## Culture-demanding bacteria

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# Bordatella

- G-aerobic rod
- He is the originator **whooping cough Pertussis**
- The most common representatives <u>B. Pertussis</u> and **B. Parapertussis**



#### Whooping Cough (Pertussis)

- A highly contagious disease
- It shows a high mortality rate (up to 600 000 death in the world)
- He is vaccinated against pertussis <u>acellular</u> <u>vaccine</u>

Whooping Cough (Pertussis)

- Characteristic coughing fits
- Suspicion should be had for an atypically long-lasting cough in the area of epidemic occurrence
- It has 3 stages:
  - 1. Catarrhal stage (1-2 weeks)
  - 2. Paroxysmal stage (1 month)
  - 3. Convalescent stage (1 month)

### Diagnosis of Bordatella

- Direct pass
  - Cultivation grows on Bordet-Gengou agar



## **Diagnosis of Bordatella**

- Direct pass - Cultivation
  - DNA detection using PCR compared to culture, it is very sensitive
- Indirect pass
  - Serological examination by ELISA

### Therapy

- It is the drug of choice
- <u>Clarithromycin</u>(macrolides)
  - Effective only in the catarrhal stage
- An alternative is Cotrmoxazole

# Brucella spp.

- G-aerobic coccobacilli, intracellular pathogens
- They attack the monocyte-macrophage system
- It is the causative agent of a zoonosis called Brucellosis
- Infectious dose very low has high infectivity

#### Brucellosis

- Depending on the species, some of the forms of infection develop
  - 1. Hepatolienal
  - 2. Cardiac
  - 3. Osteomyelitis
- The disease has non-specific symptoms:
  - Fever
  - Perspiration
  - Fatigue
  - Anemia...

# Brucella spp

- Diagnostics –**PCR** and **blood culture**
- Treatment antibiotic combination of doxycycline (tetracycline) with rifampicin

## Francisella tularensis

- G- strictly aerobic coccobacillus
- Causes tularemia "hares disease"
  - It is <u>highly infectious intracellular</u> disease, the main source being hares and rabbits
  - Hunters are most at risk
  - It's a rare disease, hers <u>the pulmonary form can</u> <u>be fatal</u>

# Tularemia

- Symptoms depend on the route of transmission
  - Ulceroglandular form through injured skin
    - Fever, chills, nausea, swollen lymph nodes
  - —Pulmonary form –the most serious
  - Oropharyngeal and GIT form after ingestion of meat
  - Typhoid ulcers, GIT bleeding, sepsis
  - Oculoglandular getting into the eye. It runs like <u>conjunctivitis</u>

## Francisella tularensis

- Diagnostics
  - Serology-main method
  - Can be used <u>PCR</u>
- Therapy drug of choice Doxycycline (Tetracycline)

- G- rod to filament
- Aerosol transmission, survives in water



- It causes two clinical forms:
  - <u>Pontiac fever</u> flu-like disease. The illness lasts 2-5 days, and it passes spontaneously.
  - Legionnaires' disease—proceeds as severe pneumonia, which in 15-20% it ends in death.
    - There is a <u>damage to the lung parenchyma</u>
    - Then microabscesses form in the lungs
    - Further damage to the kidneys, CNS, GIT

- Diagnostics
  - PCR! from sputum, nasopharynx. swab or tissue
  - <u>Detection of antigen in urine</u> very fast and useful utility. But negativity does not rule out illness. It is performed using immunochromatography
  - Cultivation on BCYE agar (buffered charcoal yeast extract agar)



- Therapy
  - Potiac fever symptomatic treatment
  - Legionnaires' disease ATB treatment.
    Primarily clarithromycin(macrolides),
    possibly can levofloxacin

- G- facultatively anaerobic rod
- Grows on chocolate agar or on blood agar
  S. aureus Satellite phenomenon





- Causes:
  - Purulent meningitis
  - Otitis
  - <u>Epiglottitis</u>
  - Sinusitis
  - Pneumonia

- The case resists the immune system
- <u>Type b is the most virulent</u>

# Haemophilus influenzae - disease

- Purulent meningitis—the most common causative agent before the introduction of the vaccine
- Epiglottitis—a life-threatening disease, swelling

of the epiglottis can cause suffocation. In the

Czech Republic, since the introduction of the

vaccine, the incidence has been practically zero.

 Respiratory infection—pneumonia often occurs after a previous viral infection

#### Haemophilus influenzae - diagnosis

• If epiglottitis is suspected, throat swabs are contraindicated

#### Haemophilus influenzae - diagnosis

- If epiglottitis is suspected, throat swabs are contraindicated—there is a risk of laryngospasm and suffocation
- Biological material is taken: throat swab, conjunctiva, cerebrospinal fluid, blood culture...
- Cultivation on Chocolatte agar and Blood agar with a Staphylococcal line
- You can also use **PCR**

## Haemophilus influenzae - therapy

- In less serious ones disease -Amoxicillin
- <u>Severe cases</u> -III generation

cephalosporins



- G-aerobic diplococcus
- It can cause fatal diseases meningitis and sepsis
- However, it is often a common part of the microbiota of the pharynx
- Under the microscope it appears as **coffee beans**



 Up to 10% of the human population are asymptomatic carriers, they

have meningococcus on the mucous membrane of the pharynx.

- Neisserie can cause uncomplicated infections, such as pharyngitis.
- Purulent meningitis—typical for children and adolescents

- Purulent meningitis
  - Symptoms
    - Meningeal symptoms
    - Petechiae
    - Septic shock in severe condition
  - When sepsis develops mortality up to 20%
  - Important is submit ATB as soon as possible (sometimes even in an ambulance)

- Diagnostics
  - Microscopy
  - Cultivation
  - -PCR

#### Neisseria meningitidis - Therapy

In acute cases –cephalosporins III generation

### Neisseria gonorrhoeae

- G-aerobic cocci
- Causes gonorrhea it is a sexually transmitted disease (STD)



#### Gonorrhea

- It runs like invasive inflammation of the urogenital mucosa. <u>There is typically a</u> <u>urethral/vaginal discharge</u>.
- In children during childbirth, it can cause
  keratoconjunctivitis (after birth, children are given eye drops)

### Neisseria gonorrhoeae

- Diagnostics microscopy, cultivation, PCR.
- Therapy Ceftriaxone, or according to the antibiogram

#### Moraxella



# Moraxella

- G- aerobic non-fermenting diplococcus to short rods
- It is a common commensal of the respiratory tract
- Can cause sinusitis and otitis (respiratory infection)
- In the immunocompromised bronchitis and bronchopneumonia

# Moraxella

- Diagnostics cultivation
- Therapy:
  - Often resist to β-lactamases
  - Choices are the cure potentized aminopenicillins
    - Amoxicillin/clavulanate, ampicillin/sulbactam