Biological characteristics of water II
Infectious diseases and pathogens

- Types of disease-causing organisms (pathogens): (viruses), bacteria, protozoa, helminthes

Morens et al., Nature, 2004
Typhoid Mary

• Born in 1869. Carrier of *Salmonella typhi*

• 1900-1907: Worked as a cook in New York area

• 1900: After two weeks working as a cook in a house, residents came down with typhoid fever, and the laundress died. Spent months helping to care for the people she made sick, but her care further spread the disease through the household.

• Went to work for a lawyer, and 7 of 8 family members became ill.

• 1906: Took work as a cook on Long Island. Within two weeks, six out of eleven family members were hospitalized with typhoid. She changed employment again and three more households were infected.

http://history1900s.about.com
Typhoid Mary

- Typhoid researcher George Soper approached Mallon with the news she was possibly spreading typhoid, she rejected his request for urine and stool samples.
- Arrested, and found to carry typhoid bacteria, though asymptomatic.
- 1908 nicknamed “Typhoid Mary” in the J. American Medical Association
- Released after promising not to cook again.
- Changed her name and eluded capture for 5 years while spreading the disease.
- Held in custody for 23 years until she died in 1938.
- Positively linked to 10 outbreaks, 53 cases, 3 deaths.
Water: more than just vehicle

- Water-borne: carried in water, transmitted by drinking of water (ex: cholera, typhoid fever)
- Water-washed disease: transmitted by washing and bathing. (ex: trachoma)
- Waste-based disease: pathogens spend all or part of their life in water or need aquatic organisms to complete their life cycle. (ex: Schistosomiasis, diseases by Legionella)
- Water-related disease: transmitted by insects that breed in the water or live near water. (ex: Yellow fever, Malaria)
## Human viruses in water

<table>
<thead>
<tr>
<th>Name</th>
<th>Disease caused</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enterovirus</td>
<td>Paralysis, meningitis, fever, Herpangina, hand-foot-and-mouth disease, myocarditis, heart anomalies, rush, pleurodynia, respiratory disease, gastroenteritis</td>
</tr>
<tr>
<td>Hepatitis A virus</td>
<td>Hepatitis A</td>
</tr>
<tr>
<td>Hepatitis E virus</td>
<td>Hepatitis E</td>
</tr>
<tr>
<td>Rotavirus</td>
<td>Gastroenteritis</td>
</tr>
<tr>
<td>Adenovirus</td>
<td>Gastroenteritis, respiratory disease, conjunctivitis</td>
</tr>
<tr>
<td>Astrovirus</td>
<td>Gastroenteritis</td>
</tr>
<tr>
<td>Coronavirus</td>
<td>Gastroenteritis, respiratory disease</td>
</tr>
<tr>
<td>Torovirus</td>
<td>Gastroenteritis</td>
</tr>
</tbody>
</table>
# Pathogenic bacteria possibly in water

<table>
<thead>
<tr>
<th>Genus</th>
<th>Species</th>
<th>Disease caused</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vibrio</td>
<td><em>V. cholera</em></td>
<td>cholera</td>
</tr>
<tr>
<td></td>
<td><em>V. vulnificus,</em> <em>V. parahaemolyticus</em></td>
<td>gastroenteritis</td>
</tr>
<tr>
<td>Salmonella</td>
<td><em>S. typhimurium</em></td>
<td>salmonellosis, nausea, vomiting, diarrhea, fever, headache, chills</td>
</tr>
<tr>
<td></td>
<td><em>S. enteritidis</em></td>
<td>gastroenteritis</td>
</tr>
<tr>
<td></td>
<td><em>S. typhi</em></td>
<td>typhoid fever, fever, headache, anorexia, coughing, constipation, intestinal hemorrhage</td>
</tr>
<tr>
<td></td>
<td><em>S. paratyphi</em></td>
<td>milder than typhoid fever</td>
</tr>
<tr>
<td>Shigella</td>
<td><em>S. dysenteriae,</em> <em>S. flexneri,</em> <em>S. sonnei</em></td>
<td>shigellosis</td>
</tr>
<tr>
<td>Campylobacter</td>
<td><em>C. jejuni</em></td>
<td>gastroenteritis, food poisoning</td>
</tr>
<tr>
<td>Helicobacter</td>
<td><em>pyroli</em></td>
<td>ulcers, gastritis, duodenitis</td>
</tr>
<tr>
<td>Legionella</td>
<td><em>pneumonophila</em></td>
<td>pneumonia</td>
</tr>
</tbody>
</table>
Pathogenic bacteria possibly in water

• Pathogenic types of *E. coli*
  
  Most types of *E. coli* are harmless, but there are several types that are pathogenic:
  
  – Enterotoxigenic: major cause of traveler’s diarrhea
  
  – Enteropathogenic: major cause of infant diarrhea, can have high fatality
  
  – Enteroinvasive: severe intestinal cramps, watery stools, fever, mild dysentery
  
  – Enterohemorrhagic: one of this type, O157:H7, causes severe cramps, bloody diarrhea, renal failure. Mostly associated with undercooked meat, though waterborne outbreaks have occurred.
## Pathogenic protozoa possibly in water

<table>
<thead>
<tr>
<th>Genus/species</th>
<th>Disease caused</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Entamoeba histolytica</em></td>
<td>Amebic dysentery</td>
<td>500 million infections per year, 100,000 deaths. Transmitted by ingestion of contaminated food and water; flies and cockroaches can serve as vectors.</td>
</tr>
<tr>
<td><em>Giardia lamblia</em></td>
<td>giardiasis (diarrhea, weakness, loss of appetite, cramps, ...)</td>
<td><strong>Resistant to disinfection.</strong> Several outbreaks in developed countries in late 1990s &amp; 2000s.</td>
</tr>
<tr>
<td><em>Cryptosporidium parvum</em></td>
<td>cryptosporidiosis (diarrhea, anorexia, nausea, vomiting, abdominal pain)</td>
<td><strong>Resistant to disinfection.</strong> Quite prevalent: estimated to cause 8-19% of diarrheal diseases in developing countries, several outbreaks in developed countries (e.g., 1993 Milwaukee outbreak* in U.S.)</td>
</tr>
</tbody>
</table>

* Milwaukee cryptosporidiosis outbreak: ~403,000 of 1.61 million residents became ill; >100 deaths
C. parvum life cycle
Parasitic worms (helminthes)

- Flatworms (flukes, tapeworms), roundworms

“The parasitic helminthes infecting the people of certain semitropical countries metabolize more of the produce of those countries than do the inhabitants; and half the work of the sick peasant population is thus put into the cultivation of food for the very worms that make them sick”

Anonymous (1970)
Schistosoma life cycle

1. Eggs hatch releasing miracidia
2. Miracidia penetrate snail tissue
3. Sporocysts in snail (successive generations)
4. Cercariae released by snail into water and free-swimming
5. Cercariae lose tails during penetration and become Schistosomulae
6. Penetrate skin
7. Circulation
8. Migrate to portal blood in liver and mature into adults
9. Paired adult worms migrate to: mesenteric venules of bowel/rectum (laying eggs that circulate to the liver and shed in stools)
10. Venous plexus of bladder

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Parasite Makes Rats More Vulnerable to Cats

By Patricia Reaney

LONDON (Reuters) - A parasite found in mammals causes behavioral changes in rats that makes them more vulnerable to cats, scientists said Wednesday. Rats normally have an innate aversion to their feline foes but British researchers at the University of Oxford have discovered that a parasite called Toxoplasma gondii makes rats less fearful and an easier prey for cats.

The parasite lives in the intestines of cats and is excreted with feces. In infected rats, it alters their behavior toward cats, which eat them, completing the parasite's lifecycle. "Parasites are amazing things, if they can manipulate behavior to increase their chance of completing their life cycle they will," Professor Joanne Webster, a parasitologist at the University of Oxford, said in a telephone interview.

"Toxoplasma gondii is an ideal parasite to do this. It has a two-stage life cycle, with rats as the intermediate host."
"There is a whole suite of behaviors it seems to change, all of which makes them more likely to be preyed on by the cats, the definitive host," said Webster.

The findings, reported in the latest issue of the science journal Proceedings of the Royal Society, are particularly interesting because many humans, including 22 percent of Britons, are infected with the parasite.

"It goes up to something like 87 percent of the French because they are more likely to eat raw and undercooked meat," Webster said.

In most humans the parasite is dormant. But in people with suppressed immune systems, such as AIDS patients or cancer sufferers undergoing chemotherapy treatment, the parasite can become active.

It can reside in any organ but is most common in the brain.

"We shouldn't be ignoring such a prevalent parasite in our brains. Indeed there is evidence that we can expect subtle behavioral differences in humans too," Webster warned.
CALLS FOR RESEARCH IN BEHAVIORAL CHANGES

She called for further neurological research to determine how the parasite can manipulate behavior, which part of the brain is involved and whether the parasite is interacting with neurotransmitters.

Dr. Manuel Berdoy, a zoologist who also worked on the study, said the results could explain reports of altered personalities and IQs in some people.

"Although we clearly represent a dead-end host for the parasite, these symptoms represent the outcome of a parasite evolved to manipulate the behavior of another mammal," he said in a statement.
Pathogenesis of cholera

V. cholerae ingested

V. cholerae sensitive to stomach acid, large dose needed to cause disease in healthy host

Surviving organisms move to small intestine and adhere to mucosa

Toxin production

Severe loss of fluids causes dehydration and electrolyte imbalance

Survival in small intestine depends on attachment, motility, production of mucinase

Fluid flow

Villi
Cholera - effect of human infection

- The cholera cot
- *V. cholerae* in “rice water stool”

- Benefit that *V. cholerae* gets from humans

  Input: 100,000 bacteria
  Human body

  Output: 20,000,000,000 bacteria
  Environmental reservoirs

http://en.hesperian.org

http://medicull.com/vibrio-cholera/
Endemic cholera in Bangladesh

Hospitalization rate for cholera, Matlab, Bangladesh, 1968-1977

Glass et al., J. Epidemiology, 1982
Endemic cholera in Bangladesh

Relationship of season to cholera outbreaks (Matlab, Bangladesh)

Glass et al., J. Epidemiology, 1982
Endemic cholera in Bangladesh

Relationship of season to cholera outbreaks

- Post-Monsoon: October-December
- Pre-Monsoon: June-September
- Monsoon: May-June
Endemic cholera in Bangladesh

N fertilizers in runoff + sunlight in post-monsoon → Algal bloom

Affan et al., Science Alert, 2015
Endemic cholera in Bangladesh

Algal heterocyst
N₂ fixation – attracts microbes, provides nitrogen

Blue-green algae, 
*Anabaena variabilis*

*Copepod* (small crustacean)

*V. cholerae* attaches to chitin surface and feeds on it

<Algal bloom> → <Copepod bloom>

Huq et al. AEM, 1983
Endemic cholera in Bangladesh

• Once humans are infected...

| Input: 100,000 bacteria | Human body | Output: 20,000,000,000 bacteria | Environmental reservoirs |

The “hanging latrine” of Bangladesh

Cholera solutions?

- Removal of hanging latrine
- Drill wells
  - 1985-2000, millions of tube-wells drilled in Bangladesh
  - By 2000, tube-wells supplied water to 97% population

http://environment.nationalgeographic.com
Cholera solutions?

- 50% of groundwater wells: >10 μg/L (46 million persons)
- 28% of groundwater wells: >50 μg/L (28 million persons)
- Arsenic poisoning:
  - Hyperpigmentation (1,200,000 cases/yr)
  - Keratosis (600,000 cases/yr)
  - Skin cancer (125,000 cases/yr)
  - Fatalities (3,000 cases/yr)

“Largest mass poisoning of a population in history”

http://www.rsc.org
Real cholera solutions?

• Filtration of surface water using cloth?
• Rainwater harvesting?
• Other “appropriate technologies” you can think of??