

VIRAL GASTROENTERITIS

Gastroenteritis : Diarrhea is one of the leading causes of death in developing countries, responsible for 25-30% of deaths among children younger than five years of age.

- Diarrhea and vomiting syndromes lasting less than two weeks are classified as acute gastroenteritis.
- This disease is characterized by watery diarrhea, dysentery, or/and accompanied by bloody diarrhea, fever, dehydration, vomiting, nausea and abdominal pain.
- Acute gastroenteritis is a major cause of childhood morbidity and mortality, especially in developing countries.
- More than 1 billion cases of acute diarrhea are estimated to occur annually in children and adults worldwide, and are responsible for an annual mortality rate of about 6 million children under 5 years of age.

The causes of ACUTE DIARRHEA

- Staphylococcus aureus
- Viral gastroenteritis
- Clostridium perfringens
- Salmonella
- Shigella
- Cryptosporidiosis
- Drug-induced diarrhea
- Clostridium difficile

Viral Gastroenteritis

- The etiological agents of diarrhea are numerous, including multiple viral, bacterial, and parasitic pathogens.
- Viral infection which accounts for 51-88% incidence is the most important, whereas bacterial infection (9-13%).
- Several different groups of viruses have been shown to be responsible for the high incidence of acute viral diarrhea among children during their first few years of life.
- Usually five types of viruses are the main causes of this infection in all over the world: Rotaviruses, Norovirus, Sapovirus, Astroviruses and Adenoviruses.

Among viruses, Rotavirus group A is the major causative pathogen, but the roles of Norovirus, Sapovirus, Astrovirus and Adenovirus are increasingly being recognized

Rotavirus

- First described in 1973 by electron microscopy from duodenal biopsy specimens
- Causes 40-60% of cases of diarrhoea in cooler months in infants and children < 2 years
- Rotavirus is a member of the Reoviridae family. Its genome consists of eleven double-stranded RNA segments.
- Rotavirus is classified into seven distinct groups (A-G). However, only groups A, B and C have been identified in humans, and the most common group leading to outbreaks is group A Rotavirus.
- Rotavirus diarrhea is an acute infection primarily of children less than 2 years of age, characterized by watery diarrhea and vomiting.

The viruses have a worldwide distribution and are recognized as the most important viral cause of acute gastroenteritis in children

Morphology-Rotaviruses

- Reoviridae Family
- Non-enveloped icosahedral structure, 70nm
- EM: Wheel shape
- Capsid: Outer(VP7 and 4) and Inner(VP6) proteins
- Core encloses 11 segments of DS RNA
- ~spherical; icosahedral, ~75-80 nm diameter, double-layered capsid

Nucleic acid:

- double-stranded RNA, 11 segments (rota) ; 10 segments (reo)
- electropherotypes : 7 Groups (A-G) by VP6, Subgroups, serotypes
- Group A most important in humans (children)
- Group C causes sporadic illness
- Group B has caused large outbreaks (adults), rare,

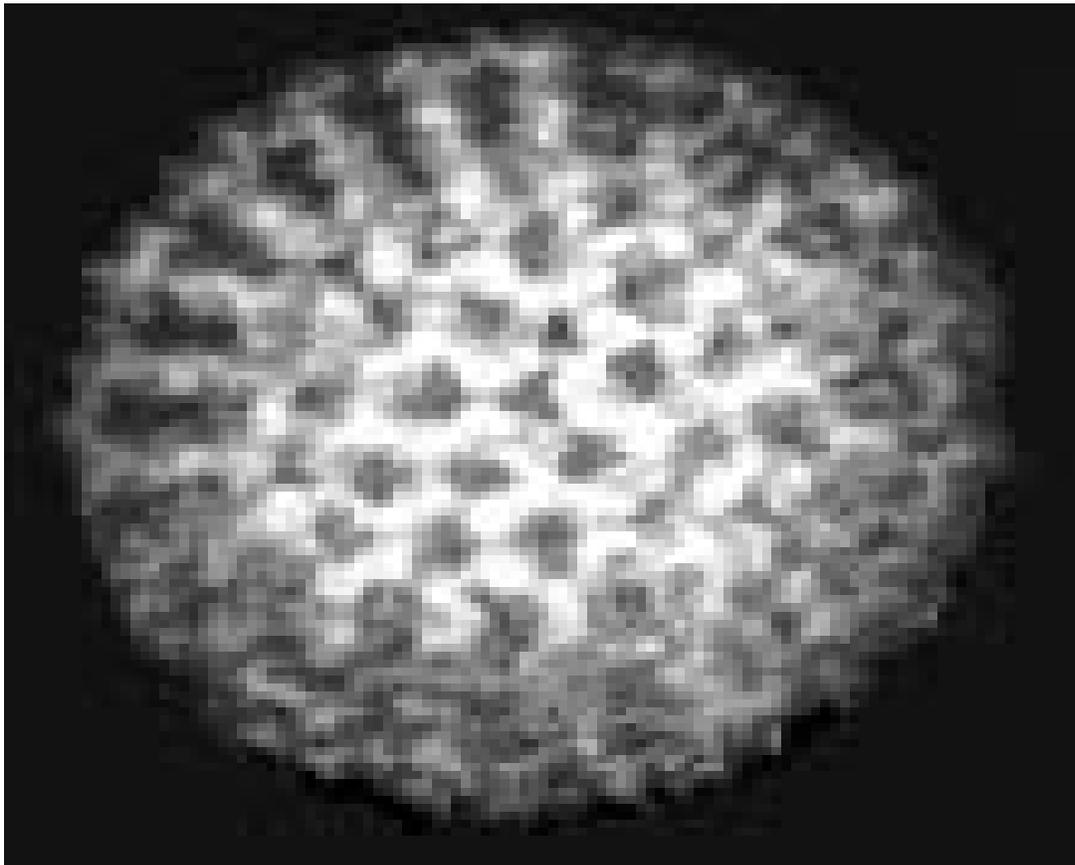
Genome encoded Structural proteins VP1-7 and NSP 1-5, NSP4 has enterotoxinlike activity

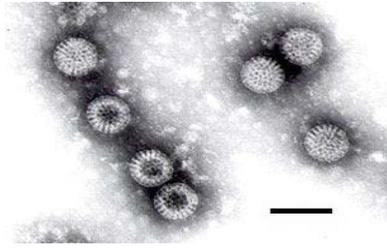
Outer structural proteins - VP7 and VP4, Viral surface glycoprotein activated by stomach trypsin

VP7=glycoprotein, VP4=protease-cleaved, P protein, viral hemagglutinin, and forms spikes from the surface,

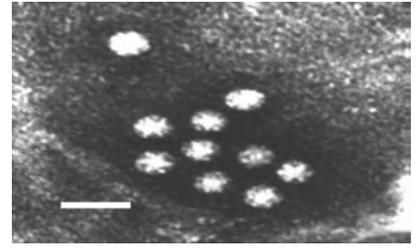
- Inner core structural proteins VP 1, 2, 3, 6;
- VP6 is an important antigenic determinant

- Targeted host cells- mature enterocytes lining the tips of intestinal villi
- Intermediate/infective sub-viral particle (ISVP) produced through proteolysis(Trypsin treatment)
- Enter host cell by endocytosis
- Virus replicates in the host cell cytoplasm

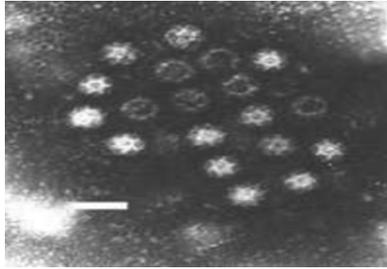
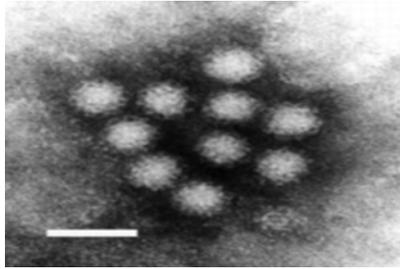




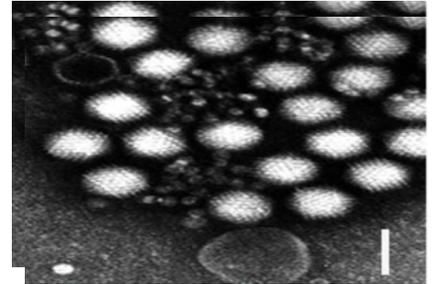
Rotavirus



Astrovirus

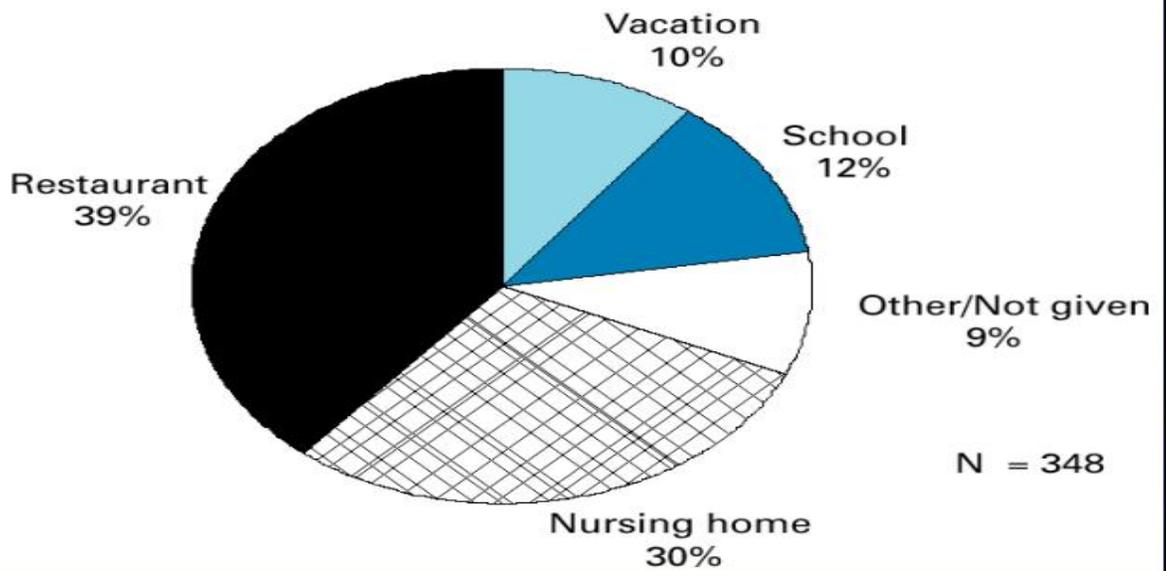


Sapovirus



Adenovirus

FIGURE 2. Mode of transmission of 348 outbreaks of gastroenteritis reported to CDC during January 1996–November 2000*



Epidemiology of Rotavirus

- Incubation period : 2-4 days
- Those affected :4-24 month old infants, infection before and reinfection after this usually asymptomatic (Breastfeeding results in milder disease)
- Spread within families and institutions
- Most common cause of noscomial diarrhoea
- Human to human, faecal-oral route
- Found on fomites in childcare
- Main cause of severe diarrhoea in children < 5 years
- 130 million episodes per year in the world
- Between 600,000-870,000 deaths, mostly in the developing world
- Rate of hospitalisation in developed world 2.5%
- Seasonal pattern
- Most persons infected by 3 years of age
- Group A predominates
- Mainly person to person via fecal-oral route
- Fomites
- Food and water-borne spread is possible
- Spread via respiratory route is speculated
- Virus is stable in the environment
- Relatively resistant to handwashing agents
- Susceptible to disinfection with 95% ethanol, 'Lysol', formalin

Immune Response to Rotavirus

- Localised Immune response protects against severe subsequent infections
- NSP4 protein results in cell mediated immunity
- Immunity: infection induces specific Ig G/A/M even if there is previous exposure
- 2 weeks post infection there is ↑ in jejunal Ig A , resistance to reinfection lasts 4-6 months,
- NO LONG TERM PROTECTION

Pathogenesis

- Accounts for >85% of non-bacterial outbreaks of gastroenteritis
 - DIARRHOEA
 - VOMITING
 - Commonly accompanied by fever, malaise, myalgia and abdominal cramps
 - Symptoms last 1 day to 2 weeks
 - Virus excreted 5 to 7 days after the onset of symptoms in half of people although may last 13 days

Rotavirus replication:

- Targeted host cells- mature enterocytes lining the tips of intestinal villi
- Intermediate/infective sub-viral particle (ISVP) produced through proteolysis (Trypsin cleavage)
Enter host cell by endocytosis Virus replicates in the host cell cytoplasm
- mRNA transcription with viral RNA polymerase

- Capsid proteins formed
- mRNA segments formed, assembled into immature capsid
- mRNA replicated to form double stranded RNA genome
- Mature enterocytes lining the tips of intestinal villi are affected
- Villous atrophy and blunting
- Death of the mature enterocytes



Vaccine

- Live tetravalent rhesus-human reassortant vaccine (*Rotashield*)
Licensed for use in August 1998
- Removed from the market in October 1999 due to risk of intussusception
Cases were seen 3-20 days after vaccination

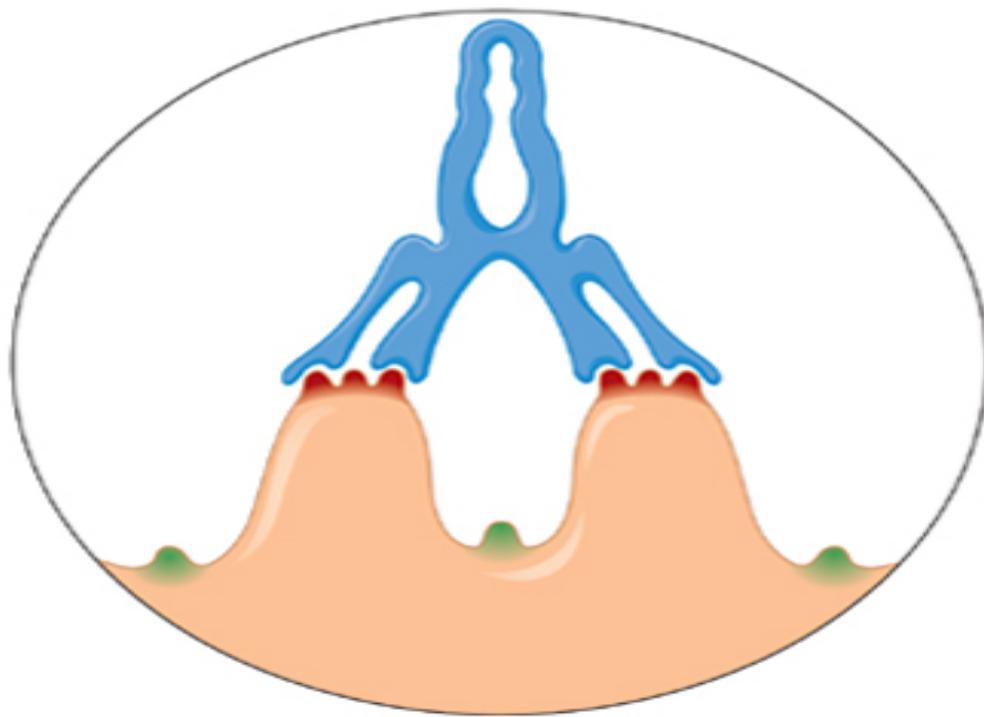
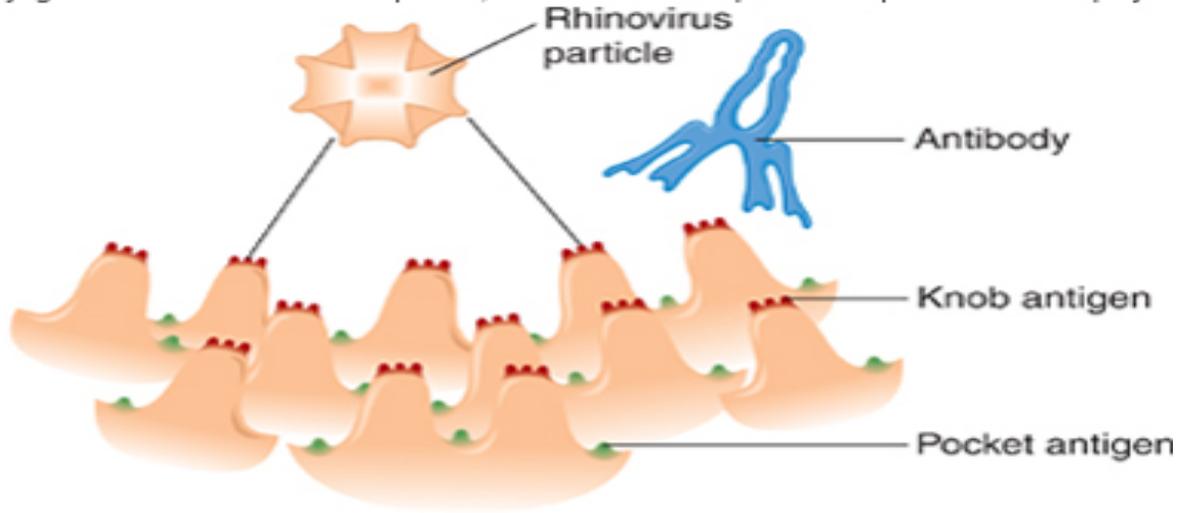
Diagnosis

- Antigen detection in stool by ELISA, LA (for Group A rotavirus)
- EM- non-Group A viruses also
- Culture- Group A rotaviruses can be cultured in monkey kidney cells
- Serology for epidemiologic studies :

Latex agglutination Kit testing for Group A , Rv antigen in stool Group A
Enzyme Immunoassay, Less common EM and molecular methods



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Adenovirus

- Adenoviruses are viral particles with double-stranded DNA. There are six groups of adenoviruses (A-F).
- There are two serotypes 40 and 41 belonging to group F which result gastroenteritis therefor referred as enteric Adenoviruses.
- Enteric Adenoviruses are the second commonest cause, after Rotaviruses, of viral diarrhea requiring hospitalization of young children.
- Disease develops after an 8- to 10-day incubation and is characterized by watery diarrhea that lasts for 10 days. Vomiting and fever may occur. Secondary lactose malabsorption has been associated.

Most cases in developing countries are in children under 2 years of age

Norovirus

- Norovirus and Sapovirus are two genera belonging to the Caliciviridae family, which infect humans.
- They are small non-enveloped viruses with icosahedral symmetry that contain a single-strand-positive sense RNA.
- Norovirus (previously called “Norwalk-like viruses”) together with Sapoviruses are caliciviruses causing acute viral gastroenteritis in humans.
- The clinical symptoms include diarrhea, vomiting and fever. The Caliciviruses cause diarrhea and vomiting of abrupt onset and short duration.
- Diarrhoea may occur without vomiting and vomiting without diarrhea.
- Noroviruses are divided into five genogroups. The genogroups are further divided into genotypes, currently there are eight types in genogroup I (GI), at least 17 in GII and two in GIII. GI, GII and GIV infect humans.

- **GII has been described as the predominant strain around the world. Numbers of recent studies have investigated the prevalence of Norovirus infection in hospitalized children.**

A wide range of prevalence (6–48%) were reported with a median of 14% and in some studies Norovirus associated gastroenteritis was almost as common as Rotavirus infections indicating that Noroviruses may be clinically more relevant than previously thought

Sapovirus

- **Sapoviruses are divided into seven genogroups (GI-GVII), among which GI, GII, GIV and GV are known to infect humans.**

Sapoviruses have been described in association with both outbreaks and sporadic cases of acute gastroenteritis in both young children and adults

Astrovirus

- **Astrovirus belongs to the Astroviridae family and is a small non-enveloped virion. It contains a single-stranded positive-sense RNA and its characteristic five- or six-pointed star morphology has been detected by electron microscopy.**
- **Eight human Astroviruses genotypes (1-8) have been described, and human Astroviruses -1 has been reported as the most prevalent type in both developing and developed countries.**

Epidemiologic studies have revealed that Astrovirus is one of the significant causes of gastroenteritis in children