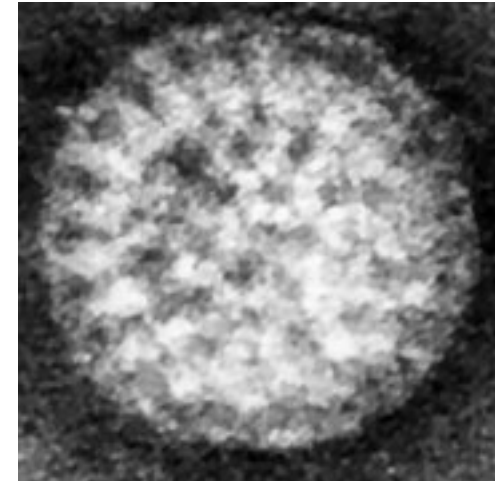
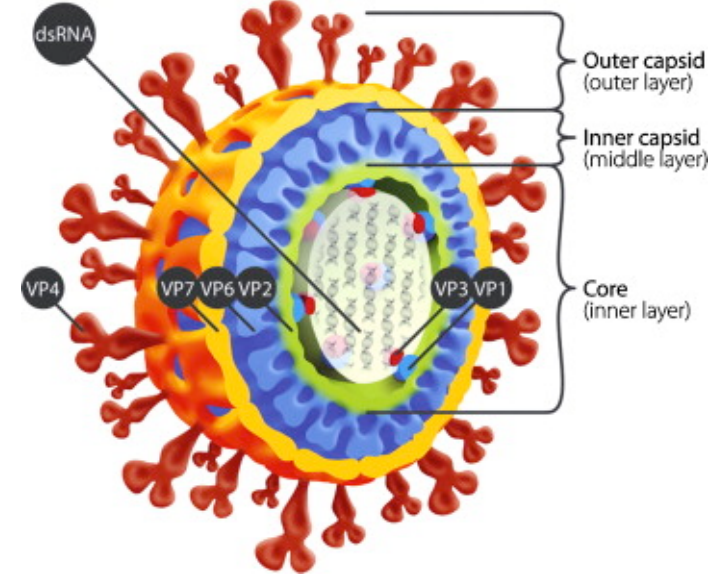
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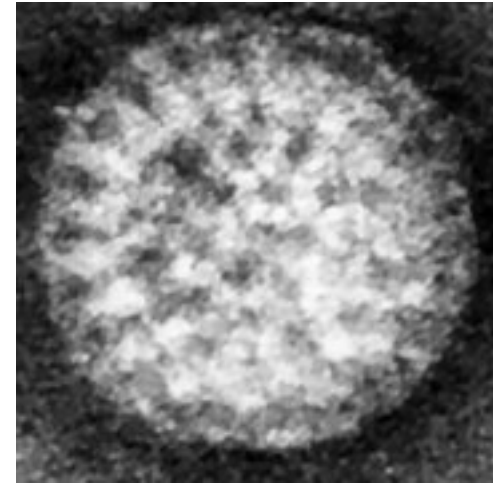
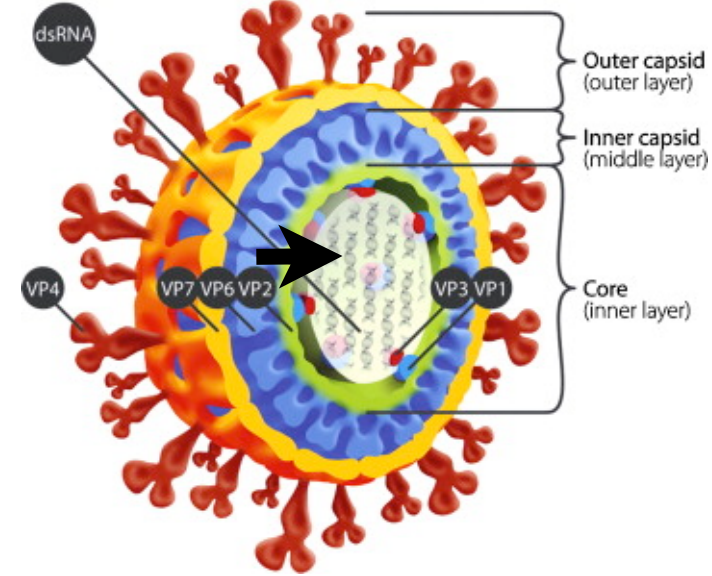
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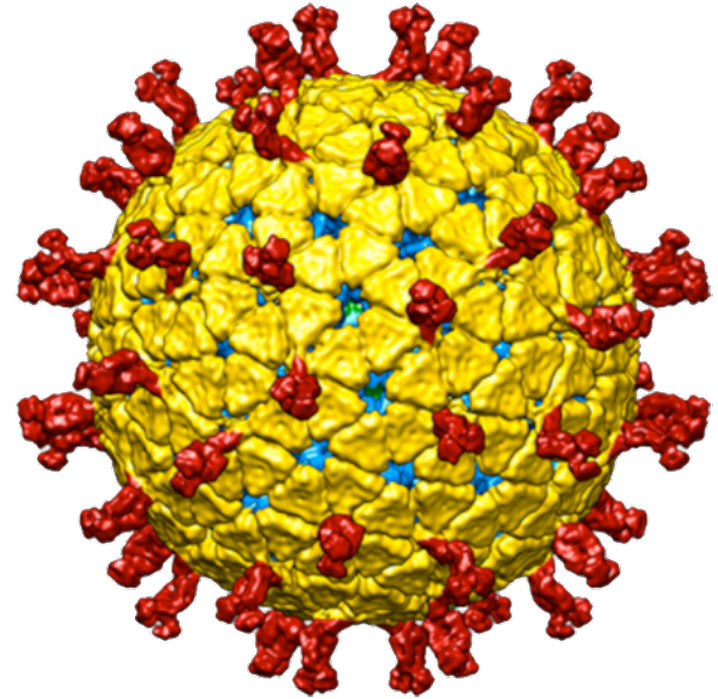
Rotavirus Entry into Host

- Fecal oral transmission
 - Contamination of hands, toys, water
 - Stable in environment
 - 10 trillion particles per ml in stool
 - Not destroyed by acid or digestive enzymes and resistant to bile salts in duodenum
 - Activated for attachment to epithelial cells trypsin cleavage of spike



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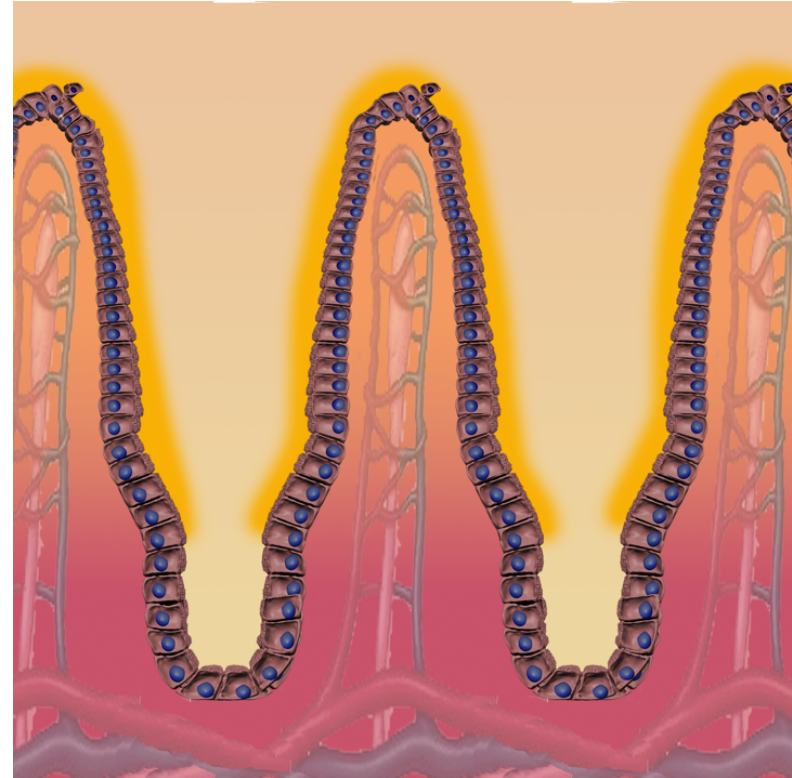
Rodriguez et al. 2014

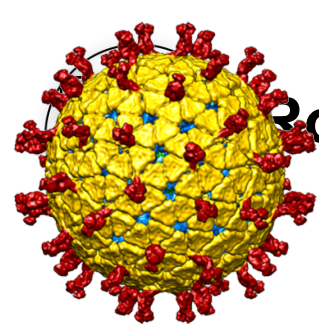
PLoS Pathogens 10(5):e1004157



Rotavirus Colonization & Replication

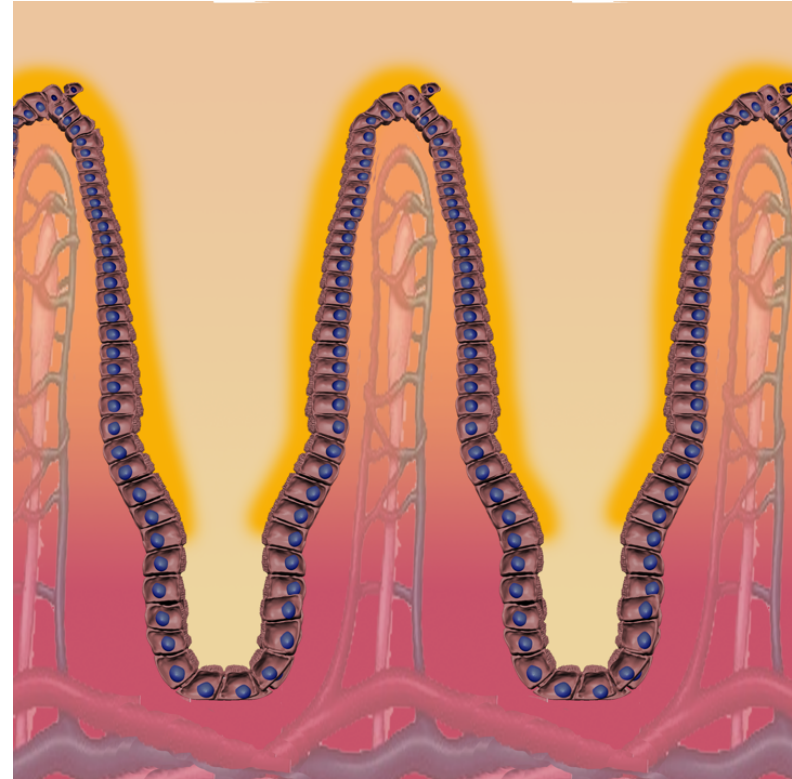
- **Finds receptors at tips of intestinal villi**
 - Invades and replicates in mature enterocytes
 - Spreads systemically and causes fever
 - Infected cells are killed by lysis and by immune responses
 - villi become blunted

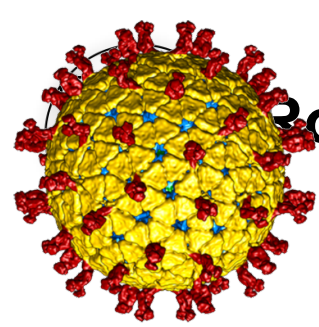




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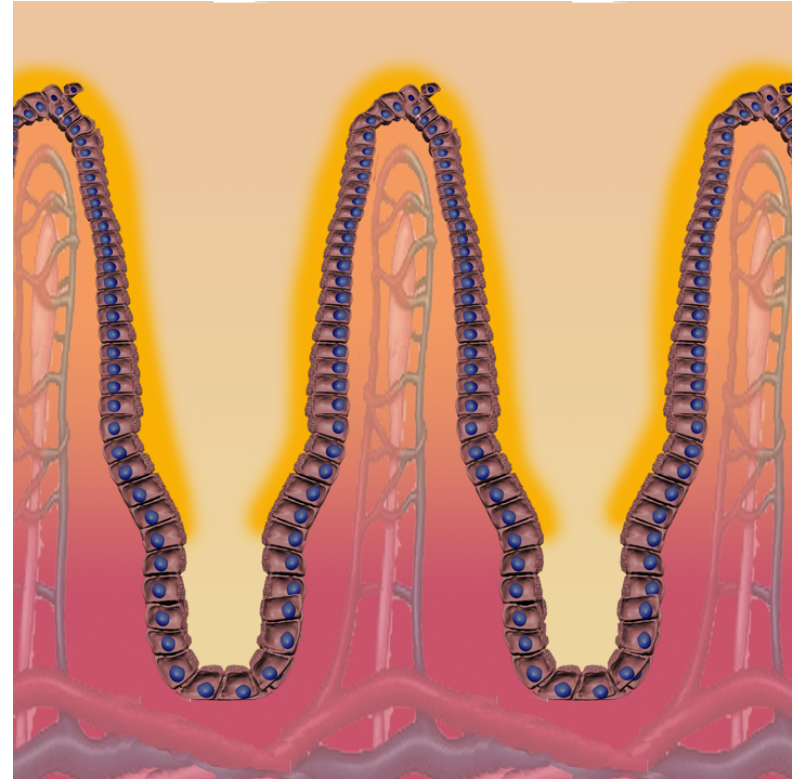
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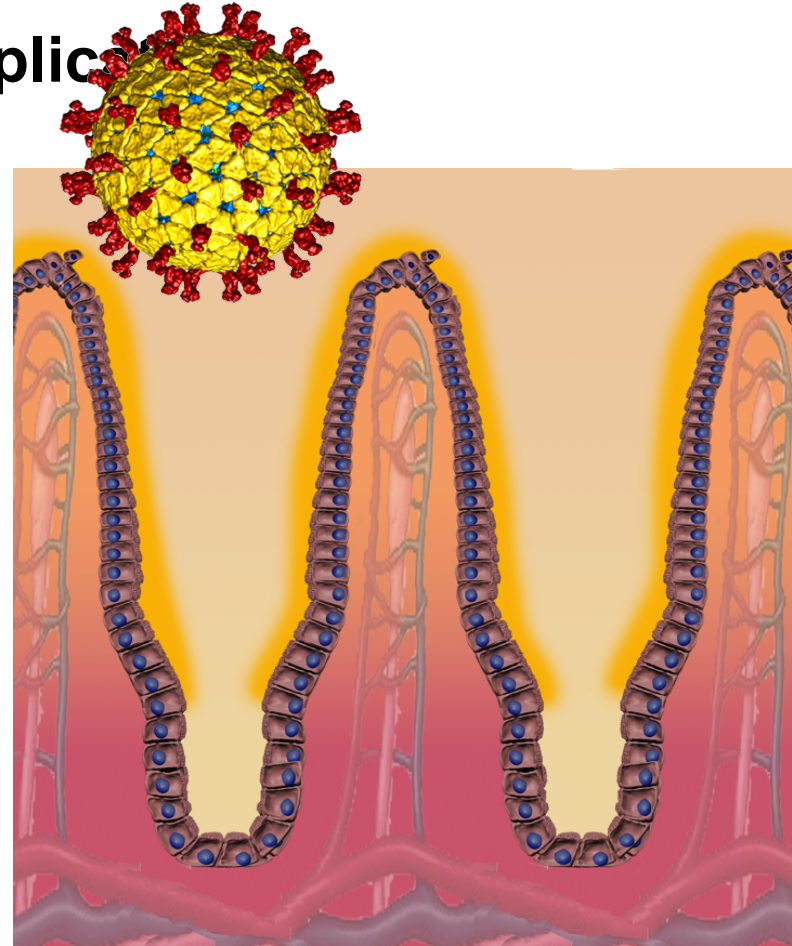
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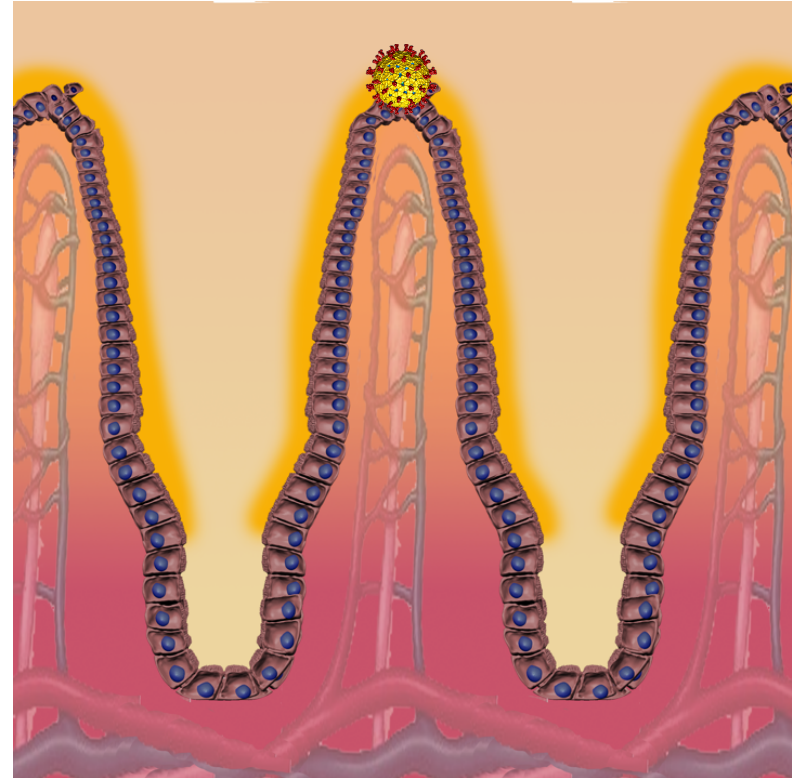
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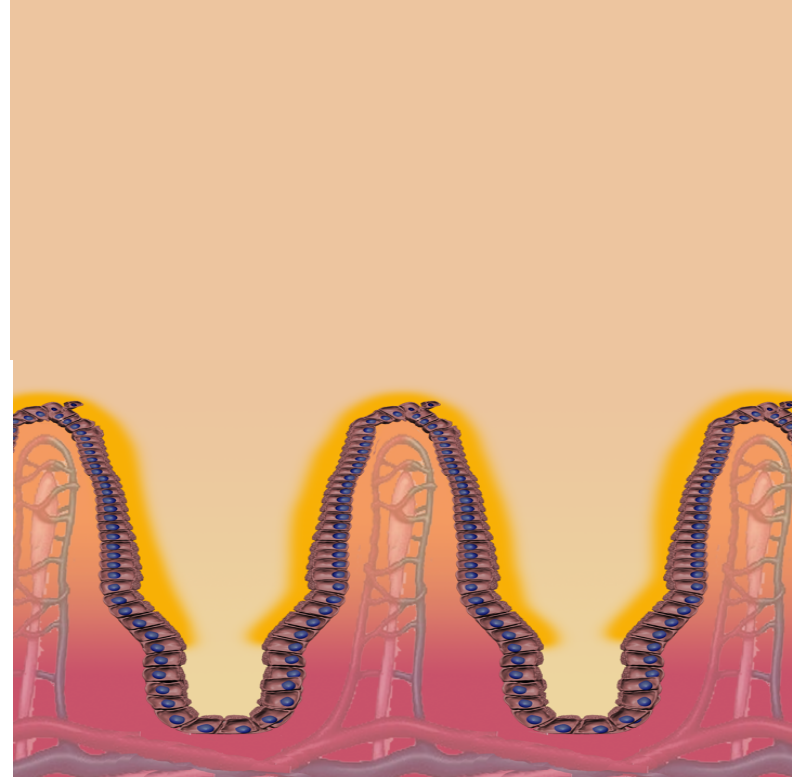
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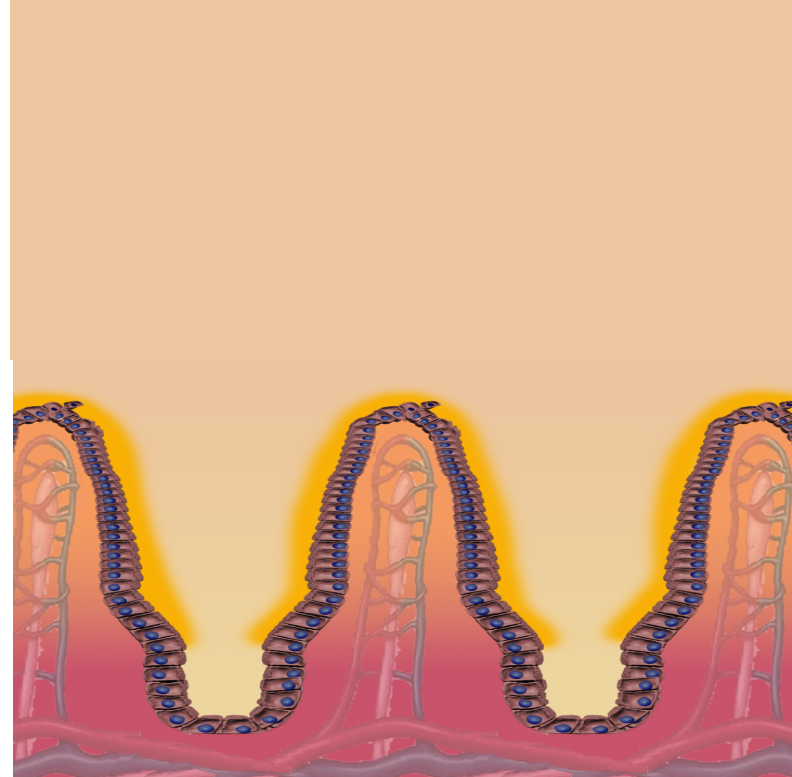




Rotavirus Colonization & Replication

Diarrhea is multifactorial

- Blunting of the villi
 - Less absorption of solutes
- Loss of brush border enzymes
 - osmotic diarrhea
- Non-structural protein 4 (NSP4) acts as an enterotoxin
 - loss of Cl^- and leaky junctions
- Activation of the enteric nervous system
 - promotes fluid secretion

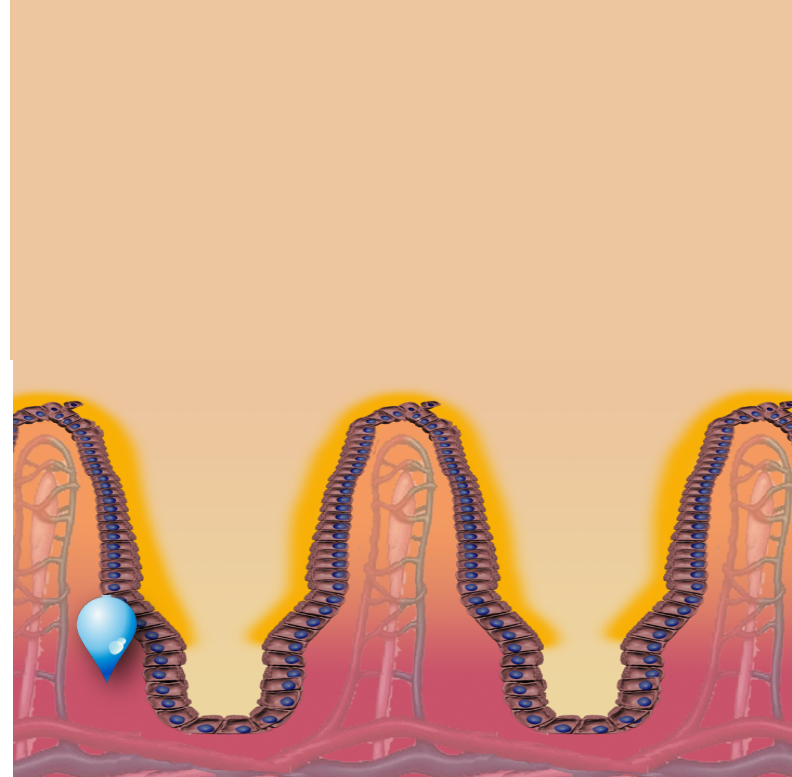




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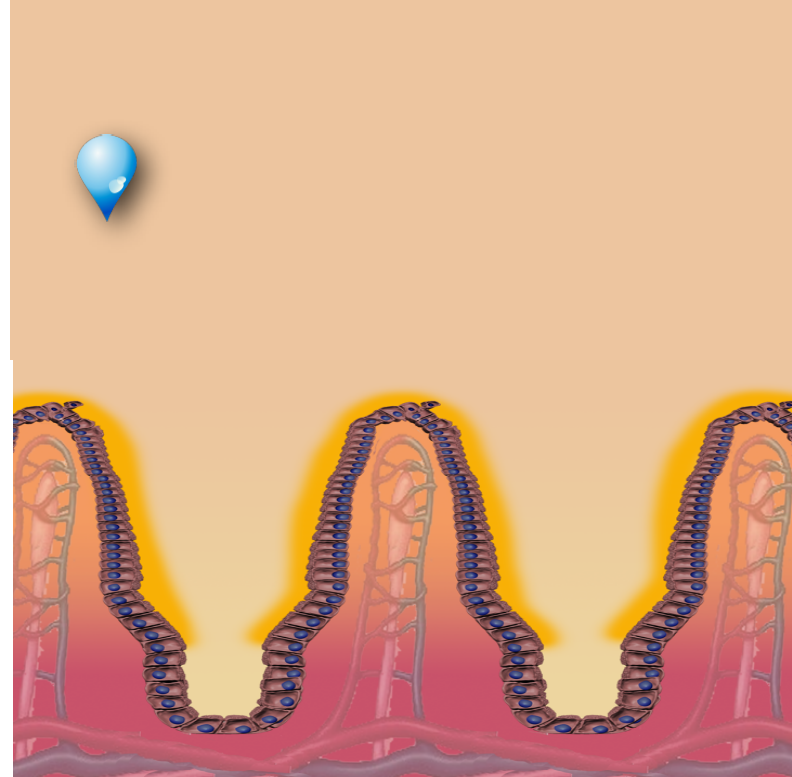




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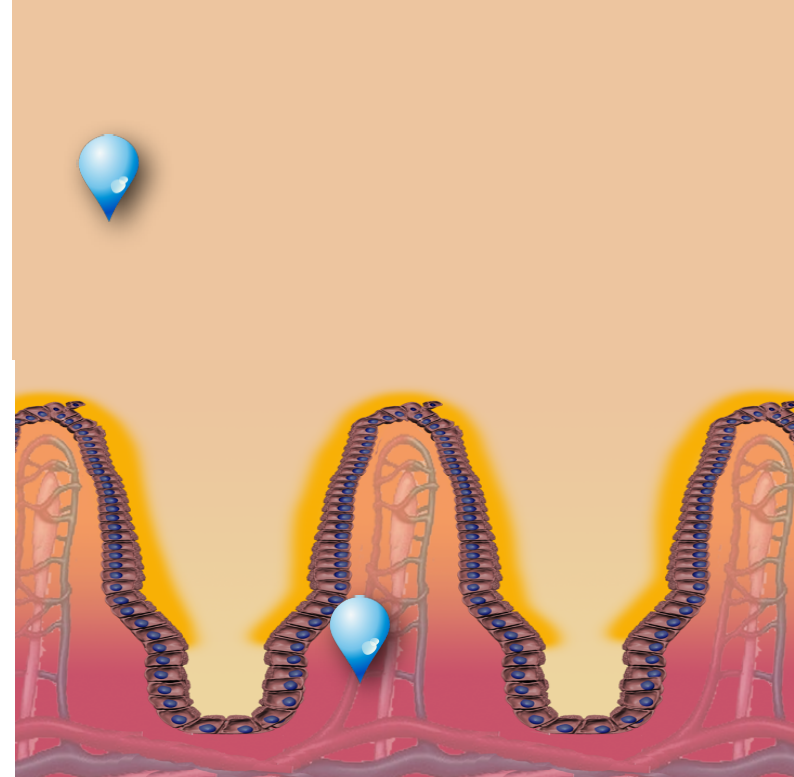




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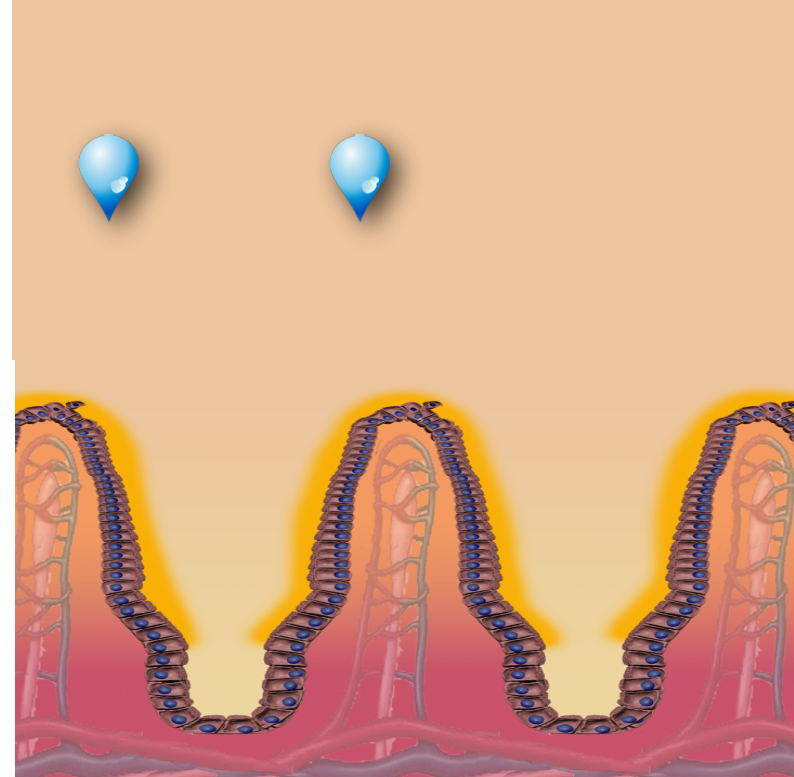




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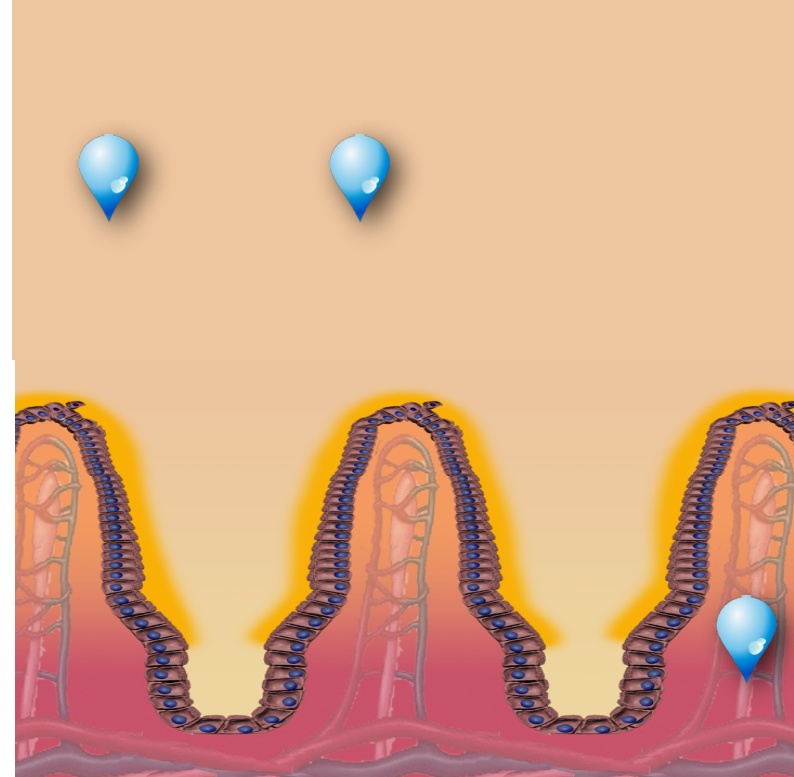




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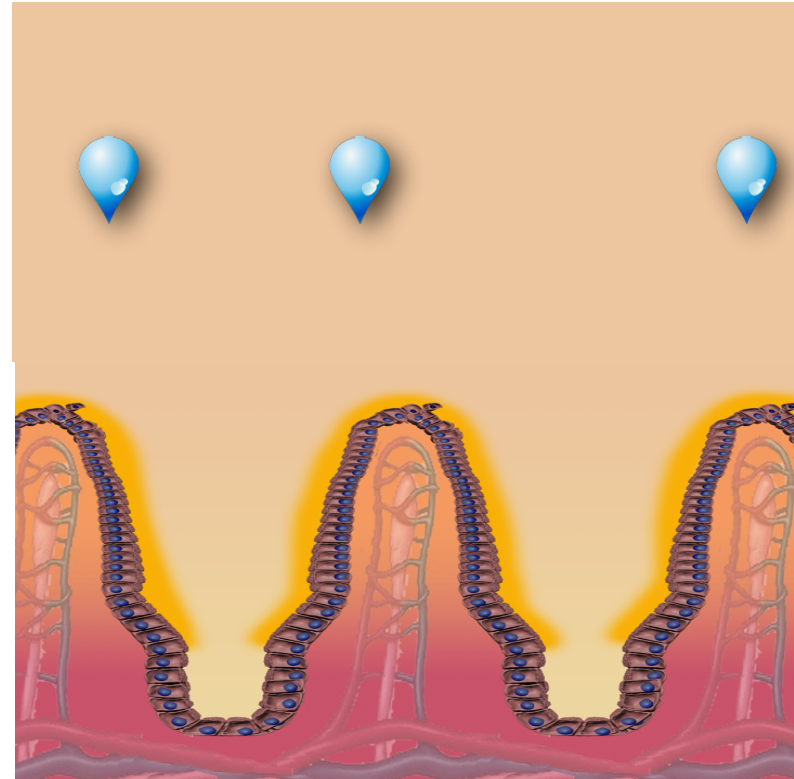




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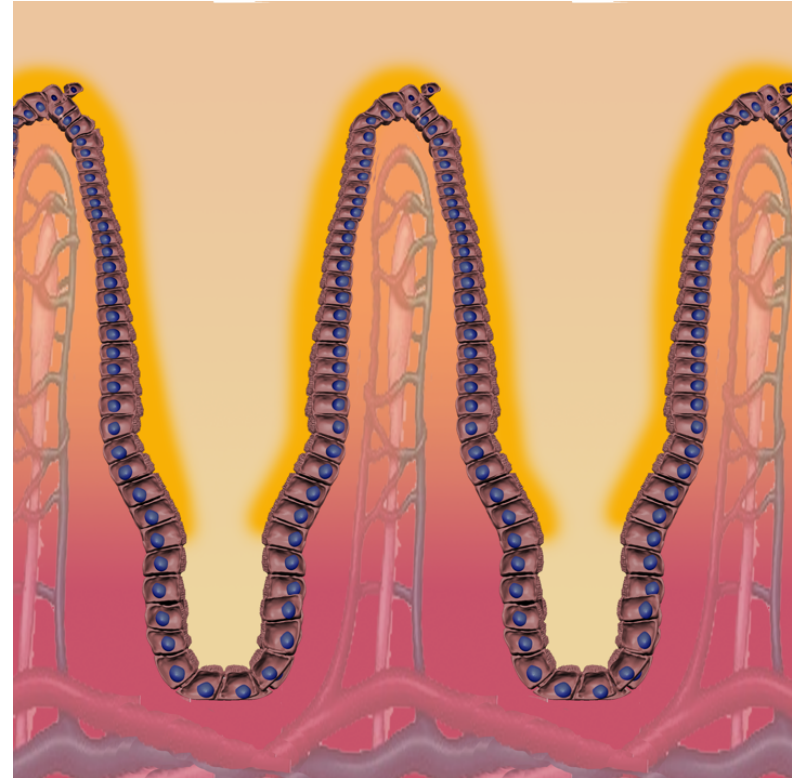
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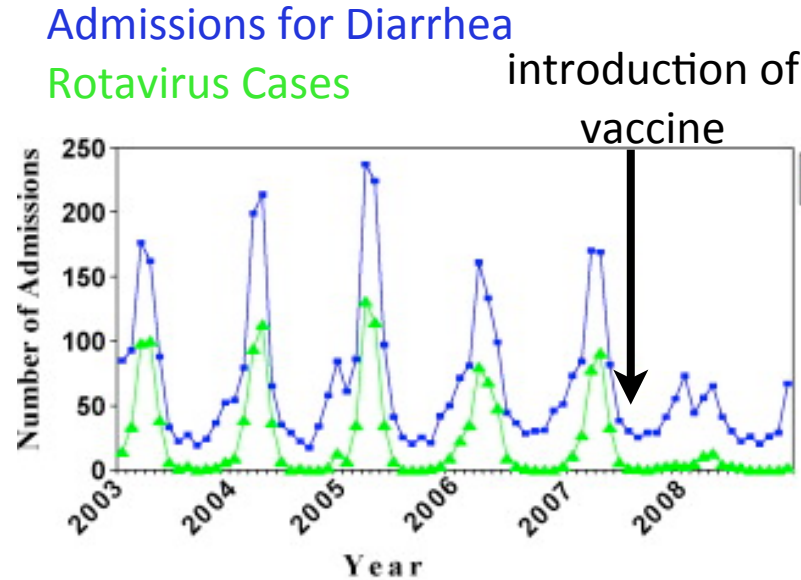
- Mucosal infection is patchy
 - ORT is helpful
- In about one week viral replication stops
 - loss of susceptible cells
 - cell mediated immunity
 - interferon responses
 - antibodies?
- Cells repopulate the villi
- Infection in adults and re-infection in children is milder
 - IgA & immunological memory





Rotavirus prevention

- Two rotavirus vaccines are available and several in development
 - Human-bovine reassortant vaccine
 - Attenuated human rotavirus
- Rotavirus vaccination for all healthy children
 - Contraindicated in SCID
- A human-rhesus monkey reassortant vaccine discontinued
 - Increased risk of intussusception



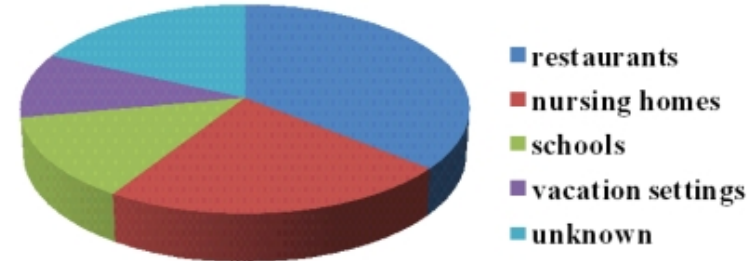
40% reduction in diarrhea and
85% reduction of rotavirus in
2008 vs 2003-2006



Norovirus

- Seasonal- “Winter vomiting disease”
- Significant nausea and vomiting followed by watery diarrhea.
 - Self-limited and quick resolution in 1-3 days.
 - more severe and prolonged in infants, elderly, and immunocompromised (weeks to months).
- Most common cause of outbreaks of viral gastroenteritis
 - i.e. cruise-ships, nursing homes, schools, military settings, restaurants & hospitals

Setting for Outbreak

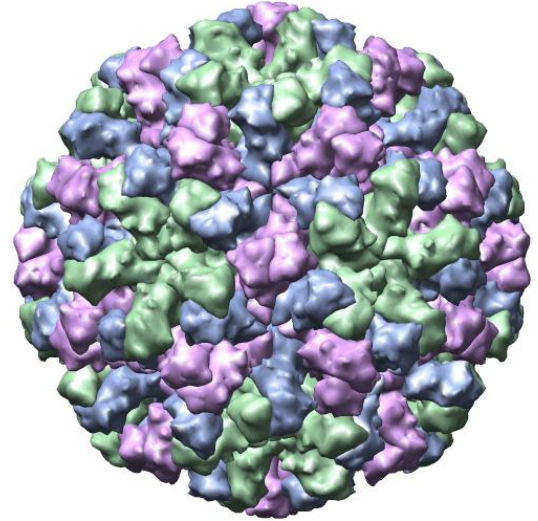


CDC data from 232 Norovirus outbreaks- 1997-2000



Norovirus

- Member of the *Caliciviridae* family
 - Strains named by location of outbreaks
 - Norwalk virus (Norwalk, OH),
 - Dessert Shield, South Hampton,
 - Snow Mountain.
- Non-enveloped icosahedral capsid-resistant to bile salts, detergents
- Positive strand RNA genome, non-segmented
- Does not grow in cell culture-
 - identification through PCR amplification or antigen detection immunoassays

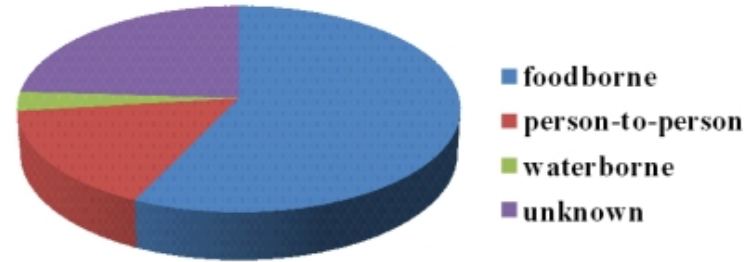




Norovirus Entry

- Fecal oral or vomitus transmission
 - VERY infectious 5-10 particles can initiate an infection
 - Contaminated food and water
 - Person to person transmission is common in outbreaks
 - Fomites
 - Aerosolized vomit
- Asymptomatic shedding occurs

Source of Norovirus



CDC data from 232 Norovirus outbreaks- 1997-2000



Norovirus Pathogenesis

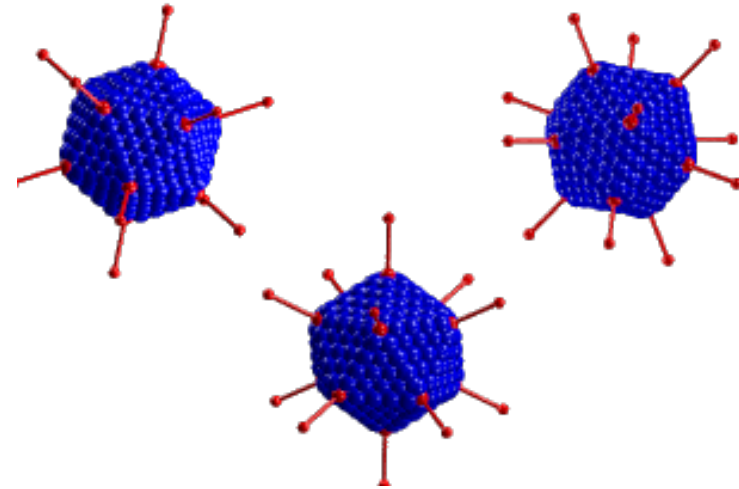
- Pathogenesis is not well understood-
 - No animal models for human norovirus.
 - No cell culture system
- Preferred sites of replication not known
 - Enterocytes? but also dendritic cells, monocytes
- Volunteer studies show shortened microvilli, villus blunting, loss of enzymes and suggest transient malabsorption.
- Also marked decrease in gastric emptying may cause vomiting





Enteric adenovirus 40, 41

- **Adenoviruses** are double-stranded DNA viruses that are not encapsulated
- 57 serotypes are known- two 40, and 41 cause mainly gastrointestinal symptoms: Febrile diarrhea
- Will not replicate in conventional viral cultures so diagnosis requires immunoassays for antigen detection or PCR
- No seasonality





Astroviruses

- Plus-strand single-stranded RNA- Non enveloped
- Some particles look like a “five-pointed star”
- It is the cause of acute gastroenteritis in many studies.





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Credits: Watery Diarrhea- Viral

Slide 6: Rice Water Stools. From Figure 22.13 in: Gastrointestinal tract infections. Mims' Medical Microbiology. Goering, Richard V., BA MSc PhD. January 1, 2013. Pages 269-302. © 2013.
<https://www.clinicalkey.com>

Slide 7-8 Diagram of the rotavirus particle structure. From: Usonis, et al. 2012. *Vaccine*. Volume 30, Issue 31. Pages 4596-4605. The triple-layered particle consists of: the core (inner layer) with VP2 (green) as scaffolding protein, containing the viral genome of 11 segments of double-stranded RNA (shown schematically), VP1 (light blue), the RNA-dependent RNA polymerase (RdRp), and VP3 (red), the capping enzyme; the middle layer (inner capsid) made of VP6 (blue), determining the species [group]; and the outer layer (outer capsid), consisting of VP7 (a glycoprotein; orange) determining G types and VP4 (a protease-sensitive protein; deep red) determining P types.
<https://www.clinicalkey.com>

A rotavirus particle from a transmission electron micrograph made by Thomas Henry Flewett and left in the possession of Dr G.M. Beards.
http://commons.wikimedia.org/wiki/File:Flewett_Rotavirus.jpg

Slide 9: Structure of Rotavirus. From: Rodríguez et al. (2014) New Insights into Rotavirus Entry Machinery: Stabilization of Rotavirus Spike Conformation Is Independent of Trypsin Cleavage. *PLoS Pathog* 10(5): e1004157.
<http://journals.plos.org/plospathogens/article?id=10.1371/journal.ppat.1004157>

Slide 15: Monthly diarrhea and rotavirus-associated hospitalizations among children 1–23 months of age for 10 sentinel hospitals, New York, January 1, 2003 to December 31, 2008. In: Chang et al. 2010. *Vaccine*. Volume 28, Issue 3. Pages 754-758. Reduction in hospitalizations for diarrhea and rotavirus infections in New York state following introduction of rotavirus vaccine.
<https://www.clinicalkey.com>

Credits: Watery Diarrhea- Viral

Slide 16: Norovirus outbreak characteristics. The Centers for Disease Control collected data from 232 norovirus outbreaks between July 1997 and June 2000.

<http://www.cdc.gov/ncidod/dvrd/revb/gastro/norovirus-factsheet.htm>.

Slide 17 Norwalk virus. In October 1968, an outbreak of acute gastroenteritis among students and teachers in an elementary school in Norwalk, Ohio was investigated by the Centers for Disease Control and Prevention (5). During a two-day period, 50% of the students and teachers (116 of 232) developed a gastrointestinal illness with a secondary attack rate of 32% among contacts of primary cases. The illness was characterized by nausea and vomiting in more than 90% of cases and diarrhea in 38% of affected individuals, and the duration of illness was typically 12 to 24 h..

http://commons.wikimedia.org/wiki/File:Norwalk_Caspid.jpg

Slide 18: Figure 1: Norovirus outbreak characteristics. The Centers for Disease Control collected data from 232 norovirus outbreaks between July 1997 and June 2000.

<http://www.cdc.gov/ncidod/dvrd/revb/gastro/norovirus-factsheet.htm>

Slide 19: Symbol of gastroenteritis. Chicago Department of Public Health

Slide 20: Adenovirus structure.

http://commons.wikimedia.org/wiki/File:Adenovirus_structure.png

Slide 21: Transmission electron micrograph of Astrovirus particles.

http://commons.wikimedia.org/wiki/File:Astrovirus_4.jpg