

#### **BHARATHIDASAN UNIVERSITY**

Tiruchirappalli- 620024
Tamil Nadu, India.

**Programme: M.Sc., Biomedical Science** 

Course Title : Clinical Microbiology

Course Code: 18BMS48C15

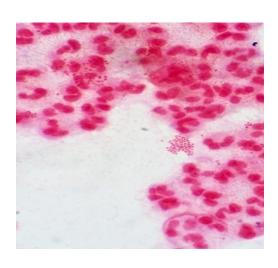
**Unit-III** 

**TOPIC: Neisseria** 

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## NEISSERIA



### Introduction

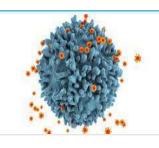


- *Neisseria* is a large genus of <u>bacteria</u> that colonize the <u>mucosal</u> surfaces of many animals.
- Of the 11 species that colonize humans, only two are <u>pathogens</u>, <u>N. meningitidis</u> and <u>N. gonorrhoeae</u>.

## Neisseria Gonorrhea

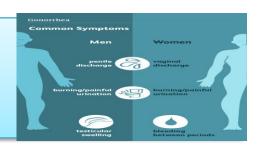
- Causative agent Neisseria gonorrhoeae (Gonococcus)
- Albert Ludwig Sigesmund Neisser in 1879 discovered the causative organism, Neisseria gonorrhoeae. His results were published in 1882.
- Gram negative diplococci. coffee-bean-shaped cocci and have a diameter of approximately 11m

# Pathogenesis



- Gonorrhea is a sexually transmitted disease.
- The pathogens penetrate into the urogenital mucosa, causing a local purulent infection. In men, the prostate and epididymis can also become infected.
- In women, the gonococci can also cause salpingitis, oophoritis, or even peritonitis infected.

## Gonorrhoea Symptoms



- Burning sensation during urination.
- Discharge from the genitalia (Vaginal / penis).
- Testicular pain(male), pelvic pain (Female).
- Vaginal bleeding between periods.





MALE

FEMALE

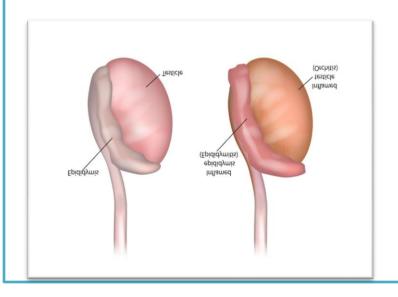
- Half of women with gonorrhea are asymptomatic.
- Other half experience vaginal discharge, lower abdominal pain and pain with sexual intercourse.

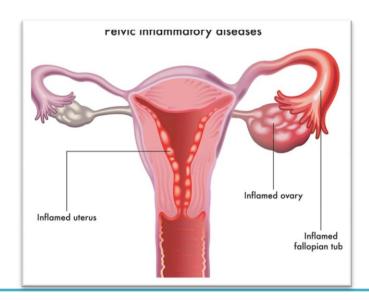
#### Complications;

Women – pelvic inflammatory disease(PID)

Men – inflammation of the epididymis.

If untreated it can spread to joints or heart valve.





## Mode of transmission



- Through sexual contact with an infected person.
- From mother to a child during birth(vertical transmission).
- Through objects contaminated with body fluid from an infected person.
- The bacteria does not survive long outside the body, typically dying within minutes to hours.
- Gonorrhea affects about 0.8% of women 0.6% of men.
- **Incubation period**: 2-5 Days.

## Ophthalmia Neonatarum

- Gonococcal ophthalmia(Neonatal Conjunctivitis) will develop in 28% of infants born to women with gonorrhea, if not treated.
- Contracted during vaginal delivery from exposure to bacteria from birth canal.
- Erythromycin ointment applied to the newborn's eyes within 1hour of birth prevents gonococcal ophthalmia.
- If left untreated neonatal conjunctivitis can cause blindness.



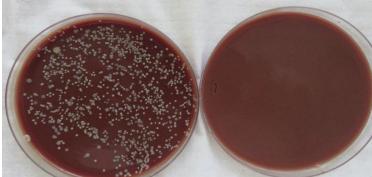
## Diagnosis

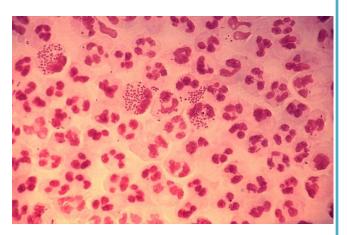


- Grams staining (pus, lesions, genital discharge)
  - Gram negative diplococci.

Bacterial culture using

Thayer – martin agar.



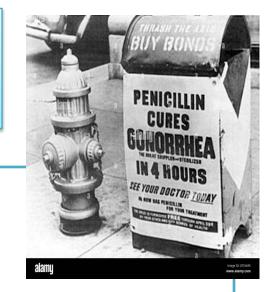


#### Treatment

- Penicillin
- Ampicillin
- Tetracycline
- Cefixime + azithromycin (dual antibiotic therapy)
- PREVENTION:

Use condoms

Have safe sexual practices



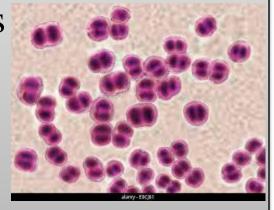
Tablets

SANOFI

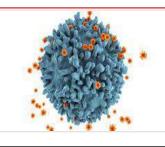
Azithromycin

#### NEISSERIA MENINGITIDIS

- Meningococci are Gram-negative, coffee-bean shaped
- cocci that are frequently pleomorphic and have a diameter of 1 lm
- They are nonmotile and feature a polysaccharide capsule.
- Growing meningococci in cultures requires mediums containing blood.
- A concentration of 5–10% CO2 encourages proliferation.



# Pathogenesis



- Meningococci are parasites of the nasopharynx.
- These microorganisms are carried by 5–10% of the population.
- If virulent meningococci colonize the nasopharyngeal mucosa of a host lacking the antibodies, pathogen invasion of the mucosa by means of "parasite directed endocytosis" becomes possible

# Symptoms



- Common symptoms of meningococcal meningitis include sudden fever, headache, and stiff neck.
- Other symptoms may include nausea, vomiting, increased sensitivity to light, and confusion

## Diseases

- N. meningitidis is the most common cause of meningitidis in persons between the ages of 2 and 18 years.
- Outbreaks of meningitidis are most common in winter and early and favored by close contact between individuals Meningitis.
- Meningococcemia(multiplication of bacteria in the blood stream)

## Diagnosis



- It is frequently isolated from samples such as blood, CSF.
- For success in culturing, the material must be used to inoculate blood agar without delay.

#### Methods

Gram staining

Culture(blood agar or chocolate agar)

Oxidase test.



- Oxidase test:
- ❖ Determines the presence of cytochrome oxidase. It is positive In N. Meningitidis



## Treatment and prevention

- Penicillin G or sulphonamides are the drugs of choice.
- Chloramphenicol or third generation cephalosporin such as cefotaxime or ceftriaxone are recommended for patients who are allergic to penicillin.
- Meningococcal vaccine is available which contains the capsular polysaccharide.

#### References

Adelberg. (2000). Review of Medical Microbiology. 19th edition. Lange Medical publications. U.S.A.

Ananthanarayan R. and C.K. Jeyaram Panikar. (1994). Text book of Microbiology. Orient Longman.

