<u>Unit I – Problem 6,7 – Microbiology: Host-Parasite Relationships</u>



- Parasitic organisms:

Bacteria	Small prokaryotic single-called	1m-	- 900	Tanaurarm	
	organisms with a single DNA circular		Coo	Tapewonn	naked
	chromosome and characteristic cell			Intentinal	eye
	walls (example: E.coli)			nematode	-
Viruses	Smaller than bacteria with DNA or			Atien Man Mary	worms
	RNA genome; obligate parasites			Adult	
	which cannot replicate outside host	10-2	- wals	schistosome	a periode
	cells (example: cytomegalovirus	-	1	Adult	
	CMV).	10.2		Trichinella	
	Eukaryotes with cell walls containing	10-2	69	Larval worm	
Fungi	chitin, cellulose (or both of them);				U.a.b.t
	from germinative spores (example:				microscope
	Candida albicans).				
Protozoa	Single-called eukaryotic organisms			Amoeba	T
	with several organelles; simple or			Trypanosome	- protozoa
	complex life cycles (example:			Plasmodium	
	Plasmodium falciparum)			l.	
Helminthes Arthropods	Small to large metazoan or	10-6-	- 33-520	Staphylococcus	- bacteria
	multicellular organisms, or worms		00000000		
	with simple to complex life cycles		0000000000	Pox virus	
	(example: A.lumbricoides).			Influenza virus	
	Organisms with jointed appendages;		Con		electron
	mostly ectoparasites (example:	10-8		Polio visus	microscope
	S.scabiei).	10-3-6	- AXX	Follo virus	a des anyone der

- Relationships of microbes to the host:

- **Mutualism**: there is reciprocal benefit between both the microbe and the host.
- **Commensalism**: host will provide shelter and food for the microbe while it will cause no harm.
- Parasitism: microbe causing harm to its host with varying degrees.
- What is the difference between prokaryotes and eukaryotes?



- <u>Sterile (microbe-free) anatomical sites and fluids:</u>

Tissues and	Heart and circulatory system, liver, kidneys, brain, lungs, muscles,						
organs	bones, ovaries/testes and glands (pancreas, salivary, thyroid).						
Fluids of the body	Blood, urine, cerebrospinal fluid, semen and amniotic fluid						
Find of the body	surrounding the fetus.						

- Sites which contain normal flora:
 - Skin, Upper Respiratory Tract (URT), gastrointestinal tract, external genitalia, vagina, external ear canal and external eye (lid + conjunctiva).

• Normal flora are considered as a common source of infection when they are present in the wrong site (not in their original place). In addition, they protect the sites which they live in from harmful external pathogens.





- Host-Parasite Relationship in Infection and Disease:

- **Encounter**: agent meets the host which it is going to invade.
- Entry: agent enters the host.
- **Spread**: agent which entered the host can remain localized or spread to other parts of the body.
- Growth: agent multiplies or completes its life cycle in the body.
- **Outcome**: either agent or the host win the battle at the end, or both of them will learn to co-exist with each other.

- What might be the sources of infection?

- Soil and decayed matter.
- Water contaminated with human/animal waste.
- Food (unwashed vegetables, raw meat and milk).
- Air and aerosols and dust.
- Reservoir hosts.
- What are the modes of transmission?
 - **Inhalation**: air or aerosol-borne infective organisms.
 - **Ingestion**: contaminated/infected food and water; unwashed hands.
 - **Contact**: direct with the skin or penetration through mucous membranes (oral, nasal, urethral or vaginal).
 - Contamination of cuts and wounds.
 - Arthropods and animal bites.
 - Organ/tissue transplant and blood transfusion.
 - Congenital/transplacenta (through the placenta).
 - Perinatal (during delivery of the baby through birth canal).



- Host-parasite interface:

- It can cause a localized infection in which the site can be determined.
- Infection can spread to other areas through the following:
 - \checkmark Active migration (movement of the parasite itself in the body of the host).
 - ✓ Passive carriage (through blood, lymph or body fluids).
 - ✓ Intracellular carriage (e.g. semen macrophages carry HIV).
- Host must provide a proper physiological environment for the host so it can survive. This is represented by optimal pH, temperature, O₂ and CO₂.
- Some cell membranes might contain receptors or adhesion molecules which make it easy from the parasite to adhere and enter cells of the host.
- Notice that TOLL-like receptors (Pattern Recognition Receptors) recognize pathogens by molecular pattern shared by large groups of microorganisms.





Bacteria Sk

- Human infections transmitted via urine:

Schistosomiasis	Parasite eggs are excreted in urinary bladder
Typhoid	Bacterial persistence in urinary bladder scarred by Schistosomiasis
Polyomavirus infection	Commonly excreted in urine in normal pregnancy.
Cytomegalovirus infection	Commonly excreted in infected children.

- Human infections transmitted via saliva:

Herpes simplex virus Infection generally during childhood		
Cytomegalovirus and EBV	Adolescent/adult infection is common	
Pabios virus	Shed in saliva of infected dogs, wolves, jackals and	
Kables vil us	vampire bats	

- Transplacental transmission of infection:

Rubella virus, cytomegalovirus	Placental lesion, abortion, stillbirth or malformations.		
HIV	Childhood AIDS		
Honotitic D views	Antigen carriage in infant, but most of these		
nepatitis d virus	infections are perinatal or postnatal.		
Treponema pallidum	Stillbirth, congenital syphilis with malformations		
Listeria monocytogens	Meningoencephalitis		
Toxoplasma gondii	Stillbirth and CNS disease		

What are the factors which increase the risk for infections?

- Changes in environment/ecosystem.
- Changes in food production and food handling.
- Routine use of antibiotics in medicine (which creates more resistance).
- Altered sexual/social habits.
- Increased population and housing densities.

